SUPPORTING STUDENTS WITH MEDICAL NEEDS POLICY

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Contents

Introduction

The Management Committee at Rotherham Aspire PRU has a duty to ensure arrangements are in place to support pupils with medical conditions. The aim of this policy is to ensure that all pupils with medical conditions, in terms of both physical and mental health, receive appropriate support to allow them to remain healthy, have full access to education, and achieve their potential.

The school believes it is important that parents/ carers of pupils with medical conditions feel confident that the school provides effective support for their children's medical conditions, and that pupil's feel safe in school.

Some pupils with medical conditions may be classed as disabled under the definition set out in the Equality Act 2010. The school has a duty to comply with the Act in all such cases.

This policy sets out how the school intends to manage the arrangements for supporting children with medical needs, additional staff training when required, and those who require medication to be given in school/setting. Most children with medical needs are able to attend school regularly and, with support from the school, take part in most routine activities, whilst others with more significant medical needs require an Individual Health Care Plan (IHCP).

In addition, some pupils with medical conditions may also have SEND and have an EHC plan collating their health, social and SEND provision. For these pupils, the school's compliance with the DfE's 'Special educational needs and disability code of practice: 0 to 25 years' and the school's Special Educational Needs and Disabilities (SEND) Policy will ensure compliance with legal duties.

Roles and responsibilities

The Management Committee will be responsible for:

- Fulfilling its statutory duties under legislation.
- Ensuring that arrangements are in place to support pupils with medical conditions.
- Ensuring that pupils with medical conditions can access and enjoy the same opportunities as any other pupil at the school.
- Ensuring that, following long-term or frequent absence, pupils with medical conditions are reintegrated effectively.
- Ensuring that the focus is on the needs of each pupil and what support is required to support their individual needs.
- Instilling confidence in parents and pupils in the school's ability to provide effective support.
- Ensuring that all members of staff are properly trained to provide the necessary support and are able to access information and other teaching support materials as needed.
- Ensuring that no prospective pupils are denied admission to the school because arrangements for their medical conditions have not been made.
- Ensuring that pupils' health is not put at unnecessary risk. As a result, the Committee holds the right to not accept a pupil into school at times where it would be detrimental to the health of that pupil or others to do so, such as where the child has an infectious disease.

- Ensuring that policies, plans, procedures and systems are properly and effectively implemented.

The Headteacher will be responsible for:

- The overall implementation of this policy.
- Ensuring that this policy is effectively implemented with stakeholders.
- Ensuring that all staff are aware of this policy and understand their role in its implementation.
- Responsibility, in principle, for school staff administering or supervising the taking of prescribed medication or medical care during the school day. The acceptance of responsibility may depend, however, upon the nature of any individual needs.
- Ensuring that a sufficient number of staff are trained and available to implement this policy and deliver in emergency situations.
- Considering recruitment needs for the specific purpose of ensuring pupils with medical conditions are properly supported.
- Ensuring that staff are appropriately insured and aware of the insurance arrangements.
- Contacting the school nurse where a pupil with a medical condition requires support that has not yet been identified.

Parents will be responsible for:

- Notifying the school if their child has a medical condition.
- Providing the school with sufficient and up-to-date information about their child's
- medical needs. Clinic letters / G.P. letters should be provided where appropriate.
- Parents/carers should try to ensure that their child's medication is taken out of school
- hours wherever possible.
- Where children are required to take medicines during school time, parents/carers should complete a 'Parental Agreement to Administer Medication' form and bring with the medication to Reception providing the details of the dose and frequency.
- Parents should regularly check the expiry date of medicines; the responsibility for collecting expired or unwanted medicine lies with the parent/carer. School will periodically check medicines held at the school - parents/carers will be contacted and they should make arrangements to collect and dispose of such medicines.
- Where a parent/carer considers their child to be capable and mature enough to self-medicate prescription or non-prescription medicine, e.g. commercially available pain
- killers, the parent/carer should send a note to Reception giving their permission.
- Pupils who are permitted to carry medications should never dispense / make available the medication to other students in school. If any medication is given to other students disciplinary action may be taken.
- Parents/carers should inform the school as soon as possible of any changes in their child's condition or treatment and provide the medical evidence in support of the changes
- Being involved in the development and review of their child's Health Care plan
- Carrying out any agreed actions contained in the Health Care plan.
- Ensuring that they, or another nominated adult, are contactable at all times.

