



KING JAMES'S SCHOOL, KNARESBOROUGH

## POLICY STATEMENT



# Supporting Students with Medical Conditions Policy

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**King James's School** welcomes and supports students with medical and health conditions. We aim to include all students with medical conditions in all school activities, including off site visits, differentiated as appropriate. We recognise that some medical conditions may be defined as disabilities and consequently come under the Equalities Act 2010.

The school's policy reflects the report from Ofsted published in November 2013 'Pupils missing out on education', Section 100 of the Children and Families Act 2014 and we also use the North Yorkshire County Council Guidance (February 2015) and the Department for Education's statutory guidance 'Supporting pupils at school with medical conditions' (December 2015).

## 1. POLICY AIM

The key aims of the policy are:

- To identify pupils' medical needs early and to ensure that prompt action is taken.
- Ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.
- To provide continuity of high quality education, so far as the medical condition or illness allows.
- To reduce the risk of social and emotional implications associated with medical conditions such as reduced self-confidence, being bullied and reduced educational achievement.
- To establish effective liaison and collaboration with all concerned in ensuring that pupils with medical conditions are properly understood and effectively supported to have full access to education, including school trips and physical education.
- To work with parents and local health services to ensure parents feel confident we understand and can provide necessary support, medicines or care to manage their child's condition at school, keep them well and manage any emergency situations appropriately.
- To put appropriate support in place to limit the impact of short term and frequent absences, including those for appointments connected with a medical condition on the child's educational attainment and emotional and general wellbeing.
- Ensure a supported reintegration into school for pupils with long term or recurring illness or medical conditions.

## 2. PROCEDURE TO BE FOLLOWED WHEN NOTIFICATION IS RECEIVED THAT A PUPIL HAS A MEDICAL CONDITION

The Assistant Headteacher and School Nurse are responsible for implementing the policy and will ensure, through liaison with the Healthy Child Team, that the individual medical needs of students, where appropriate, are suitably recorded via a school Health Care Plan.

Students who transfer from Year 6:

- For students who make the transition to King James's School from their primary school, the identification of medical needs of the student will be identified by the primary liaison team during their visits as well as through the admission form.

#### Students who make a mid-year application to King James's School:

- For students starting at King James's School through the mid-year application process, the identification of medical needs will be identified at the initial admission meeting with parents and the admission form.
- The Pastoral Officer with responsibility for that student will contact the student's previous school prior to admission to discuss the student's needs.

#### Students currently on roll

- Where the school is notified that an existing student has a new medical condition the Assistant Headteacher will ensure that a meeting is held between the Pastoral Officer, school nurse and parents to discuss the student's needs.

In any of these cases, if the need to complete an individual health care plan is recognised, the designated member of staff will liaise with school staff, the school nurse, parents and healthcare professionals to ensure the student has access to their full curriculum offer, if this is appropriate. They will seek further information from parents and health professional, determine whether an Individual healthcare plan or a risk assessment is required, arrange a meeting to develop the plan, arrange staff training and implement and monitor the plan.

Individual health care plans will help ensure that King James's School effectively supports students with medical conditions. The school does not need to wait for a formal diagnosis before implementing a health care plan and not all students with a medical condition will require a plan. The school staff, school nurse, parents and healthcare professionals should agree, based on evidence, when a plan would be appropriate.

If the plan indicates medicines need to be administered during school hours it will clearly state the procedure for this, as well as how the medicines will be stored.

Health care plans will be disseminated to school staff on a case-by-case basis. The breadth of distribution will be decided by the parents, student, school staff and healthcare professionals when drawing up the plan, taking into account the need for confidentiality and ensuring that appropriate support is delivered.

### **3. STAFF TRAINING**

The designated member of staff will ensure that any member of school staff providing support to a student with medical needs will have received suitable training. The level of training required will be identified on an individual level through the health care plan. The relevant healthcare professional will be invited to lead on the type and level of training required, and how this can be obtained. Any member of staff who is trained but feels unable to carry out these duties competently must report this as soon as possible to the Assistant Headteacher who will make the appropriate arrangements.

School keep a training record and ensure that training is refreshed as appropriate. The Headteacher is involved in determining the competency of a member of staff in undertaking specific duties. Staff who complete records are shown by the School Nurse how these are completed and managed. The Assistant Headteacher quality assures this regularly.

Staff must not give prescription medicines or undertake healthcare procedures without appropriate training.

We aim for all staff to receive basic awareness training in the more common conditions such as asthma, epilepsy and allergic reaction. This is delivered by the School Nurse as appropriate and supporting information about these conditions is displayed in the Nurse's office.

