



Supporting Children with Medical Needs Policy

Policy review dates

Review Date	Changes made	By whom
January 2015	Policy created	Tess McDermott / Ian Fenn
January 2016	Policy reviewed	Tess Mcdermott
November 2020	Policy reviewed, key names and roles updated, Mission, Vision, Values added	Mathew Rogers

Ratification by Academy Trustees

Academic year	Date of ratification	Chair of Governors
2014-2015	January 2015	John Milner
2020 - 2021	January 2021	Alan Scott, ratified by Chair of Pastoral Committee Roz Webster

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Mission, vision, values

Mission statement

Burnage Academy for Boys is an inclusive school community where students, staff and families all work together to ensure that boys will be the best they can be.

Vision

At Burnage Academy for Boys we will develop:

- RESILIENCE – we will teach students the skills to face all challenges in life with determination and self-awareness.
- INDEPENDENCE – we will create confident individuals who are able to think critically and make informed decisions.
- CARE – we will go further to make a difference to our students, staff and families, creating a safe space in school.
- SUCCESS – we will celebrate the progress and achievement of all in our school community, recognising that boys do better at Burnage.
- TOGETHERNESS – we will ensure all students take part fully in the range of diverse cultural experiences that Burnage and Manchester has to offer them.

Values

- Resilience
- Independence
- Care

This policy follows City Council guidance and links with:

- › The Attendance Policy
- › Child Protection and Safeguarding Policy
- › SEN Information Statement and Policy
- › Attendance Policy

Introduction

We want all children and young people to have successful and fulfilling lives. Section 100 of the Children and Families Act 2014 places a statutory duty on all schools to effectively manage and meet the needs of children with medical conditions, medical needs and physical disabilities. The aim is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school. The outcome should be that they can play a full and active role in all aspects of school life including trips, educational visits; residential and extended school activities, such that they remain healthy and achieve their academic potential.

This policy document should be considered in conjunction with all other relevant duties, policies and guidance, for example, Health and Safety legislation, the SEND code of practice and the Equality Act 2010 that may impact on support / provision for children with medical conditions.

Some children with medical conditions may be disabled. Where this is the case the Academy Trustees must comply with the duties under the Equality Act 2010. For example, schools are required to make reasonable adjustments to minimise or remove barriers to access and participation and ensure that individuals are not subject to less favourable treatment because of their disability. Some children may also have special educational needs (SEN) and may have a statement or Education, Health and Care Plan (EHC Plan) which brings together health and social care needs as well as their special educational provision. For children with SEN this policy should be read in conjunction with the school SEN policy.

Supporting a child with a medical condition during school hours is not the sole responsibility of one person and the school's ability to provide effective support will depend on co-operative working with other agencies including Health Care professionals, the local authority, parents / carers, the child and, where appropriate, social care or other outreach professionals. This type of partnership working aims to ensure that the needs of children with medical conditions are met effectively.

Medical conditions can sometimes result in short term, frequent or long term absence from school, which can impact on educational attainment. Schools are required to recognise and consider the potential social and emotional implications associated with a medical condition, as well as the educational impact, when planning to meet the child's needs.

Purpose of this Document

The purpose of this policy is to put in place effective management systems, arrangements and practices to support children and young people with medical conditions to attend school.

This policy also aims to give confidence to parents/carers that school will provide effective support for their child's medical condition and support their child to feel safe.

This policy clarifies the range of medical needs that may result in a child requiring support, namely:

- children with long term and/or complex medical conditions who require support to manage their medical needs on a day to day basis to keep them healthy;
- children requiring monitoring and/or intervention in emergency circumstances;

- children whose health needs may change over time in ways that cannot always be predicted.

All staff in schools and academies have a duty to maintain professional standards of care and to ensure that children and young people are safe. It is considered to be good practice that schools and academies will consider and review cases individually and actively support children with medical conditions, including administering medicines or medical interventions in order to meet the all-round needs of the child. However, there is no legal duty requiring individual staff to administer medication, carry out medical interventions or to supervise a child when taking medicines. Any member of staff may be asked to administer medicines or medical interventions but they cannot be required to do so. This is a voluntary role. However a named member of staff is /will be specifically employed to support children with their health needs.

