

## MEDICAL SUPPORT POLICY

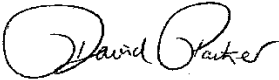
<b>RESPONSIBILITY:</b>	<b>LEARNING &amp; ACHIEVEMENT COMMITTEE</b>
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<b>PROPOSED BY:</b>	<b>SENDCO</b>
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<b>TYPE OF POLICY:</b>	<b>RECOMMENDED</b>
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<b>ON WEBSITE:</b>	<b>YES</b>
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<b>DATE AGREED BY LEARNING &amp; ACHIEVEMENT COMMITTEE</b>	<b>26 NOVEMBER 2020</b>
<b>FREQUENCY OF REVIEW:</b>	<b>3 YEARLY</b>
<b>NEXT REVIEW:</b>	<b>NOVEMBER 2023</b>

<b>APPROVED BY:</b>	<b>FULL GOVERNING BODY</b>
<b>DATE APPROVED AND ISSUED:</b>	<b>14 DECEMBER 2020</b>
<b>SIGNATURE:</b>	 <b>CHAIR OF GOVERNORS</b>

**In reviewing this policy, the Learning & Achievement Committee has taken into account the provisions of the Equality Policy 2016**





# **Supporting Students at School with Medical Conditions**

## **Introduction**

The aim of this policy is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

Parents/Carers of children with medical conditions are often concerned that their child's health will deteriorate when they attend school. This is because students with long-term and complex medical conditions may require ongoing support, medicines or care while at school, to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. It is therefore important that Parents/Carers feel confident that the school will provide effective support for their child's medical condition and that students feel safe.

In addition to the educational impacts, there are social and emotional implications associated with medical conditions. Children may be self-conscious about their condition and some may be bullied or develop emotional disorders, such as anxiety or depression, around their medical condition. In particular, long-term absences due to health problems affect children's educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health. Reintegration back into school should be properly supported, so that children with medical conditions fully engage with learning and do not fall behind when they are unable to attend. Short-term and frequent absences, including those for appointments connected with a student's medical condition (which can often be lengthy), also need to be effectively managed and appropriate support put in place to limit the impact on the child's educational attainment and emotional and general wellbeing.

Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case, the governing body will comply with their duties under that Act. Some may also have special educational needs (SEN) and may have an Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For students who have medical conditions that require EHC plans, the school will comply with the SEND code of practice and will ensure compliance with this guidance with respect to those children.

## **School Responsibilities**

The person with overall responsibility for the implementation of this policy is the SENDCO, who will work closely with the Assistant SENDCO and the Medical Student Welfare officer to ensure that all individual plans and procedures are fully implemented.

To ensure that all students with medical conditions' needs are met the school will implement the following.

- All staff will be made aware of students who have particular medical conditions. Information about SEN students who have medical conditions is included as part of the Achievement and Inclusion booklet issued to staff at the beginning of each academic year. Information about students' medical conditions is available on SIMS and also on the staff intranet – Staff/Medical/Medical Conditions List. This information is updated and passed to staff as needed and all staff are reminded to regularly check the information as it is updated throughout the year.
- The Medical Student Welfare Officer will be available at all times and located in the medical room. In the case of staff absence, a cover will be placed in the medical room to ensure that someone is always available for students.
- Cover supervisors or supply teachers will be briefed on students with medical conditions as required.
- Risk assessments will be completed for students with medical conditions if they are attending a school trip or visit or any activity outside of the normal timetable
- The Medical Student Welfare Officer will compile individual healthcare plans and ensure that these are available to staff on the SIMS system.
- The Medical Student Welfare Officer will ensure that all staff are aware of who has a medical healthcare plan and update staff as needed if a new medical condition arises within the student body.
- When a new student with a medical condition joins the school, or a current student has a newly diagnosed condition, the Medical Student Welfare Officer will ensure that every effort is made to put new arrangements for care in place within a two week timeframe.