All staff (including supply/cover staff) are made aware of students with a medical condition as they are flagged as M (Medical) on Bromcom with appropriate information available.

Arrangements for the induction of new staff are part of the Safeguarding section of the induction programme.

#### **4. FIRST AIDERS**

The school directly employs a full-time, fully trained nurse.

We have trained first aiders on site at all times throughout the school day who are aware of the most common serious medical conditions at this school. All PE teachers and members of the Pastoral Team are regularly first aid trained. The up-to-date list of these staff is available on Fronter.

#### **5. THE CHILD'S ROLE IN MANAGING THEIR OWN NEEDS**

We encourage all students to manage as much of their own needs as is appropriate. After discussion with parents, students who are deemed competent will be encouraged to take responsibility for managing their own medical needs and procedures. Parents should complete and return a Request for Child to Carry and Self Administer Medication Form (Appendix 2) We provide support to gradually take on more of their own care, over time, as appropriate with the aim of them becoming as independent as possible.

Wherever possible, and with consent from parents, students should be encouraged to carry their own medicines (in small quantities and in original dispensary packaging) and relevant devices or should be able to access their medicines for self-medication quickly and easily with spares being held by the school nurse. Children who can take their medicines themselves or manage procedures may require an appropriate level of supervision, which will be provided.

If it is not appropriate for a child to self-manage, then the school nurse or other trained staff should help to administer medicines and manage procedures for them.

If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so. Parents should be informed as soon as is reasonably possible so that they can make alternative arrangements.

#### **6. MANAGING MEDICINES ON SCHOOL PREMISES AND RECORD KEEPING OF MEDICINES ADMINISTERED**

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

No student under 16 will be given prescription or non-prescription medicines without parental consent- except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, every effort should be made to encourage the child or young person to involve their parents while respecting their right to confidentiality. If the school is required to administer medicines a signed NYCC consent form is required (Appendix 1).

All medicines are stored safely in a locked cupboard in the original prescribed container, except for Epipens which are kept in the nurses room during school hours for easy access and locked away at the end of the day (in line with NYCC guidelines). Emergency inhalers are also available for students diagnosed with asthma. These will only be used where a parent has given prior written consent to use in such circumstances. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens are always readily available to children and not locked away.

If the school nurse is unavailable or absent, trained First Aid staff have access to the locked cupboard.

Any medication that is administered is logged on the school Management Information System

(CPOMS) and any side effects of the medication should be noted and parents informed.

No medication will be administered if it is the wrong dose, prescribed for a different family member or without consent. Medication will not be administered without first checking maximum dosages and when the previous dose was taken. If this is the case parents will be informed. School will only accept prescribed (by a doctor, dentist, nurse prescriber or pharmacist prescriber) medicines if these are in date, labelled, provided in the original container as dispensed by the pharmacist and include instructions for administration, dosage, frequency and storage (a permitted exception is an insulin pen or pump). Where clinically possible medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.

We will only accept non prescribed medication if it is included in an Individual Healthcare Plan or if we have written procedure in place for that type of medication.

We will not give Aspirin to any student under 16 unless it is prescribed.

If a student requires analgesics which will then allow them to remain in school and there is no consent or they have not been provided, parents are contacted and asked to come into school and administer the medication to their child.

As a school we do not provide medication, we will only administer following the above criteria.

When medicine is no longer required they are returned to parents for safe disposal or appropriately disposed of at a pharmacy. Sharp boxes are used for the disposal of needles and other sharps.

Refrigerated medications are stored in a clearly labelled airtight container in the fridge located in the Nurse's Office; an area inaccessible to unsupervised students.

Any controlled drugs that have been prescribed for a pupil are securely stored (double locked) in a non portable container and only named staff have access. Controlled drugs are easily accessible in an emergency and a record is kept of any doses used and the amount of controlled drug held.

## **7. DAY TRIPS, RESIDENTIAL VISITS AND SPORTING ACTIVITIES**

### **Day trips, residential visits and sporting activities**

School staff should be aware of how a student's medical condition will impact on their participation, but there should be enough advanced planning and flexibility for all children to participate according to their own abilities and reasonable adjustments.

The school will make arrangements for the inclusion of students in activities with any adjustments required unless evidence from a health care professional states that it is not possible.