This policy aims to ensure that appropriate support is put in place to limit the impact on educational attainment in the event of a short or long term absence from school. Refer to school policy on managing attendance.

Roles and Responsibilities

1.1 The Academy Trustees

The Academy Trustees are responsible for:

- ensuring the Head Teacher develops and effectively implements policy with partners and school staff, including regular policy review;
- ensuring the Head Teacher makes all staff aware of this policy on supporting children with medical conditions and all staff understand their role in its implementation;
- designating a named individual who is responsible for effective implementation of this policy (the designated person is Karl Harrison – Headteacher and Mathew Rogers – Deputy Headteacher)
- ensuring this policy clearly identifies how the roles and responsibilities of staff who are involved in the arrangements to support children at school with medical conditions are made clear to both staff, parents/carers and the child;
- ensuring that all relevant staff are aware of an individual child's medical condition and needs;
- ensuring that sufficient numbers of staff receive appropriate training to fulfil the roles and responsibilities of supporting children with medical conditions i.e. are able to deliver against all Health Care Plans (HCPs) and implement policy, including in contingency and emergency situations;
- ensuring that a system is in place which identifies procedures to be followed on receipt of notification of a child's medical needs; procedures should cover any transitional arrangements or when child needs change;

- ensuring that cover arrangements are always available in the event of staff absence or staffing changes including briefing for volunteers, supply teachers and appropriate induction for new members of staff;
- ensuring that Health Care Plans (HCPs) are in place, where appropriate, and developed in consultation with parents/carers, Health Care professionals, relevant staff and (if appropriate) the child or young person;
- ensuring that Health Care Plans (HCPs) are monitored and are subject to review, at least annually, or sooner if needs change;
- ensuring that risk assessments relating to the school environment are in place, as appropriate, including consideration for actions to take in the event of emergency situations;
- ensuring that risk assessments relating to off-site visits, residential trips and extended school opportunities offered outside the normal timetable are in place, as appropriate, including consideration for actions to take in the event of emergency situations;
- ensuring that appropriate insurance is in place to support staff to undertake this role;
- ensuring that a complaints procedure is in place and is accessible.

The Head Teacher

The Head Teacher is responsible for:

- ensuring that the notification procedure is followed when information about a child's medical needs are received;
- ensuring that parents/carers provide full and up to date information about their child's medical needs by completion of 'Parent / Carer Information about a Child's Medical Condition' form
- deciding, on receipt of a 'Request to Administer Medicines Form Template form on case by case basis, whether any medication or medical intervention will be administered, following consultation with staff;
- deciding, on receipt of a 'Request to Administer Medicines Form Template' on a case by case basis, whether any medication will be carried by the child, will be self-administered by the child or any medical intervention will be self-administered by the child, following consultation with staff, if appropriate;
- ensuring that procedures are understood and implemented by all staff, volunteers and children.

Staff

Any member of staff may be asked to provide support for a child with a medical condition, including the administration of medicine(s) and medical intervention(s), although they cannot be required to do so; this is a voluntary role.

School staff will receive sufficient and suitable training and achieve competency before they take on responsibility for supporting children with medical conditions.

Where children have a Health Care Plan (HCP) the roles and responsibilities of staff will be clearly recorded and agreed.

Parents/carers Responsibilities

Parents/carers are required to:

- provide the school with sufficient and up to date information about their child's medical needs and to update it at the start of each school year or, if needs change, by completion of 'Parent / Carer Form – Child's Medical Condition' form;
- complete, if appropriate, a 'Parent / Carer 'Request to Administer Medicines Form Template January 2015' form to gain consent for medicines / medical interventions to be administered at school;
- provide up to date contact information so that parents/carers or other nominated adults are contactable at all times;
- carry out any action they have agreed to as part of the implementation of a Health Care Plan (HCP);
- provide any medication in its original packaging, with the pharmacy label stating the following:
 - a) the child's name
 - b) the child's date of birth
 - c) name of medicine
 - d) frequency / time medication administered
 - e) dosage and method of administration
 - f) special storage arrangements
- ensure that medicines or resources associated with delivery of a medical intervention have not passed the expiry date;
- collect and dispose of any medicines held in school at the end of each term or as agreed;
- provide any equipment required to carry out a medical intervention e.g. catheter tubes;
- collect and dispose of any equipment used to carry out a medical intervention e.g. sharps box.