## Individual Healthcare Plans

The school will manage individual healthcare plans as follows:

- Students may transition from year 8 to year 9 with a current healthcare plan. If this is the case, the plan should be adapted to reflect how Vandyke will meet the requirements of the plan and will be made available to staff.
- If a student is diagnosed with a medical condition whilst on roll at Vandyke, then it is the responsibility of the Medical Student Welfare Officer to develop a healthcare plan, in conjunction with the SENDCO or the Assistant SENDCO if applicable.
- Plans should be written and reviewed in conjunction with Parents/Carers or a healthcare professional who is involved with providing care to the child. Students should be involved in the production of a plan where appropriate.
- Plans should be reviewed annually, or earlier if evidence is presented that the child's needs have changed, in liaison with Parents/Carers.

What should be included on an individual healthcare plan?

- The medical condition, its triggers, signs, symptoms and treatments.

- The student's resulting needs, including medication (dose, side-effects and storage), other treatments, time facilities, equipment required, testing, access to food and drink if this is used to manage the condition, dietary requirements and environmental issues, e.g. managing crowded corridors during movement times.
- Specific support for the student's educational or social emotional needs - for example, how absences will be managed, requirements for extra time to complete exams, rest periods, etc.
- The level of support needed, including in emergencies. If a child is self-managing medication, this should be clearly stated with appropriate arrangements for monitoring.
- Details of who will provide support and their training needs.
- Arrangements for written permission from Parents/Carers and the head teacher for medication to be administered by a member of staff, or self-administered by the student in school hours.
- Arrangements for school trips, or other activities that take place outside of school, including risk assessments.
- What to do in an emergency, including who to contact and contingency arrangements.
- In the event of an emergency evacuation, the evacuation procedure under the school emergency plan will be followed unless a student has been identified as having a specific need. In this instance, an individual evacuation plan will be incorporated into the student's medical care plan.
- Where confidentiality issues are raised by the Parent/Carer, the designated individuals to be entrusted with the information about the child's condition.

## **Roles and Responsibilities**

### **SENDCO and Assistant SENDCO**

The SENDCO and Assistant SENDCO are responsible for liaison with middle schools and ensuring that all information about SEND students with medical conditions or current healthcare plans are passed through to the Medical Student Welfare Officer. The SENDCO and Assistant SENDCO should also ensure that information is disseminated to all staff about SEND students who require medication, in order to support their individual special education needs.

### **Medical Student Welfare Officer**

The Medical Student Welfare Officer is responsible for checking and adapting healthcare plans when a student moves from middle school to Vandyke Upper School. This could include liaison with Parents/Carers and the student to ensure that all needs have been accounted for. The Medical Student Welfare Officer is also responsible for developing new healthcare plans, in conjunction with the SENDCO or Assistant SENDCO if applicable. Once the plans are written, the Medical Student Welfare Officer will then ensure that plans are published on SIMS and that staff are made aware of

any students with plans. The Medical Student Welfare Officer will also review and adapt plans annually as needed, in liaison with Parents/Carers.

In addition to this, the Medical Student Welfare Officer will ensure that staff have information on any other medical conditions that do not require healthcare plans.

### **Teachers and Support Staff**

It is the responsibility of teachers and support staff to ensure that they read and familiarise themselves with healthcare plans and any information provided to them about students with particular medical conditions or special educational needs. Any member of staff should know what to do and respond accordingly when they become aware that a student with a medical condition needs help.

### **The Governing Body**

The governing body must make sure that the policy for supporting students with medical conditions is developed and implemented. They should ensure that staff have completed suitable training to deal with students who have medical conditions.

### **Parents/Carers**

Parents/Carers should provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents/Carers are key partners and should be involved in the development and review of their child's individual healthcare plan and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide up-to-date medicines and equipment and ensure they or another nominated adult are contactable at all times.

### **Students**

Students with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other students will often be sensitive to the needs of those with medical conditions.