The school's *Educational Off-site Visits and all Adventurous Activities Policy* ensures trip leaders plan for the needs of students with medical conditions, undertake the necessary risk assessments and make the necessary adjustments so that students with medical conditions are able to participate fully and safely. The risk assessment will require participation from parents, pupils and relevant healthcare professionals. This is specifically relevant for residential visits when they may require medication/procedures that they would not normally require during the school day. Any medication, equipment, health care plans should be taken and kept appropriately during the trip.

## **8. EMERGENCY PROCEDURES**

We have a procedure in place for dealing with emergencies and all staff know they have a duty to take swift action. Regular staff training and communication ensure that all staff feel confident in knowing what to do in an emergency.

If a student needs to be taken to hospital, an ambulance will be called and every effort is made to inform parents as soon as possible. If parents are not available, a member of staff will accompany and school will phone the parent/s to meet the ambulance at casualty. The member of staff will stay with the student until a parent/carer arrives. Health professionals are responsible for any decisions on medical treatment in the absence of a parent.

Staff will not take a student to hospital in their own car unless it is an absolute necessity.

It is the responsibility of parents to ensure that the school and their sons/daughters have their current telephone numbers and an address where they can be contacted during the school day.

Where the child has an individual healthcare plan this should define what constitutes an emergency and explain what to do.

As part of our first aid equipment we have two defibrillators in school and staff have been trained to use them and check they are kept in good condition.

## **9. RECORD KEEPING**

Records of students' medical conditions are recorded on an individual's enrolment form, Bromcom, CPOMS and the Health Care Plan record file stored securely in the Nurse's office.

School Nurse oversees and keeps the Request for School to Administer Medication NYCC Appendix 1 and the Request for Child to Carry and Self Administer Medication NYCC Appendix 2.

School Nurse or relevant first aider will record securely on CPOMS when they have administered medication to an individual including all the information suggested on NYCC Administration and Medication Record (Appendix 3) This information can be reported as a Whole School Record of Medicine Administered as Appendix 4.

Staff training records (NYCC Appendix 5) are stored with the Healthcare Plans and on the Evolve system for specific educational visits, trips and residential visits.

All these records will be kept securely and in accordance with NYCC Records Retention and Disposal Schedule. All electronic records are password protected.

### **Individual Healthcare Plans (NYCC Appendix 6)**

- For students with more complex medical needs we use Individual healthcare plans to record important details. Individual healthcare plans are held in the Nurse's office in accordance with data protection. They are updated when and if there are significant changes and also annually reviewed with parents and health care professionals.
- Individual Healthcare Plans are shared on a need to know basis with staff who are directly involved with implementing them.
- Individual Healthcare Plans are also shared, with parent/s permission, with NYCC risk management and insurance
- The named person is responsible for ensuring any Individual healthcare plans are developed
- The named person is responsible for checking Individual Healthcare plans on an annual basis to ensure they are up to date and being implemented correctly.
- Risk assessment information is usually included on the Healthcare Plan but is a separate risk assessment is required we may use Appendix 13.

### **Asthma**

- School staff are aware that, although it is a relatively common condition, asthma can

- develop into a life-threatening situation.
- We have a generic asthma plan in place in school, which details how asthma attacks are managed. This plan is displayed in the Nurse's office.
- Students who have asthma will not have an Individual Healthcare Plan unless their condition is severe or complicated with further medical conditions.
- The Headteacher and Governing body have chosen to keep emergency Salbutamol inhalers and spacers in school for use by students who have a diagnosis of asthma and whose parent/s have given us written permission for their child to use it. This would be in rare circumstances where an inhaler has become lost or unusable. Parents are informed by telephone if their child has used the schools emergency inhaler. (See NYCC Appendix 10 and Appendix 10b).
- The School Nurse is responsible for managing the stock of the emergency school Salbutamol inhalers.
- The emergency salbutamol inhalers will be kept in the Nurse's office along with a register of student whose parent/s has given permission for these to be used as appropriate.

## 10. ROLES AND RESPONSIBILITIES OF ALL INVOLVED IN SCHOOL

### **The Local Authority**

Has a responsibility to:

- Provide support, advice and guidance, including suitable training for school staff, to ensure that the support specified within individual healthcare plans can be delivered effectively.
- Work with schools to support pupils with medical conditions to attend full time.
- Where pupils would not receive a suitable education in a mainstream school because of their health needs, the local authority has a duty to make other arrangements. Statutory guidance sets out that they should be ready to make arrangements under this duty when it is clear that a child will be away from school for 15 days or more because of health needs (whether consecutive or cumulative across the school year).