The Child's Information

Parents/carers are required to give the following information about their child's medical condition and to update it at the start of each school year or sooner, if needs change, by completion of 'Parent / Carer Information about a Child's Medical Condition' form:

- a) Details of child's medical conditions and associated support needed at school
- b) Medicine(s), including any side effects
- c) Medical intervention(s)
- d) Name of GP / Hospital and Community Consultants / Other Health Care Professionals
- e) Special requirements e.g. dietary needs
- f) Who to contact in an emergency
- g) Cultural and religious views regarding medical care

Administration of Medicines / Medical Interventions

Medicine / medical interventions will only be administered at school when it would be detrimental to a child's health or attendance not to do so. Parents will be asked at the beginning of each academic year to give written permissions for school staff to support children in the administration of such medicines as prescribed antibiotics, asthma inhalers, moisturising cream for eczema and paracetamol. This is to ensure that children will not need to be sent home with paperwork for parents to sign before their medicine can be administered. Paracetamol will be administered only after a phone call to the parent on the day that the medication is required to ensure that the child receives the right dosage.

It is expected that parents/carers will normally administer medication / medical interventions to their children during their time at home, where at all possible. If the school is in agreement, arrangements can be made for parents to come to school and administer medication.

No medication / medical intervention other than those stated above will be administered without prior written permission from the parents/carers. 'Request to Administer Medicines Form Template'. This form can be distributed to the family through contacting Mathew Rogers, Deputy Headteacher.

The Head Teacher will decide whether and by whom any medication or medical intervention will be administered in school, following receipt of the above form and after consultation with staff.

No changes to administration method or dosage of medication or changes in procedures relating to medical interventions will be carried out without written authority from parents/carers and recorded amendment to the 'Request to Administer Medicines Form Template'.

The Head Teacher will decide whether a child is able to carry and self-administer any medication or self-administer any medical intervention, following consultation with staff as appropriate;

All medicines / medical interventions will normally be administered during school breaks and/or lunchtime.

If, for medical reasons, medicine has to be taken at other times during the day or a medical intervention delivered at a different time, arrangements will be made for the medicine / medical intervention to be administered at other prescribed times.

Children will be told where their medication / medical intervention equipment and resources are kept and who will administer them. This will routinely be in the School Medical Room by the designated member of staff.

Any member of staff, on each occasion, giving medicine / medical intervention to a child should check:

- a) Name of child
- b) Written instructions provided by the parents/carers or Health Care professional on the Request to Administer Medicine form or as agreed in an Health Care Plan (HCP)
- c) Prescribed dose, if appropriate
- d) Expiry date, if appropriate

Any member of staff, on each occasion, will make a written record of medication / medical interventions administered on the 'Record of Administration of Medicine(s) to Children with or without an HCP' and place the note on CPOMS.

No child under 16 will be given medicine containing **aspirin** unless prescribed by a doctor.

Child's Role in Managing their own Medical Needs

After discussion with parents/carers, children who are competent will be encouraged to take responsibility for managing their own medicines and medical interventions.

Written permission from the parents/carers will be required for children to self-administer medicine(s) / medical intervention(s). The school's 'Request to Administer Medicines Form Template' must be completed by parents/carers.

Written permission from the parents/carers will be required for children to carry medicine(s) or resources associated with a medical intervention(s). The school's 'Request to Administer Medicines Form Template' must be completed by parents/carers.

Children who can take medicines or manage medical interventions independently may still require a level of adult support e.g. in the event of an emergency. In this situation agreed procedures will be documented in an HCP.

Refusing Medication / Medical Intervention

If a child refuses to take their medication / medical intervention, staff will not force them to do so.

Refusal to take medication will be recorded and dated on the child's record sheet. Reasons for refusal to take medications / medical intervention must also be recorded as well as the action then taken by the member of staff.

Parents/carers will be informed as soon as possible. Where the child is potentially placing themselves at risk by refusal, parents/carers will be informed immediately.

Storage of Medicines / Medical Intervention Equipment and Resources

All children will know where their medicines / medical intervention equipment/resources are at all times and will be readily available as required. This will routinely be in the School Medical Room.