- Pupils will be responsible for:
- Being fully involved in discussions about their medical support needs, where applicable.
- Contributing to the development of their Health Care plan, if they have one, where applicable.
- Pupils should take care in carrying medicines to and from school. They should never give their medicine to other children.
- Being sensitive to the needs of pupils with medical conditions.
- School staff will be responsible for:
- Providing support to pupils with medical conditions, where requested, including the administering of medicines, but are not required to do so.
- Taking into account the needs of pupils with medical conditions in their lessons when deciding whether or not to volunteer to administer medication.
- Receiving sufficient training and achieve the required level of competency before taking responsibility for supporting pupils with medical conditions.
- Knowing what to do and responding accordingly when they become aware that a pupil with a medical condition needs help.
- In some circumstances, e.g. severe allergic reaction, which may require the immediate administration of medicines, those staff who have volunteered will receive training.
- Educate students, parents and staff on healthy habits, such as proper nutrition and hygiene.
- Liaise closely with the School Counsellor and external counselling agencies, to ensure a collaborative approach to pupil wellbeing.

Staff training and support

Any staff member providing support to a pupil with medical conditions will receive suitable training. Staff will not undertake healthcare procedures or administer medication without appropriate training. Training needs will be assessed on an **annual** basis for all school staff. We will maintain records of appropriately trained staff.

A first-aid certificate will not constitute appropriate training for supporting pupils with medical conditions.

Through training, staff will have the requisite competency and confidence to support pupils with medical conditions and fulfil the requirements set out in Health Care Plans. Staff will understand the medical conditions they are asked to support, their implications, and any preventative measures that must be taken.

We will identify suitable training opportunities that ensure all medical conditions affecting pupils in the school are fully understood, and that staff can recognise difficulties and act quickly in emergency situations.

All lead staff taking educational visits out of school will carry a basic certificate of First Aid. In addition, all staff taking pupils with specific medical conditions will carry a copy of the agreed Health Care Plan.

The parents of pupils with medical conditions will be consulted for specific advice and their views are sought where necessary, but they will not be used as a sole trainer.

Where deemed competent to do so it will be expected that students will take responsibility for their medical condition and only seek support when necessary.

Supply teachers will be:

Provided with access to this policy.

Informed of all relevant medical conditions of pupils in the class they are providing cover for.

Covered under the school's insurance arrangements.

Health Care Plans

The school, parents and a relevant healthcare professional will work in partnership to create and review Health Care Plans. Where appropriate, the pupil will also be involved in the process.

Health Care Plans will include the following information:

- The medical condition, along with its triggers, symptoms, signs and treatments
- The pupil's needs, including medication (dosages, side effects and storage), other treatments, facilities, equipment, access to food and drink (where this is used to manage a condition), dietary requirements, and environmental issues
- The support needed for the pupil's educational, social and emotional needs
- The level of support needed, including in emergencies
- Whether a child can self-manage their medication
- Who will provide the necessary support, including details of the expectations of the role and the training needs required, as well as who will confirm the supporting staff member's proficiency to carry out the role effectively
- Cover arrangements for when the named supporting staff member is unavailable
- Who needs to be made aware of the pupil's condition and the support required
- Arrangements for obtaining written permission from parents and the headteacher for medicine to be administered by school staff or self-administered by the pupil
- Separate arrangements or procedures required during school trips and activities
- Where confidentiality issues are raised by the parents or pupil, the designated
- individual to be entrusted with information about the pupil's medical condition
- What to do in an emergency, including contact details and contingency arrangements

Where a pupil has an emergency healthcare plan prepared by their lead clinician, this will be used to inform the Health Care Plan.

