# HOLY CROSS CATHOLIC PRIMARY SCHOOL



**Medical Needs Policy** 

Autumn 2023

### **Mission Statement**

Holy Cross is a Catholic Primary School. Its religious dimension lies at its heart and is fundamental to its existence. Its ethos is based around Christian values as laid down by the person of Jesus Christ, and exemplified in His teaching.

# Our Mission Statement expresses this clearly:

Holy Cross is a Catholic school which seeks to build a closer partnership with parents, the parish and the wider community.

We work hard to provide an environment which is secure, stimulating and happy and where everyone is appreciated and enabled to give of their best.

We encourage all to have respect for each individual, to be honest, tolerant, just and forgiving and to develop a closer relationship with each other and through this, a closer relationship with God.

We recognise Jean Baptiste Debrabant's vision that:

"A Christian based education is a sure hope for the future of religion and society."

#### Introduction

Section 100 of the Children and Families Act 2014 places a duty on all schools to make arrangements for supporting pupils at school with medical conditions and to have regard for the Department for Education's Supporting Children at School with Medical Conditions.

Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone. However, teachers and other school staff in charge of pupils have a common law duty to act in the place of the parent and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site.

This could extend to a need to administer medicine. The prime responsibility for a child's health lies with the parent who is responsible for the child's medication and should supply the school with information.

## **Policy implementation**

Wherever possible we endeavour to:

- Ensure that pupils with medical conditions, in terms of both physical and mental health, are properly supported so that they have full access to education, including educational visits and PE, so that they can play a full and active role in school life, remain healthy and achieve their academic potential
- Ensure that arrangements are in place to support pupils at school with medical conditions, including the use of risk assessments and health care plans
- Consult with health and social care professionals, pupils and parents to properly understand and effectively support pupils with medical conditions

## **Definitions of medical conditions**

Pupils' medical needs may be broadly summarised as being of two types:

- Short-term affecting their participation in school activities because they are on a course of medication
- Long-term and/or complex needs, requiring extra care and support (deemed special medical needs)

Some children with medical conditions may be disabled. Where this is the case the Governing Body must comply with their duties under the Equality Act 2010. Some may also have Special Educational Needs and may have an Education, Health and Care Plan (EHCP) which brings together health and social care needs, as well as their special educational provision.

For children with SEN, this guidance should be read in conjunction with the SEN Code of Practice 2015 (DfE 2015).

# **Roles and Responsibilities**

# **Governing Body**

The Governing Body is legally responsible and accountable for ensuring that arrangements are in place to support pupils at school with medical conditions. The Governing Body will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions. Arrangements are clear and unambiguous about the need to support actively pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

## **Head Teacher**

The overall responsibility for the successful administering and implementation of this Policy is given to the Head Teacher. The Head Teacher will:

- Ensure all staff are aware of this policy and understand their role in its implementation
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all Individual Healthcare Plans (IHPs), including contingency and emergency situations
- Take overall responsibility for the development of IHPs
- Ensure that school staff are appropriately insured and staff are made aware that they are insured to support pupils with medical conditions
- Contact the school nursing service in the case of any pupil 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

• Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

Assistant Head Teacher - Inclusion

The Assistant Head Teacher will be responsible for:

- Briefing supply teachers
- Supporting teachers with risk assessments for school visits and other school activities outside of the normal timetable
- Monitoring IHPs

Medical Needs Co-ordinator

The Medical Needs Coordinator will:

- Take the lead with pupils' specific medical conditions and care plans and the administering of prescribed medicines, including all relevant agreement and consent paperwork
- Keep written records of all medicine administered to pupils
- Inform parents if their child has been unwell at school
- Ensure all controlled drugs, under the Misuse of Drugs Regulations 2001 and subsequent amendments, are kept securely, with accessible access in an emergency

Staff

All staff will be expected to show a commitment and awareness of children's medical conditions and new members of staff will be inducted into the arrangements and guidelines set out in this policy. Staff will consider reasonable adjustments to enable pupils with medical needs to participate fully and safely on school trips, visits and sporting activities. Risk assessments will be carried out so that planning arrangements for inclusion are in place.