Controlled drugs

A child who is 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.

Where controlled drugs are not an individual child's responsibility, they will be kept in a non-portable locked cabinet in a secure (named) environment. This will routinely be in the School Medical Room. Only named staff will have access.

Controlled drugs will be easily accessible in an emergency as agreed with parents/carers or described in the child's HCP.

Where controlled drugs are not an individual child's responsibility, records will be kept of any doses used and the amount kept on the premises.

Non-controlled drugs and medical resources

All medicines and medical equipment / resources will be stored safely as agreed with parents/carers or described in the child's HCP.

Records

School will keep a record of all medicines / medical interventions administered to individual children on each occasion, including the following:

- a) Name of child
- b) Date and time of administration
- c) Who supervised the administration
- d) Name of medication
- e) Dosage
- f) A note of any side effects / reactions observed
- g) If authority to change protocol has been received and agreed.

Training

Staff must not give prescription medicines or undertake Health Care procedures without appropriate training. A First Aid Certificate does NOT constitute appropriate training in supporting children with medical conditions. The School Nurse Service or other Health Professional will be required to train staff as appropriate.

All staff will be made aware of the school's policy for supporting children with medical conditions and their role in implementing that policy through for example whole school awareness training, involvement in development of HCPs, staff briefing sessions, etc.

Specialist training and advice will be provided by appropriate Health Care professionals, e.g. specialist epilepsy nurse, asthma training by school nurse, etc. for staff involved in

supporting children with medical conditions including the administration of relevant medicines / medical interventions.

Training for all staff will be provided on a range of medical needs, including any resultant learning needs, as and when appropriate.

Training will be sufficient to ensure staff are competent and have confidence in their ability to support children with medical conditions, and to fulfil the requirements as set out in Health Care Plans. Induction training will raise awareness of school's policy and practice on supporting children with medical condition(s).

School will make every effort to ensure that specialist training will be completed as quickly as possible to ensure that the child is able to attend school safely.

Health Care Plans (HCP)

Where appropriate, a Health Care Plan (HCP) will be drawn up in consultation with the school, parents/carers, health professionals and any other relevant professionals. This will usually be in conjunction with the School Nurse

The content of an individual child's HCP will be dependent on the complexity of their needs and may include the following:

- a) an overview (One Page Profile) of the child's needs and provision in place in school to manage those needs;
- b) a description of the medical condition, its presentation (signs, symptoms, triggers etc) and impact on access to the school environment and learning opportunities;
- c) arrangements around administration of medication(s) / medical intervention(s);
- d) arrangements around management of medical emergency situations;
- e) arrangements around management and support for personal care needs, including intimate and invasive care e.g. catheterisation, toileting support, gastro-tube feeding etc;
- f) risk assessment for access to the school environment and curriculum;
- g) arrangements for evacuation in the event of an emergency;
- h) the level of support required in school, who will provide this support, their training needs and cover arrangements for when they are unavailable;
- i) how, if agreed, the child is taking responsibility for their own health needs;
- j) a reference to staff confidentiality.

Health Care Plans will be reviewed annually or sooner if needs change.

Intimate and Invasive Care

Cases where intimate or invasive care is required will be agreed on an individual basis. Decisions made about procedure and practice will be recorded within the children Health Care Plan HCP and take account of safeguarding issues for both staff and children.

Information about the types of training required for administration of medicines and medical interventions commonly found in schools is contained in the LA (Medicines and Medical Interventions).

Off-Site and Extended School Activities

Children with medical conditions will be actively supported in accessing all activities on offer including school trips, sporting activities, clubs and residential / holidays.

Preparation and forward planning for all off-site and extended school activities will take place in good time to ensure that arrangements can be put in place to support a child with a medical condition to participate fully.

School will consider what reasonable adjustments need to be put in place to enable children with medical conditions to participate safely and fully.

School will carry out a thorough risk assessment to ensure the safety of all children and staff. In the case of children with medical needs the risk assessment process will involve consultation with child, parents/carers and relevant Health Care professionals to ensure the child can participate safely. Please refer to Health and Safety Executive (HSE) Guidance on School Trips.

