

Supporting Pupils with Additional Medical Needs Policy

Loatlands Primary School

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School Lead	Kelly Davidson (Family Support Worker)		

Document History		
Date	Reviewer	Note of revisions
2024	Kelly Davidson	There have been a number of these policies in existence over recent years but these have never been numbered and therefore, for the purposes of this review, this document is named as a Version 2. Changes to the document have not been material on this occasion but have related to secretarial changes such as those involving formatting and the changes of names of key personnel that have changed since the last policy review. This document history front cover has also been added to the document

Supporting Pupils with Additional Medical Needs Policy

*This policy sets out the duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions under Section 100 of the Children and Families Act 2014. In meeting the duty, the governing body, proprietor or management committee **must** have regard to guidance issued by the Secretary of State under this section (Supporting pupils at school with medical needs (DfE, April 2014)).*

Section 100 came into force on 1 September 2014.

School Context

The staff at Loatlands Primary School are committed to providing pupils with a high quality education whatever their health need, disability or individual circumstances. We believe that all pupils should have access to as much education as their particular medical condition allows, so that they maintain the momentum of their learning whether they are attending school or going through periods of treatment and recuperation. We promote inclusion and will make all reasonable adjustments to ensure that children and young people with a disability, health need or SEN are not discriminated against or treated less favourably than other pupils.

Principles

This policy and any ensuing procedures and practice are based on the following principles.

- All children and young people are entitled to a high quality education;
- Disruption to the education of children with health needs should be minimised;
- If children can be in school they should be in school. Children's diverse personal, social and educational needs are most often best met in school. Our school will make reasonable adjustments where necessary to enable all children to attend school;
- Effective partnership working and collaboration between schools, families, education services, health services and all agencies involved with a child or young person are essential to achieving the best outcomes for the child;
- Children with health needs often have additional social and emotional needs. Attending to these additional needs is an integral element in the care and support that the child requires; and that
- Children and young people with health needs are treated as individuals, and are offered the level and type of support that is most appropriate for

their circumstances; staff should strive to be responsive to the needs of individuals.

As a school we will always follow good practice:

- We will follow all children's individual healthcare plans.
- We will authorise any absences related to children's medical condition and any medical appointments.

Definition of health needs

For the purpose of this policy, pupils with health needs may be:

- pupils with **chronic or short term health conditions or a disability** involving specific access requirements, treatments, support or forms of supervision during the course of the school day or
- **sick children**, including those who are physically ill or injured or are recovering from medical interventions, or
- children with **mental or emotional health problems**.

This policy does not cover self-limiting infectious diseases of childhood, e.g. measles.

Some children with medical conditions may have a disability. A person has a disability if he or she has a physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities. Where this is the case, governing bodies **must** comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision.

Roles and Responsibilities

All staff have a responsibility to ensure that all pupils at Loatlands have equal access to the opportunities that will enable them to flourish and achieve to the best of their ability. In addition, designated staff have additional responsibilities as well as additional support and training needs.

Named person in school with responsibility for medical policy implementation

The member of staff responsible for ensuring that pupils with health needs have proper access to education is Kelly Davidson (Family Support Worker) and will be the person with whom parents / carers will discuss particular arrangements to be made in connection with the medical needs of a pupil. It

will be her responsibility to pass on information to the relevant members of staff within the school.

Kelly Davidson will liaise with other agencies and professionals, as well as parents / carers, to ensure good communication and effective sharing of information. This will enhance pupils' inclusion in the life of the school and enable optimum opportunities for educational progress and achievement.

Parents / Carers and Pupils

Parents hold key information and knowledge and have a crucial role to play. Both parents and pupils will be involved in the process of making decisions. Parents are expected to keep the school informed about any changes in their children's condition or in the treatment their children are receiving, including changes in medication. Parents will be kept informed about arrangements in school and about contacts made with outside agencies.

School Staff

Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help. Staff must familiarise themselves with the medical needs of the pupils they work with. Training will be provided in connection with specific medical needs so that staff know how to meet individual needs, what precautions to take and how to react in an emergency.

The Headteacher

The Headteacher is responsible for ensuring that all staff are aware of this policy and understand their role in its implementation. The Headteacher will ensure that all staff that need to know are aware of a child's condition. She will also ensure that sufficient numbers of trained staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. The Headteacher has overall responsibility for the development of individual healthcare plans. She will also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way. She will contact the school nursing service in the case of any child who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse.