If a child is deemed to have a long-term medical condition, the school will ensure that arrangements are in place to support them. In doing so, we will ensure that such children can access and enjoy the same opportunities at school as any other child. The school health professionals, parents/carers and other support services will work together to ensure that children with medical conditions receive a full education, unless this would not be in their best interests because of their health needs. In some cases this will require flexibility and involve, for example, programmes of study that rely on part time attendance at school in combination with alternative provision arranged by the Local Authority and health professionals.

Consideration will also be given to how children will be reintegrated back into school after long periods of absence due to medical needs.

Staff must not give prescription medicines or undertake health care procedures without appropriate training (updated to reflect any IHP). Where appropriate, healthcare professionals, including the school nurse, will provide training and subsequent confirmation of the proficiency of staff in a medical procedure, or in providing medication. Other training is accessed online and proficiency is confirmed by the Medical Needs Co-ordinator.

**Parents** 

#### Parents will:

- Provide the school with sufficient and up to date information about their child's medical needs
- Be involved in the development and review of their child's IHP and may be involved in its drafting •
   Carry out any action they have agreed as part of the implementation of the IHP eg Provide medicines and equipment

**Pupils** 

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute to the development of their IHP. Pupils are expected to comply with their IHP.

## Procedures to be followed when notification is received that a pupil has a medical condition

We will ensure that the correct procedures will be followed whenever we are notified that a pupil has a medical condition. The procedures will also be in place to cover any transitional arrangements between schools, reintegration or when a pupil's needs change.

For children starting at Holy Cross Catholic Primary School, arrangements will be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or children or moving to Holy Cross Catholic Primary School mid-term, we will make every effort to ensure that arrangements are put in place within two weeks. We will ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life. We will ensure that arrangements give parents/carers and pupils confidence in the school's ability to provide effective support for medical conditions in school. The arrangements will show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care.

All relevant staff training will be arranged as soon as possible.

We will ensure that arrangements are clear and unambiguous about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. We 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.

We will make sure that no child with a medical condition is denied admission or prevented from attending the school because arrangements for their medical condition have not been made.

However, in line with our Safeguarding duties, we will ensure that pupils' health is not put at unnecessary risk from, for example infectious diseases. We will therefore not accept a child in school at times where it would be detrimental to the health of that child or others.

The school does not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on the available evidence. This would normally involve some form of medical evidence and consultation with Parents/Carers. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place. This will usually be led the SENCO.

Following the discussions an Individual Health Care Plan will be put in place. Where a child has an Individual Health Care Plan, this will clearly define what constitutes an emergency and explain what to do, ensuring that all relevant staff are aware of emergency symptoms and procedures. Other pupils in school should know what to do in general terms, such as informing a teacher immediately if they think help is needed. If a child (regardless of whether they have an Individual Health Care Plan) needs to be taken to hospital, staff should stay with the child until the parent/carer arrives, or accompany a child taken to hospital by ambulance.

## **Individual Healthcare Plans**

## Support for pupils with allergies

On receiving information regarding allergies, all staff will be made aware of the allergy without delay. This will include catering staff not employed directly by the school.

Parents/carers must provide an in date Epipen where applicable. School staff will receive appropriate anaphylaxis training to administer the Epipen (a First Aid qualification is required to carry out anaphylaxis training).

## Staff training and support

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training.

Training will be identified during development/review of IHPs. A record is kept of all staff training, including Asthma Awareness, Epipen, Diabetes and First Aid trained staff. First Aid training is renewed every 3 years and Asthma Awareness, Epipen and Diabetes training is renewed annually.

# The child's role in managing their own medical needs

Where possible, and in agreement with parents/carers, we aim to ensure that pupils are fully aware of their medical needs and where appropriate are fully involved in managing their routine. This will be reflected in the IHP.