### **School Nurse**

The school nurse should be available to provide advice and support for the Medical Student Welfare Officer or other staff involved with a student who has a particular medical condition as needed. The school nurse should also be utilised to provide

training to staff on how to deal with a particular condition, or how to administer medication if this is required.

## **Medications on the School Site**

There are cases where students require medication during the school day. In this instance, the following procedures will be followed:

- Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- No student under 16 will be given prescription or non-prescription medicines without their Parent's/Carer's written consent – except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the Parents/Carers. In such cases, every effort will be made to encourage the child or young person to involve their Parents/Carers, while respecting their right to confidentiality.
- Students under 16 will never be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. for pain relief, will never be administered without first checking maximum dosages and when the previous dose was taken. Parents/Carers will be informed.
- If a student requires a prescribed medicine, then the school will only accept prescribed medicines if these are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin, which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container.
- All medicines will be stored safely in the medical room, which is supervised by the Medical Student Welfare Officer. Students will know where their medicines are at all times and be able to access them immediately from the medical room as needed. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will be always readily available to children and not locked away. When school trips take place, trip supervisors will be briefed on the administration of medication by the Medical Student Welfare Officer. They will have full training on how to administer a medication if it is a required and a full risk assessment will be undertaken.
- When no longer required, medicines will be returned to the Parent/Carer to arrange for safe disposal. Sharps boxes will always be used for the disposal of needles and other sharps.
- A student who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. This will be monitored very closely by the Medical Student Welfare Officer. The school will otherwise keep controlled drugs that have been prescribed for a student securely stored in a non-portable container and only named staff will have access to this. All controlled drugs will be accessible via the medical room in an emergency. Records will be kept of any doses used and the amount of the controlled drug held.

- School staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines will do so in accordance with the prescriber's instructions. The school will keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school will be noted.
- Clear written records of any medications used on the school site will be maintained by the Medical Student Welfare Officer.

## **Emergency Procedures**

In the case of a medical emergency, staff will remain with a student and ask another member of staff to immediately call for the Medical Student Welfare Officer or a designated member of staff with first aid training. Emergency services will be called immediately and Parents/Carers contacted. If a student needs to be taken to hospital, then staff should stay with the student until the parent arrives, or accompany a student to hospital by ambulance.

## **Day Trips, Residential Visits and Sporting Activities**

Teachers should be made fully aware of any student with a medical condition who they are taking on a trip or visit. A meeting should take place between the Parents/Carers and the trip leader if required and a full risk assessment completed. The school will always endeavour to be inclusive to all students and make reasonable adjustments in order to accommodate a student's medical needs. If however, following a meeting with Parents/Carers and taking advice from medical professionals such as the school nurse, it is deemed unsafe to take a student on a trip or visit, then the school reserves the right to refuse a student a place on a trip or visit.

## **Unacceptable Practice**

The school will endeavour to make a student with a medical condition as comfortable at school as possible and, with this in mind, will work hard to avoid the following:

- preventing students from easily accessing their inhalers and medication and administering their medication when and where necessary
- assuming that every child with the same condition requires the same treatment
- ignoring the views of the child or their Parents/Carers; or ignore medical evidence or opinion (although this may be challenged)
- sending children with medical conditions home frequently for reasons associated with their medical condition, or preventing them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans



- if the child becomes ill, sending them to the school office or medical room unaccompanied or with someone unsuitable
- penalising children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- preventing students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- requiring Parents/Carers, or otherwise making them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No Parent/Carer should have to give up working because the school is failing to support their child's medical need.

## **Liability and Indemnity**

The appropriate level of insurance is in place through the Department for Education's Risk Protection Arrangement (RPA). This provides liability cover relating to the administration of medication and fulfilment of professional duties by staff.

Insurance policies should be accessible to staff providing such support.

## **Complaints**

Should Parents/Carers or students be dissatisfied with the support provided, they should discuss their concerns directly with the Medical Student Welfare Officer, the SENDCO, or the Assistant SENDCO. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.