The Local Authority Board

The Local Governing Board (LAB) is responsible for making arrangements to support pupils with medical conditions in school, including ensuring that this

policy is developed and implemented. They will ensure that all pupils with medical conditions at Loatlands are supported to enable the fullest participation possible in all aspects of school life. The LAB will ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. They will also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

School Health Teams

School Health Teams are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they should do this before the child starts at the school. They may support staff on implementing a child's individual healthcare plan and provide advice and liaison.

Other Healthcare Professionals

GPs and Paediatricians should notify the school nurse when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans.

Hospital and Outreach Education works with schools to support pupils with medical conditions to attend full time.

Staff Training and Support

In carrying out their role to support pupils with medical conditions, school staff will receive appropriate training and support. Training needs will be identified during the development or review of individual healthcare plans. The relevant healthcare professional will lead on identifying and agreeing with the school, the type and level of training required, and how this can be obtained. The school will ensure that training is sufficient to ensure that staff are competent and confident in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual healthcare plans.

Where required staff will undertake any necessary training required to administer specialist medication. This may be online or face to face based training. A first-aid certificate does not constitute appropriate training in supporting children with medical conditions.

This policy will be publicised to all staff to raise awareness at a whole school level of the importance of supporting pupils with medical conditions, and to

make all staff aware of their role in implementing this policy. Information on how Loatlands supports children with health needs is included in our induction procedure for all new staff.

Procedures

Notification

Information about medical needs or SEND is requested on admission to the school. Parents and carers are asked to keep the school informed of any changes to their child's condition or treatment. Whenever possible, meetings with the parents / carers and other professionals are held before the pupil attends school to ensure a smooth transition into the class. When pupils enter the school, parents / carers are offered the opportunity of attending a personal interview with Kelly Davidson (Family Support Worker) and / or Rebecca Robinson (Assistant Headteacher with responsibility for SEND) At this meeting parents can seek advice on the health of their child.

Information supplied by parents / carers is transferred to the Medical Needs Register which lists the children in alphabetical order. All staff will have access to children's individual health care plans.

Any medical concerns the school has about a pupil will be raised with the parents / carers and discussed with the school nurse when required. Most parents / carers will wish to deal with medical matters themselves through their GP. In some instances the school, after consultation with the parent / carer, may write a letter to the GP (with a copy to the parents) suggesting a referral to a specialist consultant where a full paediatric assessment can be carried out.

Individual Healthcare Plans

Not all children with medical needs will require an individual healthcare plan. The school, healthcare professional and parent should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached, the Headteacher will take a final view

Individual healthcare plans will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. Plans are also likely to be needed in cases where medical conditions are long-term and complex. Plans provide clarity about what needs to be done, when and by whom

Individual healthcare plans should capture the key information and actions that are required to support the child effectively. The level of detail within plans will depend on the complexity of the child's condition and the degree of support needed. This is important because different children with the same health condition may require very different support

Individual healthcare plans, and their review, may be initiated, in consultation with the parent, by a member of school staff or a healthcare professional involved in providing care to the child. Plans will be drawn up in partnership between the school, parents, and a relevant healthcare professional, e.g. school, specialist or children's community nurse, who can best advise on the particular needs of the child. Pupils will also be involved whenever appropriate.

Partners should agree who will take the lead in writing the plan, but responsibility for ensuring that it is finalised and implemented rests with the school. Plans are reviewed at least annually, or earlier if evidence is presented that the child's needs have changed. Plans are developed with the child's best interests in mind and ensure that the school assesses and manages risks to the child's education, health and social well-being and minimises disruption.

Where a child has SEND but does not have an EHC plan, their special educational needs will be referred to in their individual healthcare plan. Where the child has a special educational need identified in an EHC plan, the individual healthcare plan will be linked to or become part of that EHC plan.

Where a child is returning to school following a period of hospital education, the school will work with the appropriate hospital school or the Hospital and Outreach Education to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

Pupils too ill to attend school

When pupils are too ill to attend, the school will establish, where possible, the amount of time a pupil may be absent and identify ways in which the school can support the pupil in the short term (e.g. providing work to be done at home in the first instance). The school should make a referral to the Hospital and Outreach Education as soon as they become aware that a child is likely to be or has been absent for 15 school days. Where children have long-term health needs, the pattern of illness and absence from school can be unpredictable, so the most appropriate form of support for these children

should be discussed and agreed between the school, the family, Hospital and Outreach Education and the relevant medical professionals.

Medicines in School

Self-Management by Pupils

Wherever possible, children are able to access their medicines and relevant devices for self-medication quickly and easily. Children who can take their medicines themselves or manage procedures may require an appropriate level of supervision. If it is not appropriate for a child to self-manage, then relevant staff will help to administer medicines and manage procedures for them.