Health Care Plans will be easily accessible to those who need to refer to them via SIMs, but confidentiality will be preserved. Health Care Plans will be reviewed on at least an annual basis, or

when a child's medical circumstances change, whichever is sooner. It is the parent / carers responsibility to sign and return the Health Care Plans as soon as possible.

Where a pupil has an EHC plan, the Health Care Plan will be linked to it or become part of it. Where a child has SEND but does not have an EHC plan, their SEND will be mentioned in their Health Care Plan.

Where a child is returning from a period of hospital education, alternative provision or home tuition, the school will work with the LA and education provider to ensure that their Health Care Plan identifies the support the child will need to reintegrate.

Managing medicines

Medicines will only be administered at school when it would be detrimental to a pupil's health or school attendance not to do so.

Pupils under 16 years old will not be given prescription or non-prescription medicines without their parents' written consent, except where the medicine has been prescribed to the pupil without the parents' knowledge. In such cases, the school will encourage the pupil to involve their parents, while respecting their right to confidentially.

No pupil under the age of 16 will be given medicine containing aspirin unless prescribed by a doctor. Pain relief medicines will not be administered without first checking when the previous dose was taken, and the maximum dosage allowed.

The school will only accept medicines that are in-date, labelled, in their original container, and contain instructions for administration, dosage and storage. The only exception to this is insulin, which must still be in-date, but is available in an insulin pen or pump, rather than its original container.

All medicines will be stored safely. Pupils will be informed where their medicines are at all times and will be able to access them immediately, whether in school or attending a school trip. Where relevant, pupils will be informed of who holds the key to the relevant storage facility. When medicines are no longer required, they will be returned to parents for safe disposal.

Sharps boxes will be used for the disposal of needles and other sharps.

Controlled drugs will be stored in a locked safe and only named staff members will have access; however, these drugs can be easily accessed in an emergency. A record will be kept of the amount of controlled drugs held and any doses administered. Staff may administer a controlled drug to a pupil for whom it has been prescribed, in accordance with the prescriber's instructions.

Allergens, anaphylaxis and adrenaline auto-injectors (AAIs)

The school's procedures for dealing with AAIs is implemented consistently to ensure the safety of those with allergies.

Parents are required to provide the school with up-to-date information relating to their children's allergies, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication required.

The headteacher and staff will ensure that all pre-packed foods meet the requirements of Natasha's Law, i.e. the product displays the name of the food and a full, up-to-date ingredients list with allergens emphasised, e.g. in bold, italics or a different colour.

Staff members receive appropriate training and support relevant to their level of responsibility, in order to assist pupils with managing their allergies. The administration of adrenaline auto-injectors (AAIs) and the treatment of anaphylaxis will be carried out in accordance with the school's internal procedures. Where a pupil has been prescribed an AAI, this will be written into their Heath Care Plan. Medical professionals and parents/ carers are responsible for updating the school when a dosage changes.

A Register of Adrenaline Auto-Injectors (AAIs) will be kept of all the pupils who have been prescribed an AAI to use in the event of anaphylaxis.

Pupils who have prescribed AAI devices can keep their device in their possession. Spare devices will be kept in reception to be used in case of emergency and with parental consent.

Designated staff members will be trained on how to administer an AAI, and the sequence of events to follow when doing so. AAIs will only be administered by these staff members.

In the event of anaphylaxis, a designated staff member will be contacted as soon as possible. Where there is any delay in contacting designated staff members, or where delay could cause a fatality, the nearest staff member will administer the AAI. If necessary, other staff members may assist the designated staff members with administering AAIs, e.g. if the pupil needs restraining.

The school will keep a spare AAI for use in the event of an emergency, which will be checked on a **monthly** basis to ensure that it remains in date, and which will be replaced before the expiry date. The spare AAI will be stored in main reception area, ensuring that it is protected from direct sunlight and extreme temperatures. The spare AAI will only be administered to pupils at risk of anaphylaxis and where written parental consent has been gained. Where a pupil's prescribed AAI cannot be administered correctly and without delay, the spare will be used. Where a pupil who does not have a prescribed AAI appears to be having a severe allergic reaction, the emergency services will be contacted and advice sought as to whether administration of the spare AAI is appropriate.