In some circumstances evidence from a clinician, such as a hospital consultant, may state that participation in some aspects offered is not possible. Where this happens school will make alternative arrangements for the child.

Arrangements will be in place to ensure that an HCP can be implemented fully and safely when out of school. Risk assessment will identify how HCPs will be implemented effectively off-site and where additional supervision or resources are required.

Managing Emergencies and Emergency Procedures

The Head Teacher will ensure that all staff are aware of the school's general risk management processes and planned emergency procedures.

Where a child has an HCP this will clearly define what constitutes an emergency and describes what to do. This may include:

- a) an Emergency Medical Protocol that details the actions to be taken by staff and supported by specialist training where relevant e.g. seizure management and administration of rescue medication;
- b) a Personal Emergency Evacuation Plan (PEEP) that details the actions to be taken by staff to support the child's evacuation from the building, supported by specialist training where relevant e.g. use of an Evac chair; the Personal Emergency Evacuation Plan should also detail the actions to be taken by staff to support how staff will manage the child's medical needs during the evacuation e.g. ensuring appropriate medication is taken outside and is available whilst at the assembly point.

School has a procedure for contacting emergency services which will be included in the staff handbook and displayed in the appropriate places offices.

Confidentiality and Sharing of Information within School

School is aware of the need to manage confidential information sensitively and respectfully, maintaining the dignity of the child and family at all time.

School will disseminate information to key members of staff involved in the child's care on a needs-to-know basis, as agreed with parents/carers.

Where the child has a Health Care Plan (HCP) this will be shared with key staff with regular scheduled re-briefings. This will be communicated to all 1st Aid trained staff and the child's House Leader.

School will ensure that arrangements are in place to inform new members of staff of the child's medical needs. Information signposting staff to the existence of a health need will be on the School's MIS system. Health Care Plans will be available to all 1st Aid trained staff and Health Professionals, School Nurse Personnel but will be password protected to ensure confidentiality.

School will ensure that arrangements are in place to transfer information on a child's medical needs to staff during any transition.

Liability and Indemnity

School insurance policies provide liability cover relating to the administration of medicines.

In the case of medical interventions, individual cover may be arranged for any specific Health Care procedures, including information about appropriate staff training and other defined requirements of the insurance policy.

Complaints Procedure

In the first instance parents/carers dissatisfied with the support provided should discuss their concerns directly with the Deputy Headteacher Mathew Rogers.

If, for whatever reason, this does not resolve the issue then a formal complaint can be made through the school complaint policy, which can be found on the School Website.

Unacceptable Practice

The school considers that the **following constitute unacceptable practice:**

- requiring Parent / Carers or otherwise making them feel obliged to attend school to administer medicines / medical interventions or provide medical support to their child, including around toileting issues – no Parent / Carer should have to give up working because the school is failing to support their child's medical needs;
- preventing children from participating or creating unnecessary barriers to children participating in any aspect of school life, including trips, e.g. by requiring parents/carers to accompany the child.
- preventing children from easily accessing and administering their medicines as and where necessary;
- assuming that every child with the same condition requires the same treatment;
- ignoring the views of the child and/or their parents/carers (although this may be challenged);
- ignoring medical evidence or opinion (although this may be challenged);
- sending children with medical conditions home frequently when adequate care could be made for them in school;

- preventing children with medical conditions from staying at school for normal school activities, including lunch, unless this is specified in their HCP;
- if the child becomes ill, sending them to the school office or medical room unaccompanied or with someone unsuitable;
- penalising children for their attendance record if their absences are related to their medical condition e.g. hospital appointments;
- preventing children from eating, drinking or taking toilet / other breaks whenever they need to in order to manage their medical condition effectively. Children who have medical needs will be issued with a Medical Pass. This will cover all eventualities from using the toilet, taking their medicines, seeing named members of staff as necessary.

Policy Information and Review

Information about ratification of policy, signatures and review dates can be found on the front cover of this policy document.

Additional Documents

- **Parent / Carer Information about a Child's Medical Condition**
- **Request to Administer Medicines Form**
- **Record of Administration of Medicine(s) to Children without an HCP**
- **Record of Administration of Medicines / Medical Intervention to an Individual Child with a HCP**