Wherever possible, children should be allowed to carry their own medicines and relevant devices or be able to access their medicines for self-medication quickly and easily; these will be stored in the green Class Medical Boxes to ensure the safeguarding of other children.

If a child is not able to self-medicate, relevant staff will administer medicines and manage procedures. If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so but instead follow the procedure agreed in the IHP. Parents/Carers will be contacted for their advice and decision.

Procedure to be followed for managing medicines:

- Medicines should only be administered at the 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 medicines without their parents written consent, with the exception of an emergency asthma inhaler
- Non-prescription medicines will not be administered by school staff. If a parent/carer wishes a child to have non-prescription medicine administered during the school day, the parents/carer will need to come to the school to administer it to their child
- The 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 inside an insulin pen or a pump, rather than in its original container
- All medicines will be stored safely. Children should know where their medicines are at all times and be able to access them immediately
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to children, but stored safely away from other children. If a child requires an asthma inhaler it is crucial that there is an inhaler, which is still in date, in school at all times
- During school trips, the first aid trained member of staff will carry all medical devices and medicines required
- The only occasion where pain relief medication may be administered by school staff is on a residential visit, where pre-approval is gained from parents prior to the visit

- Staff administering medicines should do so in accordance with the prescriber's instructions. A written record is kept 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 should be returned to the parent/carer to arrange for safe disposal. Sharps boxes are used for the disposal of needles and other sharps

## Unacceptable practice

Although school staff should use their discretion and judge each case on its merits with reference to the child's Individual Health Care Plan, it is not generally acceptable practice to:

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary
- Assume that every child with the same condition requires the same treatment
- Ignore the views of the child or their parents/carers; or ignore medical evidence or opinion (although this may be challenged)
- Send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHP
- Send unwell pupils to the school office or medical area outside the Staffroom, unaccompanied or with someone unsuitable
- Penalise children for their attendance record if their absences are related to their medical condition
  - Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Require parents/carers, or make them feel obliged, to attend the school to administer medication or provide medical support to their child, including toileting issues
- Prevent pupils from participating, or create unnecessary barriers to children participating in any aspect of school life

## **Complaints**

Should parents/carers 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 a formal complaint may be made, using the complaints procedure outlined in the Complaints Policy.

## Staff insurance cover

If these guidelines are followed, including the requisite to obtain parental consent, staff will be protected by the insurance policy against claims of negligence should a child suffer injury as a result of the giving of medicine.

Holy Cross Catholic Primary School Individual Health Care Plan					
Child's Name				Date of Birth	
Class					
Address					
Medical Diagnosis or Condition					
Date			Review Date		
				•	
Name of Parent/ Carer 1					
Contact Numbers	Work: Home: Mobile:				
Relationship to Child					
	Core Values: Resp	ect, Honesty, To	olerance, Justice,	Forgiveness	

Mission Statement Motto: Building relationships with God	l and each other, working hard in faith and hope to give our best in
a	all things.

N ( D 1 /				
Name of Parent/ Carer 2				
Contact	Work:			
Numbers	Home:			
Nullibers				
	Mobile:			
Relationship to				
Child				
Clinic/ Hospital				
-				
Name				
Contact Number				
GP Name				
Gr Name				
<b>Contact Number</b>				
Describe medical r	needs and give details of child's symptoms, triggers, signs, treatments, facilities,			
	ces, environmental issues etc			
equipment of devi	tes, environmental issues etc			
Name of medication	on, dose, method of administration, when to be taken, side effects,			
contraindications, administered by/ self-administered with/without supervision				
Daily care requirer	nents			
Chasifia commant fa	withough independence of control and constituted was a			
Specific support for the child's educational, social and emotional needs,				

Arrangements for school visits/trins					
Arrangements for school visits/trips					
Other information					
Describe what constitutes and emergency and the action to take if this occurs					
Who is responsible in an emergency, state if different for off-site activities					
Staff training needed/undertaken – who, what, where and when					
<u> </u>					
Plan developed with	Signed				