Where a pupil is, or appears to be, having a severe allergic reaction, the emergency services will be contacted even if an AAI device has already been administered.

In the event that an AAI is used, the pupil's parents will be notified that an AAI has been administered and informed whether this was the pupil's or the school's device. Where any AAIs are used, the following information will be recorded on the Adrenaline Auto-Injector (AAI) Record:

- Where and when the reaction took place
- How much medication was given and by whom

For children aged 6-12 years, a dose of 300 micrograms of adrenaline will be used.

For children aged over 12, a dose of 300 or 500 micrograms of adrenaline will be used.

AAIs will not be reused and will be disposed of according to manufacturer's guidelines following use.

In the event of a school trip, pupils at risk of anaphylaxis will have their own AAI with them and the school will give consideration to taking the spare AAI in case of an emergency

Record Keeping

The school will keep records of the following:-

- Medication administered or supervised.
- Individual Health Care Plan.
- Notification from parents/carers giving consent regarding medication issued.
- Training records in staff files.
- These records will be transferred with the child to subsequent schools throughout their school career.
- Secondary schools will retain these records for Y11 leavers for a further 5 years.

Emergency procedures

Medical emergencies will be dealt with under the school's emergency procedures.

Parents should be contacted immediately. Where a Health Care Plan is in place, it should detail:

- What constitutes an emergency?
- What to do in an emergency.

Pupils will be informed in general terms of what to do in an emergency, e.g. telling a teacher.

If a pupil needs to be taken to hospital, a member of staff will remain with the pupil until their parents arrive. When transporting pupils with medical conditions to medical facilities, staff members will be informed of the correct postcode and address for use in navigation systems.

Visits out of school

Pupils with medical conditions will be supported to participate in school trips.

Prior to an activity taking place, the visit lead and EVC will conduct a risk assessment to identify what reasonable adjustments should be taken to enable pupils with medical conditions to participate. In addition to a risk assessment, advice will be sought from pupils, parents and relevant medical professionals. The school will arrange for adjustments to be made for all pupils to participate, except where evidence from a clinician, e.g. a GP, indicates that this is not possible.

Unacceptable practice

The school will not:

- Permit unwell students to leave school site without appropriate supervision.
- Assume that pupils with the same condition require the same treatment.
- Prevent pupils from easily accessing their inhalers and medication.
- Ignore the views of the pupil or their parents.
- Ignore medical evidence or opinion.
- Send pupils home frequently for reasons associated with their medical condition, or prevent them from taking part in activities at school, including lunch times, unless this is specified in their Health Care Plan.
- Penalise pupils with medical conditions for their attendance record, where the absences relate to their condition.Make parents feel obliged or forced to visit the school to administer medication or provide medical support, including for toilet issues. The school will ensure that no parent is made to feel that they have to give up working because the school is unable to support their child's needs.
- Create barriers to pupils participating in school life, including school trips.
- Refuse to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

Liability and indemnity

The Management Committee will ensure that appropriate insurance is in place to cover staff providing support to pupils with medical conditions.

The school is adequately covered by DFE for liability relating to the administration of medication.

In the event of a claim alleging negligence by a member of staff, civil actions are most likely to be brought against the school, not the individual.

Complaints

Parents or pupils wishing to make a complaint concerning the support provided to pupils with medical conditions are required to speak to the school in the first instance. If they are not satisfied with the school's response, they may make a formal complaint via the school's complaints

procedures, as outlined in the Complaints Procedures. If the issue remains unresolved, the complainant has the right to make a formal complaint to the DfE.

Parents and pupils are free to take independent legal advice and bring formal proceedings if they consider they have legitimate grounds to do so.

Home-to-school transport

Arranging home-to-school transport for pupils with medical conditions is the responsibility of the LA. Where appropriate, the school will share relevant information to allow the LA to develop appropriate transport plans for pupils with life-threatening conditions.

Defibrillators

The school has Cell-AED automated defibrillators (AED). The schools AED units will be available in the school office and clearly visible.

All staff members and pupils will be made aware of the AED's location and what to do in an emergency.