If a child refuses to take medicine or carry out a necessary procedure, staff will not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents will then be informed so that alternative options can be considered.

Managing Medicines on School Premises

Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours. 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 child under 16 will be given prescription or non-prescription medicines without their parent's first completing our parental agreement for Loatlands Primary School staff to administer medication - except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, every effort will be made to encourage the child or young person to involve their parents while respecting their right to confidentiality.

The school only accepts medicines that 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 inside an insulin pen or a pump, rather than in its original container.

Over the counter medications will be administered in exceptional circumstances where if they were not administered it would result in the child not attending school.

All medicines are stored safely. Staff have access to all Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens are always readily available and not locked away.

A child 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 will be informed.

The school will store any controlled drugs prescribed in a locked box with easy access for staff. Controlled drugs will be easily accessible in an emergency. A record is kept of any doses used and the amount of the controlled drug held in school.

School staff may administer a controlled drug to the child for whom it has been prescribed if they are trained to do so where training is required.

Staff administering medicines will do so in accordance with the prescriber's instructions. The school keeps 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 should be noted.

When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes will always be used for the disposal of needles and other sharps.

Emergency Situations

Where a child has an individual healthcare plan, this will clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other pupils in the school will be informed what to do in general terms, such as informing a teacher immediately if they think help is needed. If a child needs to be taken to hospital, staff will stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.

Day trips, Residentials and Sporting Activities

Pupils with medical conditions are actively supported to participate in school trips and visits, or in sporting activities. In planning such activities, teachers will undertake the appropriate risk assessment and will take into account how a child's medical condition might impact on their participation. Arrangements

for the inclusion of pupils in such activities with any required adjustments will be made by the school unless evidence from a clinician such as a GP states that this is not in the child's best interests.

Liability and Indemnity

The school's insurance arrangements are sufficient and appropriate to cover staff providing support to pupils with medical conditions. Staff providing such support are entitled to view the school's insurance policies.

Complaints

If parents or pupils are dissatisfied with the support provided they should discuss their concerns directly with the school in the first instance. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

Appendix 1 – Letter to parents re Individual Healthcare Plan

Dear Parent / Guardian

As a school we now have a requirement to provide any child with a medical condition their own individual health care plan. This will also include the administration of medication to a child within school, we will still administer medication but we are required to have standardised paperwork that needs to be completed by school staff when medicine is administered a form will also be needed to be signed by you to give us permission to administer this.

The individual health care plan will set out what support each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom.

Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

As we are in the process of completing these plans for the forthcoming academic year, it would be helpful if you could complete the enclosed form with details of your child's health / medical needs and how as a school we can best cater for these during the school day and return to Kelly Davidson.

Should you wish to discuss this in further detail please call in to see Kelly Davidson (Family Support Worker) who will be completing these plans for our school.

Yours sincerely

A Willis
Head Teacher

Appendix 2 – Individual Healthcare Plan Template

Name of school / setting	LOATLANDS PRIMARY
Child's name	
Date of birth	
Class	
Child's address	
Medical diagnosis or condition	
Date	
Review date	
Family Contact Information	
Name	
Contact Number	
Relationship to child	
Clinic/Hospital Contact	
Name	
Phone Number	
GP	
Name	
Phone Number	

Who is responsible for providing support in school

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

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Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

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Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

Appendix 3 - Record of Medicine Administered

Name of School: Loatlands Primary School

DATE	TIME	NAME OF MEDICINE	DOSE GIVEN	ANY REACTIONS	SIGNATURE OF STAFF	PRINT NAME OF STAFF

Date for review to be initiated by	
Name of school	
Name of child	
Date of Birth	
Class	
Medical condition or illness	

Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry Date	
Dosage and method of administration	
Timing	
Special precautions / other instructions	
Are there any side effects that the school needs to know about?	
Self administration?	Y / N (delete as appropriate)
Procedures to follow in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy

Name	
Contact Number	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to the school office.	

Contact Details

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____

Date _____

Appendix 5 – Guidance for contacting emergency services

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

- a) your telephone number (01536 903713)
- b) your name
- c) your location as follows: Loatlands Primary School, Harrington Road, Desborough, Northamptonshire, NN14 2NJ
- d) state what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code NN14 2NJ
- e) provide the exact location of the patient within the school
- f) provide the name of the child and a brief description of their symptoms
- g) inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
- h) ensure that copies of individual healthcare plans and medicine administration records are available for emergency responders when they arrive