### **The Governing Body**

Has a responsibility to:

- Make arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed and implemented.
- Ensure that a pupil with medical conditions is supported to enable the fullest participation possible in all aspects of school life.
- Ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. It should also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

### **The Headteacher**

The Headteacher holds overall responsibility for the following but delegates some of the responsibilities to the Assistant Headteacher (Safeguarding) and School Nurse. He has responsibility to:

- Ensure the school is inclusive and welcoming and that the medical conditions policy is in line with local and national guidance and policy frameworks.
- Ensure the policy is put into action, with good communication of the policy to all.
- Ensure every aspect of the policy is maintained.
- The Headteacher has overall responsibility for the development of individual healthcare plans and should also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way.

### **The Assistant Headteacher (Safeguarding)**

The designated member of staff overseeing this policy and the NYCC Policy Statement is the Assistant Headteacher (Safeguarding) who will:

- Liaise between interested parties including student, school staff, special educational needs coordinators, pastoral support/welfare officers, teaching assistants, Healthy Child Nurse, parents and governors.

- Ensure information held by the school is accurate and up to date and that there are good information sharing systems in place using Individual Healthcare plans.
- Ensure student confidentiality.
- Assess the training and development needs of staff and arrange for them to be met.
- Provide/arrange provision of regular training for school staff in managing the most common medical conditions in school.
- Ensure all supply staff and new teachers know and implement the medical conditions policy.
- Update the medical policy at least once a year according to review recommendations and recent local and national guidance and legislation.
- Ensure absences due to medical needs are monitored and alternative arrangements for continuing education are in place.
- Quality assure record keeping and work together to quality assure staff competency in specific procedures.
- Regularly remind staff of the school medical policy and procedures.
- Attend, or ensure attendance at, planning meetings and reviews.
- Maintain, or ensure that communication is maintained generally between the pupil and the school, especially with regard to activities and social events that may enable the pupil to keep in touch with peers.
- Liaise with the SENCo as to whether to proceed with an Education and Health Care Plan.
- Monitor attendance of all pupils with medical conditions and for absences of 15 working days or less, that are not part of a pattern of a recurring illness, liaise with the pupil's parents to provide homework as soon as the pupil is able to cope with it and ensure continuity of learning.
- Liaise with the Prevention Service regarding all pupils expected to be absent from school for 15 working days or more (including time in hospital) and make a referral as soon as possible to the local Behaviour and Attendance Collaborative for support in making educational provision for the pupil.
- Co-ordinate with the PRS the education provision from the first day of absence for pupils who have disrupted patterns of attendance due to recurring illness or chronic conditions.
- Ensure that where a referral is made, access to the planning and assessments in all national curriculum subjects which the pupil is studying is made available to PRS staff within 5 working days and work programmes on a termly basis where appropriate.
- Liaise with the designated home/medical teacher regarding the action plan as agreed at planning and review meeting.
- Make available to the PRS staff Individual Education Plans, Personal Education Plans, Individual Health Care Plans and Risk Assessments where appropriate.
- Supply PRS hospital teachers with background information on the child or young person and liaise to ensure that work set at an appropriate level for long and recurring admissions to hospital.
- Organise part-time attendance at school in combination with alternative provision if appropriate.
- Monitor provision, progress and reintegration arrangements.
- Ensure that pupils who are not able to attend school because of medical needs have access to public examinations.
- Ensure that the views of pupils and parents/carers are taken into account
- Ensure that arrangements are in place to comply with procedures set out in the SEN Code of Practice (2014) where applicable.
- Promote equality of opportunity for pupils with medical needs having due regard for their duties under the Equality Act 2010.
- Keep the child on the school roll.
- Support with transition to a new school or setting where needed.
- Review this policy annually.

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## **Special Educational Needs Co-ordinator**

Has a responsibility to:

- Help update this policy.
- Know which students have a medical condition and which have special educational needs because of their condition.
- Ensure teachers and TAs make the necessary arrangements if a student needs special consideration or access arrangements in exams or coursework.

### **School Nurse- Healthy Child Team (Local Authority) and other health care professionals**

King James's School has access to school nursing services and other health care professionals, including GPs and paediatricians. They have a responsibility to:

- Notify 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.
- Support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training and liaise with lead clinicians locally on appropriate support for the child and associated staff training needs.