No training will be needed to use the AED, as voice and/or visual prompts guide the rescuer through the entire process from when the device is first switched on or opened; however, staff members will be trained in cardiopulmonary resuscitation (CPR), as this is an essential part of first-aid and AED use.

The emergency services will always be called where an AED is used or requires using.

Maintenance checks will be undertaken on AEDs on a monthly basis by the school nurse, who will also keep an up-to-date record of all checks and maintenance work.

Confidentiality

Whilst the school will endeavour to maintain confidentiality, in the interests of safety some medical information relating to the child's condition and treatment may be required to be made available to staff at school. This will be discussed at the meeting to arrange an Individual Health Care Plan.

Sometimes it will be appropriate for a photograph to be kept with the child's Individual Health Care Plan. Normally these will be displayed in areas where pupils have restricted access, e.g. staffroom/school office. This will be discussed with parents/carers and pupils as appropriate.

Monitoring and Reviewing the Policy

The Headteacher will ensure that this policy is implemented and monitored and is made known to parents/carers, staff and pupils.

Related Documents

This policy has due regard to all relevant legislation and guidance including, but not limited to, the following:

Children and Families Act 2014

Education Act 2002

Education Act 1996 (as amended)

Children Act 1989

National Health Service Act 2006 (as amended)

Equality Act 2010

Health and Safety at Work etc. Act 1974

Misuse of Drugs Act 1971

Medicines Act 1968

The School Premises (England) Regulations 2012 (as amended)

The Special Educational Needs and Disability Regulations 2014 (as amended)

The Human Medicines (Amendment) Regulations 2017

The Food Information (Amendment) (England) Regulations 2019 (Natasha's Law)

DfE (2015) 'Special educational needs and disability code of practice: 0-25 years'

DfE (2021) 'School Admissions Code'

DfE (2015) 'Supporting pupils at school with medical conditions'

DfE (2022) 'First aid in schools, early years and further education'

Department of Health (2017) 'Guidance on the use of adrenaline auto-injectors in schools'

This policy operates in conjunction with the following school policies:

Special Educational Needs and Disabilities (SEND)

