

# Supporting Pupils with Medical Needs policy

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*This is a model policy/procedure which reflects legislation, any relevant statutory and non-statutory guidance and best practice. The responsibility for setting policy and procedure resides with the Trust Board and as such the relevant body must be satisfied that the content of the policy/procedure suits their requirements*



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# 1. Introduction

From 1 September 2014 the Trust is under a duty to make arrangements for supporting pupils with medical conditions. This policy sets out what those arrangements are.

Children with medical conditions are entitled to a full education and have the same rights to admission to school as other children. The Trust will not refuse to admit a pupil on medical grounds.

The Trust is committed to ensuring that pupils with medical conditions are supported so that they have full access to education, including school trips and physical education.

Full account will be taken in the operation of the Policy of the latest Department for Education guidance, specifically *Supporting Pupils with Medical Conditions at School (September 2014)* – updated August 2017.

See also

- First Aid Policy
- Children with Health Needs who Cannot Attend School Policy

## 2. Principles

The Trust and its staff will:

- enable children to access their inhalers and medication and administer their medication when and where necessary
- not assume that every child with the same condition requires the same treatment
- have proper regard to the view of the child or their parents/carers, and medical evidence or opinion
- not send children with medical conditions home frequently for reasons associated with their medical conditions or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHCP
- if the child becomes ill, send them to the school office or medical room accompanied by someone suitable
- not penalise children for their attendance record if their absences are related to their diagnosed medical condition
- not prevent children from eating, drinking or taking toilet breaks whenever they need in order to manage their medical condition more effectively
- not require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child; including with toileting issues
- facilitate children to participate in all aspects of school life

## 3. Responsibilities

Parents/carers are responsible for providing the Trust with sufficient and up-to-date information about their child's medical needs. They must provide all medicines and equipment and ensure that they or a nominated adult are contactable at all times.

Staff will consult with health and social care professionals, pupils and parents/carers to ensure that the needs of the children with medical conditions are properly understood.

## 4. Safeguarding

Staff and pupils must adhere to the child protection policy.

- We recognise that there is a need to treat all children with respect, especially when intimate care is given. No child should be attended to in a way that causes distress, embarrassment or pain and the care provided must be consistent.
- If a member of staff has any concerns about physical changes in a child's presentation (for example any marks, bruises, unkempt appearance, etc), they will immediately follow the procedures outlined in the child protection policy. If a child makes an allegation against a member of staff, procedures in the child protection policy will be followed.
- In line with safeguarding duties, the Trust will ensure that the pupils' health is not put at unnecessary risk from, for example, infectious diseases. Consequently, the academy Headteachers will not accept a child in school at times when it would be detrimental to the health of that child or others to do so.
- If a child is hurt accidentally, they should be immediately reassured, and the adult should check that s/he is safe. The incident must be reported immediately to the designated safeguarding lead (DSL).

## 5. Procedures

When the Trust is notified of a medical condition for a new or existing pupil, the following procedure is followed:

- a) The academy Headteacher, or senior member of school staff to whom this has been delegated, will co-ordinate a meeting to discuss the child's medical support needs and identify member(s) of school staff who will provide support to the pupil
- b) The senior member of staff will call a meeting to discuss and agree if there is the need for an individual healthcare plan (IHCP). The meeting will include key school staff, the child, parent/carer, relevant healthcare professionals and other medical/health clinicians as appropriate (or consider written evidence provided by them)
- c) The senior member of staff will coordinate the writing of the IHCP, if this is deemed appropriate, in partnership with the parents/carers and healthcare professionals
- d) The senior member of staff will identify any training needs required and ensure that these take place
- e) The IHCP will be shared with all relevant members of staff and implemented
- f) The senior member of staff will organise the annual review of the IHCP or when the need arises if sooner. The parents/carers are responsible for informing the Trust of any changes that may require a review of the IHCP
- g) If the Trust is notified that the child is going to move school, the academy Headteacher will ensure that the receiving school is fully informed about the child's medical needs as soon as possible. When a child moves school, the IHCP is transferred along with all of the child's records.

## 5.1 Individual Healthcare Plans (IHCPs)

IHCPs will vary in style and complexity according to each child's needs.

- IHCPs will be kept confidential to only those individuals who need to know
- IHCPs will be drawn up in partnership with the Trust, parents/carers, relevant healthcare professionals and, if appropriate, the child
- The Trust will take account of religious and cultural sensitivities
- Where the child has special educational needs (SEN) but does not have an EHC plan, their special needs will be mentioned in the IHCP
- Where the child has an EHC plan, the IHCP will be linked or become part of the EHC plan
- As a minimum, the IHCP will include:
  - a) the medical condition, its triggers, signs, symptoms and treatments
  - b) the pupil's resulting needs; including medication and other treatments in sufficient detail to enable staff to manage the condition
  - c) specific support for the pupil's educational, social and emotional needs
  - d) the level of support needed and how much self-management the child has
  - e) who will provide the support, their training needs, competency and cover arrangements
  - f) who in the Trust needs to be aware of the condition and how this information will be shared
  - g) written permission and agreement from parents/carers and the Headteacher for medication to be administered by a member of staff or the pupil during school hours
  - h) separate arrangements for procedures outside of school, including on residential visits if appropriate
  - i) a risk assessment for the child
  - j) what to do in an emergency, including contact details and contingency arrangements
- If a child refuses to take medicine or carry out a necessary procedure included in their IHCP, staff will not force them to do so, but will follow the procedure agreed in the IHCP. They will ensure that the parents/carers are informed so that alternative options can be considered.