### **School Nurse (King James's)**

King James's School employs a full time, registered nurse who is available during the school day to oversee the care of student and take a lead in the implementation of this policy. They have a responsibility to:

- Understand and implement the medical policy.
- Know which students in their care have a medical condition.
- Allow all students to have immediate access to their emergency medication.
- Maintain effective communication with parents including informing them if their child has been unwell at school.
- The school nurse is responsible for storage of medicines, collating, updating, reviewing and distributing healthcare plans, advising pupils and staff on managing medical conditions within school as well as dealing with the day to day medical needs of all pupils at the school.
- The school nurse will also ensure that the school MIS (Bromcom and CPOMS) is up to date with medical information and will liaise with the Pastoral Team to ensure relevant information is disseminated to teaching staff.
- They ensure the expiry dates for all medication stored in school are checked and out of date medication is disposed of and recorded appropriately.
- Remind parents of their responsibility when the supply of medicine needs replenishing / disposing of.
- Check the contents of first aid kits and replenish as necessary.
- Ensure Individual Healthcare plans are completed and reviewed annually.

### **First Aiders**

First Aiders at this school have a responsibility to:

- Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards within school.
- When necessary ensure that an ambulance or other professional medical help is called.

### **School Staff**

All staff have a responsibility to:

- 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.
- Know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.
  - Be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency.
  - Ensure students who carry their medication with them have it when they go on a

school trip or out of the classroom e.g. to the field for PE.

- Be aware of students with medical conditions can affect a student's learning and provide extra help when needed. Recognise who may be experiencing bullying and may need extra social support.
- Ensure all students with medical conditions are not excluded unnecessarily from activities they wish to take part in.
- Ensure students have the appropriate medication or food with them during any exercise and are allowed to take it when needed.
- Ensure students who have been unwell catch up on missed work.
- Liaise with parents, healthcare professionals and special educational needs co-ordinator if a student is falling behind with their work because of their condition.

### **Parents/Guardians**

Parents/Guardians are expected to support their child by:

- Telling school if their child has / develops a medical condition and immediately informing (the school office) in writing if there are any changes to their child's condition or medication.
- Ensuring that they/ their emergency representative is contactable at all times.
- Administering medication and undertaking health care procedures out of school hours wherever possible
- Ensuring they supply school with correctly labelled in date medication.
- Contributing to the writing of individual health care plans / intimate personal care plans as appropriate.
- Completing the necessary paperwork e.g. request for administration of medication.
- Collecting any out of date or unused medicine from school for disposal.
- Keeping their child at home if they are not well enough to attend school / infectious to other people.
- Ensure their child catches up on any school work they have missed.
- Ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional.

Parents who do not provide this support should be aware that we may not be able to fully support their child's medical condition in school.

### **Pupils**

Have a responsibility to:

- Contribute as much as possible to the development of, and comply with, their individual health care plan.
- Treat other students with and without a medical condition equally.
- Tell their parents, teacher or nearest staff member when they or another student is not feeling well.
- Treat all medication with respect.
- Know how to gain access to their medication (includes emergency medication).
- Ensure a member of staff is called in an emergency situation.

### **Unacceptable practice**

Although school staff should use their discretion and judge each case in turn with reference to a student's individual healthcare plan, it is not generally acceptable practice to:

- prevent students from easily accessing their inhalers and medication and administering their medication when and where necessary.
- assume that every student with the same condition requires the same treatment.
- ignore the views of the student or their parents; or ignore medical evidence and opinion (although this may be challenged).
- send students with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plan.
- if a student becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable.

- penalise children for their attendance record if their absence s are related to their medical condition e.g. hospital appointments.
- prevent students from eating, drinking or taking toilet or other breaks in order to manage their medical condition effectively.
- require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child (unless parents have failed to provide the correct consent).
- prevent students from participating, or create unnecessary barriers to them participating in any aspect of school life, including trips.

## **11. DISTRIBUTION OF THE SCHOOL MEDICAL POLICY**

Parents and staff are informed about the school medical policy on induction to the school, via school newsletters and can access it on the school website and Fronter.

## **12. LIABILITY AND INDEMNITY PROCEDURES AND COMPLAINTS**

King James's insurance policies will provide liability cover relating to the administration of medication, but individual cover may need to be arranged for any health care procedures. The level and ambit of cover required must be ascertained by the relevant insurers. Any requirements of the insurance such as the need for staff to be trained is be made clear and complied with. The Headteacher is responsible for ensuring staff are insured to carry out health care procedures and administer medication. A copy of this insurance policy can be requested from school.

In the event of a claim alleging negligence by a member of staff, civil actions are likely to be brought against the employer.

## **13. COMPLAINTS**

Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with school. Formal complaints should be made following the school complaints procedure.

## **14. POLICY MONITORING AND REVIEW**

This policy will be reviewed on an annual basis by King James's School governing body.