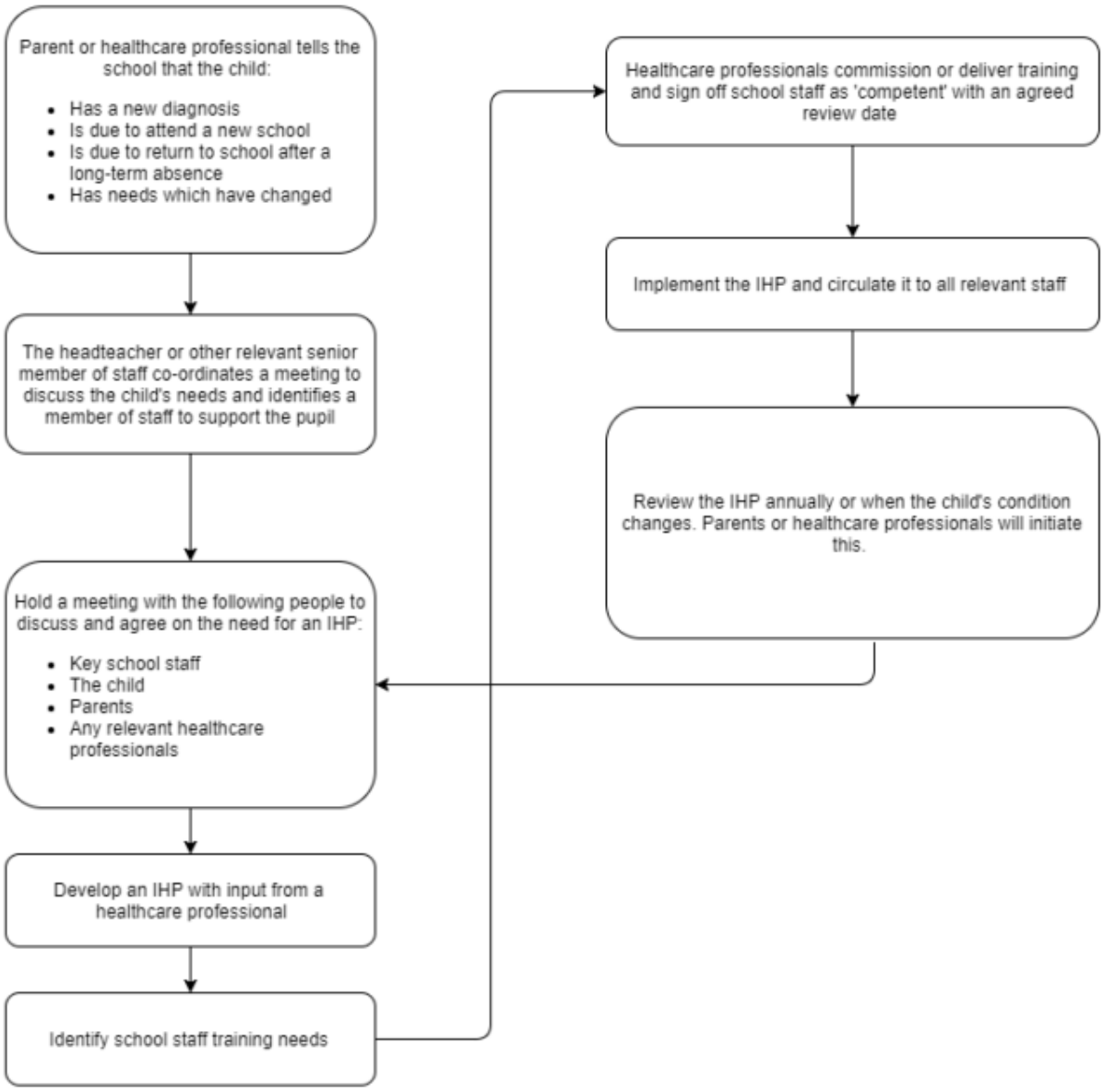
Behaviour Policy

Complaints Procedures

Attendance Policy

Admission Arrangements

Appendix 1: Being notified a child has a medical condition



Appendix 2 Parental agreement for Rotherham Aspire to administer medicine

Rotherham Aspire will not give your child medicine unless **it has been prescribed by a medical practitioner and has been dispensed at a pharmacy** and you complete and sign this form. The medicines must be provided in their original packaging with the child's name and expiry date visible.

Name of Child	
Date of birth	/ /
Year	
Medical condition or illness	

Medicine

Name/type of medicine (as described on the container)	
Date dispensed	/ /
Expiry date	/ /
Dosage and method	
Time medication to be given	
Special precautions	
Are there any side effects we need to know about?	
Procedures to take in an emergency	

Contact Details

Name	
Daytime telephone number	
Relationship to child	
Address	

I understand I must deliver the medicine personally to Rotherham Aspire where it will be checked by a member of the first aid team.
I accept that this is a service Rotherham Aspire is not obliged to undertake. I understand that I must notify Rotherham Aspire of any changes in writing.

Signed _____ Date _____

Appendix 3 Health Care Plan Template

HEALTH CARE PLAN

Student Name:		Year	
Date of Birth:			
Student Address:			

MEDICAL DIAGNOSIS OR CONDITION(S):

Date:	
Review Date:	

CONTACT INFORMATION:		
Name:		
Relationship:		
Parental Responsibility (Yes/No):		
Phone Numbers:	Home:	
	Mobile:	
	Work:	
Name:		
Relationship:		
Parental Responsibility (Yes/No):		
Phone Numbers:	Home:	
	Mobile:	
	Work:	

GP / CLINIC / HOSPITAL CONTACT INFORMATION:	
GP Name:	
Phone Number:	
Medical Practice:	
Other Doctor/Consultant Name:	
Location:	
Phone Number:	

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

Name of medication, dose, method of administration, when to be taken, side effects, contra indications

Daily care requirements (eg before sport/at lunchtime):

Specific support for the students educational, social and emotional needs

Arrangements for school visits/trips etc:

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;	Care Plan copied to:
	First-aid staff Head of Centre Mentors Class teachers