
St. Mary's CE Academy

'Excellence through faith & learning'



Supporting Children in School With Medical Conditions Policy

*"I have come that they may have life,
and have it to the full."
John 10:10*

Reviewed: Autumn 2019

Approved by Governors: Autumn 2019

Date of next review: Autumn 2020

Supporting Children in School With Medical Conditions Policy



Introduction:

At St Mary's Church of England Academy, we aim to provide a caring environment where every child can thrive and is supported to achieve their unique & amazing potential as a child of God. As such, this means that all children, including those with medical conditions, are well supported.

THE LEGISLATION THIS POLICY IS BASED UPON:

Section 100 of the Children and Families Act 2014 places a 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. The DfE publication 'SUPPORTING PUPILS AT SCHOOL WITH MEDICAL CONDITIONS' published April 2014 includes statutory guidance for governing bodies of maintained schools and proprietors of academies in England.

KEY AIMS:

- Pupils at school with medical conditions will be properly supported so that they have full access to education, including school trips and physical education.
- The governing body ensures that arrangements are in place in schools to support pupils at school with medical conditions.
- The governing body ensures 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.

THE ROLE OF THE GOVERNING BODY:

- To ensure that arrangements are in place to support pupils with medical conditions so that they can access and enjoy the same opportunities at school as any other child.
- To take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. As a result, the focus of action taken is on the needs of each individual child and how their medical condition impacts on their school life.
- To make arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions in school; showing an understanding of how medical conditions impact on a child's ability to learn, as well as increasing confidence and promoting self-care and finally ensuring that staff are properly trained to provide the support that pupils need.
- To monitor arrangements put in place to ensure that policies, plans, procedures and systems are properly and effectively implemented in accordance with statutory requirements; in particular, procedures for the administration of medicines.

- To ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.
- To ensure that the school's policy is explicit about what practice is not acceptable when administering medicines in school.
- To ensure that complaints may be made and will be handled concerning the support provided to pupils with medical conditions.
- To review the policy for supporting pupils with medical conditions on an annual basis and to ensure that it is readily accessible to parents and school staff.

THE ROLE OF THE HEADTEACHER:

The Executive Headteacher ensures that the school's policy for supporting pupils with medical conditions is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation.

The Executive Headteacher ensures that all staff who need to know are aware of the child's condition and that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.

To ensure the policy is implemented effectively by staff at St Mary's, the Executive Headteacher will ensure:

- that sufficient staff are suitably trained,
- a commitment that all relevant staff will be made aware of the child's condition,
- cover arrangements in case of staff absence or staff turnover to ensure someone is always available,
- briefing for supply teachers,
- risk assessments for school visits, holidays, and other school activities outside of the normal timetable, and
- monitoring of individual healthcare plans.

THE ROLE OF STAFF:

Any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach. School staff are to receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions.

THE ROLE OF SCHOOL NURSES:

The school nursing services 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 would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with medical conditions, but may support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training.

THE ROLE OF SCHOOL PUPILS:

Pupils 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.

THE ROLE OF SCHOOL PARENTS:

Parents 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 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. Parents are asked at the beginning of each school year to inform school of any changes via the Healthcare Plan proformas which is sent out to be filled in. This is then kept in the school Medical File & updated if there are any changes.

THE ROLE OF THE NAMED PERSON & INDIVIDUAL HEALTH CARE PLANS

The named person, Karen Miller (Head of School), is to ensure that procedures are followed whenever a school is notified that a pupil has a medical condition are in place and followed (see procedures below).

The named person is responsible for individual healthcare plans and their development and use in supporting pupils at school with medical conditions.

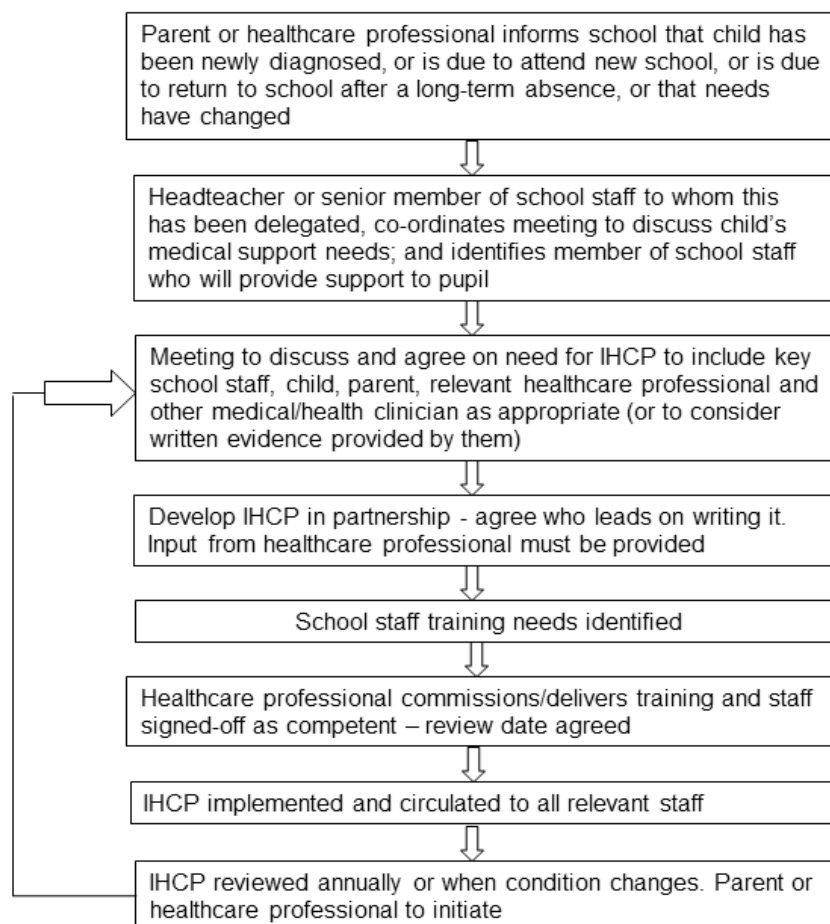
Individual Health Care plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed. They are developed with the child's best interests in mind and assess and manage risks to the child's education, health and social well-being and minimises disruption.

When deciding what information should be recorded on individual healthcare plans, the named person considers the following:

- 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, or self-administered by the pupil 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.

PROCEDURES FOR DEVELOPING INDIVIDUAL HEALTHCARE PLANS





Individual Health Care Plan

Name of child	
Date of birth	
Address	
Medical condition or illness	
Changes to this care plan will only be made under advice from the Parent/Carer	

Family Contact Information

Name			
Phone (home)		Work/mobile	
Name			
Phone (home)		Work/mobile	

Clinic/Hospital Contact Information

Name	
Tel. no.	

G.P Contact Information

Name	
Tel.no.	

Describe medical needs and give details of child's symptoms

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Daily care requirements (e.g. before sport/at lunchtime)

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

Follow up care

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

Lead First Aiders

Form copied to	Parent/Care/File
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Signed(parent/ carer) Date

Signed(School) Date