# **Sunning Hill Primary School**



# **Medical Conditions Policy**

## May 2024

Statutory guidance: Supporting pupils at school with medical conditions

Legislation: Children and Families Act 2014 section 100

Governing Body Review date: May 2027

### **Rationale**

The Children and Families Act 2014 places a duty on governing bodies of maintained schools, to make arrangements for supporting pupils at their school with medical conditions.

At Sunning Hill our aim 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.

### **Role of Governing Body:-**

The Governing body will ensure that arrangements are in place in school to support pupils with medical conditions. The Governing body will take into account that some medical conditions that require support at school will affect quality of life and may be life threatening. The focus will be to ensure the individual needs of each child are met and ensure the school is aware of how a child's medical condition impacts on their school life.

The Governing body should ensure that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported. They should ensure that staff are properly trained to provide the support that pupils need.

The Governing body must ensure that the arrangements they put in place are sufficient to meet their statutory responsibilities and should ensure that policies, plans, procedures and systems are properly and effectively implemented.

### The role of the school

- The SENCO is responsible for ensuring that sufficient staff are suitably trained, taking into account cover arrangements in case of staff absence or staff turnover, to ensure somebody is always available.
- School has a commitment that all relevant staff will be made aware of the child's condition, via information held on SIMs and a copy of the child's healthcare plan.
- SLT to ensure that all staff are made aware of medical conditions in class.
- Class teachers are to ensure that risk assessments for school visits, holidays and other school activities include the needs of each child.
- SENCO to monitor individual healthcare plans. (Appendix 1)
- SENCO to ensure procedures are in place to cover any transitional arrangements.

Individual healthcare plans can help to ensure that schools effectively support pupils with medical conditions. They provide clarity about what needs to be done, when and by whom. The school, healthcare professionals and parents should agree, based on evidence, what should be included in a healthcare plan. This plan captures the key information and actions that are required to support the child effectively. If consensus cannot be reached, the Headteacher is best placed to take a final view. The plan will be reviewed with all stakeholders, annually.

### The role of the staff

All staff understand and are trained in what to do in an emergency for the most common serious medical conditions at this school as and when appropriate.

All staff will be aware of the most common serious medical conditions at this school.

Staff understand their duty of care to children in the event of an emergency. In an emergency situation school staff are required under common law duty of care to act like any reasonably prudent parent. This may include administering medication.

All staff who work with children at this school receive training and know what to do an emergency for the children in their care with medical conditions. (Appendix 4)

Training will be refreshed for all staff as and when appropriate.

School will use Healthcare Plans to inform the appropriate staff (including support staff) of pupils in their care who may need emergency help.

School has procedures in place so that a copy of a child's healthcare plan would be sent to the hospital with the child. On occasions when this is not possible, the information on it is communicated to the hospital as soon as possible.

### What is included in the Healthcare Plan? (Appendix 1)

The medical condition, its triggers, signs, symptoms and treatments;

- the pupil's resulting needs, including medication (dose, side-effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons;
- specific support for the pupil's educational, social and emotional needs for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions;
- the level of support needed, (some children will be able to take responsibility for their own health needs), including in emergencies. If a child is self- managing their medication, this should be clearly stated with appropriate arrangements for monitoring;
- who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable;
- who in the school needs to be aware of the child's condition and the support required;
- arrangements for written permission from parents and the Headteacher for medication to be administered by a member of staff during school hours;
- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments;
- where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition; and
- what to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

### Managing medicines on school premises

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 will be given prescription or non-prescription medicines without their parent's written consent (Appendix 2 & 3 Medical Conditions / Appendix 3 Illness.)
- a child will not be given medicine containing aspirin unless prescribed by a doctor. Medication, eg for pain relief, will never be administered without first checking maximum dosages and when the previous dose was taken. Parents will be informed
- where clinically possible, medicines will be prescribed in dose frequencies which enable them to be taken outside

school hours

- school will only accept prescribed 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 to school inside an insulin pen or a pump, rather than in its original container
- all medicines will be stored safely. Children and staff will know where the medicines are at all times and be able to access them immediately. Where relevant, they should know who holds the key to the storage facility. 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. This is particularly important to consider when outside of school premises eg on school trips.
- Staff administering medicines should do so in accordance with the prescriber's instructions. Schools should 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 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.

### **Record keeping**

School will ensure that written records are kept of all medicines administered to children. (Appendix 3) Records offer protection to staff and children and provide evidence that agreed procedures have been followed. Parents will be informed if their child has been unwell at school.

### **Emergency procedures**

Where a child has an individual healthcare plan, it 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 may need to know 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, residential visits and sporting activities

School is keen to support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. Teachers will be aware of how a child's medical condition will impact on their participation, but there should be enough flexibility for all children to participate according to their own abilities and with any reasonable adjustments. Schools will make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible.

School will consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits. The SENCO will carry out a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. This will require consultation with teachers, parents and pupils and advice from the relevant healthcare professional to ensure that pupils can participate safely.

# Complaints The school's policy sets out how complaints may be made and will be handled concerning the support provided to pupils with medical conditions. Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure which can be found on the school website. Our school aims to support all families and the wider community. Any queries or concerns regarding individual policies will be considered on an individual basis.

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Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	
l	
Family Contact Information	
Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Clinic/Hospital Contact	
Name	

G.P.	
Name	
Phone no.	
Who is responsible for providing support in school	
	ild's symptoms, triggers, signs, treatments, facilities, equipment or
evices, environmental issues etc	istration, when to be taken, side effects, contra-indications,
evices, environmental issues etc	istration, when to be taken, side effects, contra-indications,
evices, environmental issues etc ame of medication, dose, method of admini	istration, when to be taken, side effects, contra-indications,
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Other information					
Describe what consti	tutes an emergen	cy, and the action	to take if this occu	rs	
Who is responsible in	an emergency (s	tate if different fo	off-site activities)		
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Who is responsible in	an emergency (s	ate if different fo	off-site activities)		
			off-site activities)		
Plan developed with			off-site activities)		
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### Appendix 2: parental agreement for setting to administer medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by	
Name of school/setting	
Name of child	
Date of birth	
Group/class/form	
Medical condition	
Medicine	
Name/type of medicine	
(as described on the container)	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	
NB: Medicines must be in the original container	as dispensed by the pharmacy
Contact Details	
Name	

Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff]
school/setting staff administering medicine in acc	rledge, accurate at the time of writing and I give consent to cordance with the school/setting policy. I will inform the any change in dosage or frequency of the medication or if the
Signature(s)	Date

### Appendix 3 - Record of medicine administered to an individual child.

Childs Name	class
I agree to the staff at Sunning Hill Primary Sc	hool following the arrangements outlined below
Quantity of medicine received	
Details of prescribed medicine:	
Dosage to be given:	
Expiry date	
Length of time medicine to be taken e.g. fini	sh course:
Parents Signature:	Print:
Staff Signature :	Date:
Quantity returned Date	
Medicine given by:	
Name: Dose Date:	Time:

Name Type of training received Date of training completed Training provided by	
Date of training completed	
Training provided by	
Profession and title	
	is received the training detailed above and is competent to carry that the training is updated [name of member of staff].
rainer's signature	
Date	
confirm that I have received the training o	detailed above.
taff signature	
PateS	Suggested review date