## 6. Intimate Care

Intimate care is any care which involves washing, touching, or carrying out an invasive procedure that most children carry out for themselves, but which some are unable to do due to physical disability, special educational needs associated with learning difficulties, medical needs or needs arising from the child's stage of development.

Care may involve help with drinking, eating, dressing or toileting. Help may also be needed with changing colostomy bags and other such equipment. It may also require the administration of rectal medication.

In most cases, intimate care will involve procedures to do with personal hygiene and the cleaning of equipment associated with the process. In the case of a specific procedure, only a person suitably trained and assessed as competent will undertake the procedure.

Intimate care needs will be planned carefully. Any child who requires intimate care will always be treated with respect and the welfare and dignity of the child is important.

Staff who provide intimate care are trained to do so and are aware of best practice. The child will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much as possible for themselves. This may mean, for example, giving the child responsibility for washing themselves. Individual healthcare plans will be drawn up for children as appropriate to suit the circumstances of the child.

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child is attended to. Typically, one child will be catered for by one staff member unless there is a sound reason for having more staff present. If this is the case, the reasons should be clearly documented. Recording equipment such as mobile phones and cameras must not be taken into areas where intimate care is carried out.

If a child becomes distressed or unhappy about being cared for by a member of staff, the matter will be discussed and reviewed, and outcomes recorded. Parents and carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. Further advice will be taken from outside agencies if necessary.

## **7. Resources**

The Trust will ensure that all of the required resources, such as provisions for individual needs, PPE, sharps bins, clinical waste bins etc, are provided.

## **8. Staff training**

Staff will not give prescription medicines or undertake healthcare procedures without appropriate training. It is for the Academy Headteacher to decide whether written instructions from the parent or on the medication container are sufficient or whether additional training is necessary. Any training or guidance detailed in an IHCP must be followed.

All staff involved in the care of a child with a medical condition will be suitably trained in line with the child's IHCP.

The Academy Headteacher or delegated senior member of staff is responsible for liaising with healthcare professionals and ensuring that the training needs of all staff members required by an IHCP are fulfilled.

The Academy Headteacher will arrange whole-school awareness training about the academy's pupils with medical needs at least annually and as part of the induction of new staff.

## **9. Managing medicines on Trust 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 medicines will be given to a child without the written consent of a parent. This might be in the form of an agreed IHCP.

The Trust will only accept prescribed medicines if these are in-date, labelled, provided in the original packaging and will include instructions for administration, dosage and storage.

- When no longer required, medicines must be returned to the parent
- Sharps boxes will be used for disposal of needles and other sharps

All medicines will be stored safely. Children must know where their 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 always be readily available to children and not locked away, both in school and on school trips.

A child 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. The Trust will, otherwise, keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff will have access. Controlled drugs must be easily accessible in an emergency.

Children who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be reflected in IHCPs.

## **10. Record keeping and communication**

The Academy Headteacher is responsible for ensuring that written records are kept of all medicines administered to children.

Communication with parents/carers about a child's intimate care will always be through confidential and direct contact; details will not be recorded in home/school communication books.

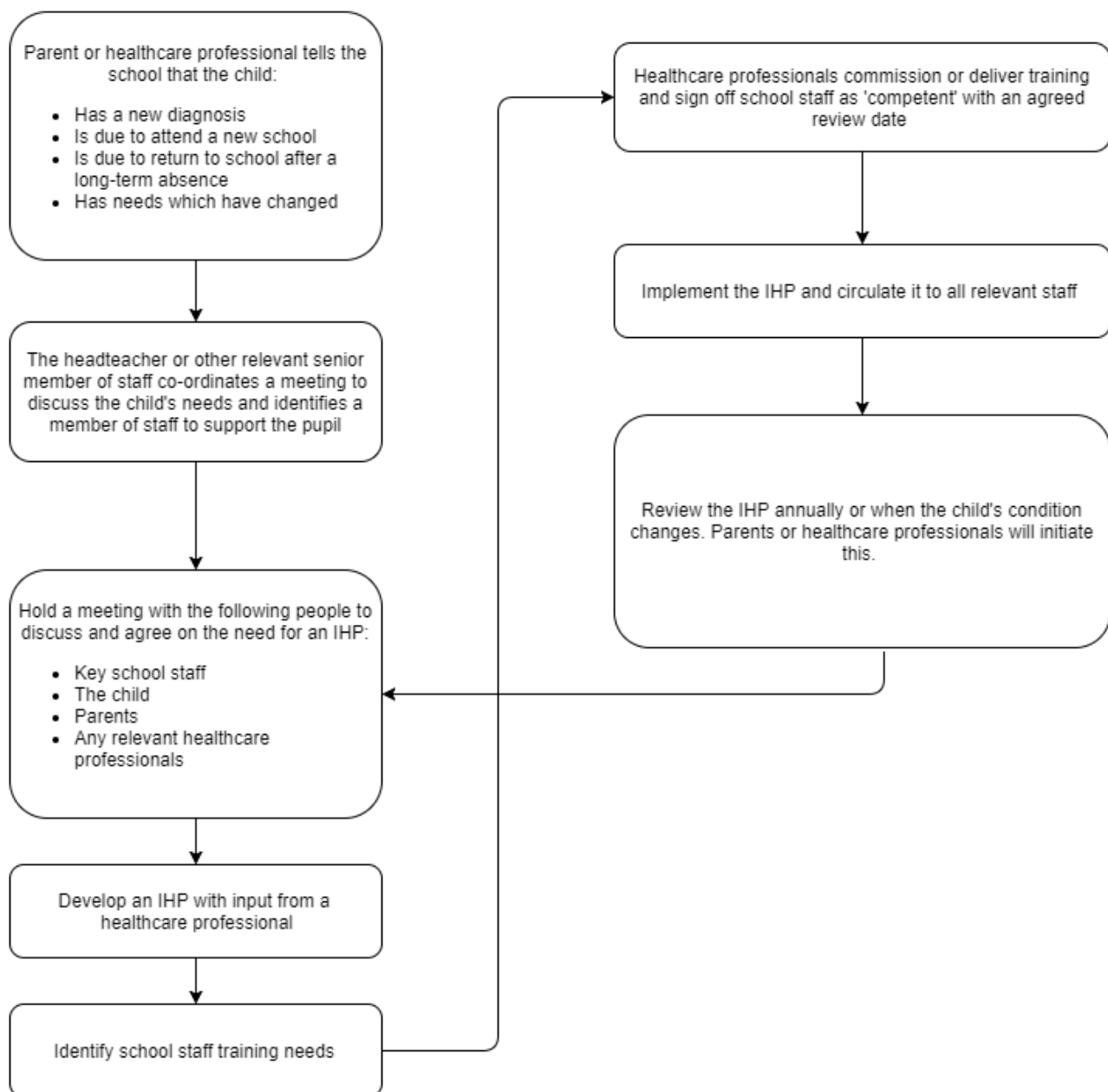
## **11. Risk assessments for activities in school and away from the school site**

The Academy Headteacher will ensure that the risk assessment in each child's IHCP is reviewed at least annually and whenever there is a change of circumstances.

In the case of a medical emergency not covered by a risk assessment, the Trust will seek emergency medical assistance by calling 999, or the local emergency number if abroad, for an ambulance. Trust staff will remain with the child until a parent/carer arrives.

## **12. Complaints**

If a pupil or parent/carer is dissatisfied with the support provided by the Trust, they should follow the Trust's published complaints procedure.





Health Care Plan for a Pupil with Medical Needs

<p><b><u>PUPIL'S DETAILS</u></b></p> <p>Name:</p> <p>Address:</p> <p>Date of Birth:</p> <p>Name of School:</p> <p>Class:</p> <p>Medical Condition:</p> <p>Date plan drawn up:</p>	<p><b>PHOTO</b></p> <div style="border: 1px solid black; height: 200px; width: 100%;"></div> <p>Review date:</p>
<p><b><u>CONTACT INFORMATION</u></b></p> <p><b><u>Family Contact 1</u></b></p> <p>Name:</p> <p>Phone No: (work): (home): (mobile):</p> <p>Relationship:</p>	<p><b><u>Family Contact 2</u></b></p> <p>Name:</p> <p>Phone No: (work): (home): (mobile):</p> <p>Relationship:</p>

**MEDICAL CONDITION DETAILS**

**Describe medical condition and give details of pupil's individual symptoms**

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

**Describe what constitutes an emergency for the pupil and the action to be taken if this occurs:**

**Follow up care:**

**Who is responsible in an emergency (State if different on off-site activities)**

**Signed:**

**Community Paediatrician..... Date.....**

**Parent/carer..... Date.....**

**Head teacher ..... Date.....**

**SENCo..... Date.....**

Contacting the Emergency Services

**Request for an Ambulance**

**Dial 999, ask for ambulance and be ready with the following information**

- 1. Your telephone number**
- 2. Give your location as follows**
- 3. State that the post code is**
- 4. Give exact location in the academy/setting (insert brief description)**
- 5. Give your name**
- 6. Give name of child and a brief description of the child's symptoms**
  
- 7. Inform Ambulance Control of the best entrance and state that the crew will be met and taken to...**