# **REACH School**



# Supporting Students with Medical Conditions Policy

Policy Details	Supporting Studentswith Medical Conditions
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# Statement of intent

REACH school wishes to ensure that students with medical conditions receive appropriate care and support at school. This policy has been developed in line with the Department for Education's guidance released in 2014 and updated in 2017– "Supporting students at school with medical conditions".

Ofsted places a clear emphasis on meeting the needs of students with SEN and Disabilities and this includes children with medical conditions.

#### Key roles and responsibilities

#### 1.1. REACH school leadership team is responsible for:

- 1.1.1. Promoting cooperation between relevant partners and stakeholders regarding supporting students with medical conditions.
- 1.1.2. Providing support, advice and guidance to staff.
- 1.1.3. Making alternative arrangements for the education of students who need to be out of school for fifteen days or more due to a medical condition.

# 1.2. The Governing Body, Headteacher, The Medical Lead and SENDCO are responsible for:

- 1.2.1. The overall implementation of the Supporting Students with Medical Conditions Policy and procedures of REACH school.
- 1.2.2. Ensuring that the Supporting Students with Medical Conditions Policy, as written, does not discriminate on any grounds including, but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation.
- 1.2.3. Ensuring that all students with medical conditions are able to participate fully in all aspects of school life.
- 1.2.4. Guaranteeing that information and teaching support materials regarding supporting students with medical conditions are available to members of staff with responsibilities under this policy.
- 1.2.5. Keeping written records of any and all medicines administered to individual students and across the school population.
- 1.2.6. Ensuring the level of insurance in place reflects the level of risk.

#### 1.3. The Medical Needs Lead and Sendco are responsible for:

- 1.3.1. The day-to-day implementation and management of the Supporting Students with Medical Conditions Policy and procedures of REACH school.
- 1.3.2. Ensuring the policy is developed effectively with partner agencies.
- 1.3.3. Making staff aware of this policy.
- 1.3.4. Liaising with healthcare professionals regarding the training required for staff.
- 1.3.5. Making staff who need to know aware of a child's medical condition.
- 1.3.6. Liaison and communication about medicine administration with the office manager and staff taking students off site.
- 1.3.7. Developing/revising Individual Healthcare Plans (IHCPs) where necessary.
- 1.3.8. Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHCPs in normal, contingency and emergency situations.
- 1.3.9. Contacting the school nursing service in the case of any child who has a medical condition or need.

#### 1.4. Staff members are responsible for:

- 1.4.1. Taking appropriate steps to support children with medical conditions.
- 1.4.2. Where necessary, making reasonable adjustments to include students with medical conditions into lessons.
- 1.4.3. Administering medication, if they have agreed to undertake that responsibility.
- 1.4.4. Undertaking training to achieve the necessary competency for supporting students with medical conditions, if they have agreed to undertake that responsibility.
- 1.4.5. Familiarising themselves with procedures detailing how to respond when they become aware that a student with a medical condition needs help.

#### 1.5. School nurse services are responsible for:

1.5.1. Notifying the school when a child has been identified with requiring support in school due to a medical condition, alongside regular

contact The Medical Needs Lead and SENDCO in regarding services/needs in school.

### 1.6. Parents and carers are responsible for:

- 1.6.1. Keeping the school informed about any changes to their child/children's health.
- 1.6.2. Completing a parental agreement for school to administer medicine form before bringing medication into school.
- 1.6.3. If necessary, providing the school with the medication their child requires and keeping it up to date. This must be in boxes with labels.
- 1.6.4. Collecting any leftover medicine at the end of the course or year.
- 1.6.5. Discussing medications with their child/children prior to requesting that a staff member administers the medication.
- 1.6.6. Where necessary, developing an Individual Healthcare Plan (IHCP) for their child in collaboration with The Medical Needs Lead and SENDCO, other staff members and healthcare professionals.

# 2. Definitions

- 2.1. "Medication" is defined as any prescribed or over the counter medicine.
- 2.2. "Prescription medication" is defined as any drug or device prescribed by a doctor.
- 2.3. A "staff member" is defined as any member of staff employed at REACH school, including teachers.

# 3. Training of staff

- 3.1. Teachers and all staff will receive training on the Supporting Students with Medical Conditions Policy as part of their induction and on-going staff training.
- 3.2. Teachers and all staff will receive regular and ongoing training as part of their development.
- 3.3. Teachers and all staff who undertake responsibilities under this policy will receive the appropriate training externally.
- 3.4. No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the responsibility, including administering.
- 3.5. No staff member may administer drugs by injection unless they have received training in this responsibility.

3.6. The Medical Needs Lead will keep a record of training undertaken and a list of teachers qualified to undertake responsibilities under this policy.

# 4. The role of the child

- 4.1. Children who are competent will be encouraged to take responsibility for managing their own medicines and procedures.
- 4.2. Where possible, students will be allowed to carry their own medicines and devices. Where this is not possible, their medicines will be located in a label box in the cupboard under the pigeon holes behind the reception desk.
- 4.3. If students refuse to take medication or to carry out a necessary procedure, parents will be informed so that alternative options can be explored.
- 4.4. Where appropriate, students will be encouraged to take their own medication under the supervision of a teacher.

## 5. Individual Healthcare Plans (IHCPs)

- 5.1. Where necessary, an Individual Healthcare Plan (IHCP) will be developed in collaboration with the student, parents/carers, Medical Needs Lead, SENDCO and medical professionals.
- 5.2. IHCPs will be easily accessible whilst preserving confidentiality.
- 5.3. IHCPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.
- 5.4. Where a student has an Education, Health and Care plan or special needs statement, the IHCP will be linked to it or become part of it.
- 5.5. Where a child is returning from a period of hospital education or alternative provision or home tuition, we will work with the education provider to ensure that the IHCP identifies the support the child needs to reintegrate.

## 6. Medicines

- 6.1. Where possible, it is preferable for medicines to be prescribed in frequencies that allow the student to take them outside of school hours.
- 6.2. If this is not possible, prior to staff members administering any medication, the parents/carers of the child must complete and sign a parental agreement for a school to administer medicine form.

- 6.3. No child will be given any prescription or non-prescription medicines without written parental consent except in exceptional circumstances.
- 6.4. Where a student is prescribed medication without their parents'/carers' knowledge, every effort will be made to encourage the student to involve their parents while respecting their right to confidentiality.
- 6.5. No child under 16 years of age will be given medication containing aspirin without a doctor's prescription.
- 6.6. Medicines MUST be in date, labelled, and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered.
- 6.7. If medication changes to another brand, or different dosage, a new form has to be completed by parents before it can be administered.
- 6.8. A maximum of four weeks supply of the medication may be provided to the school at one time.
- 6.9. Medications will be stored in a lockable cabinet.
- 6.10. Any medications left over at the end of the course will be returned to the child's parents.
- 6.11. Written records will be kept of any medication administered to children.
- 6.12. Students will never be prevented from accessing their medication.
- 6.13. REACH school cannot be held responsible for side effects that occur when medication is taken correctly.

## 7. Emergencies

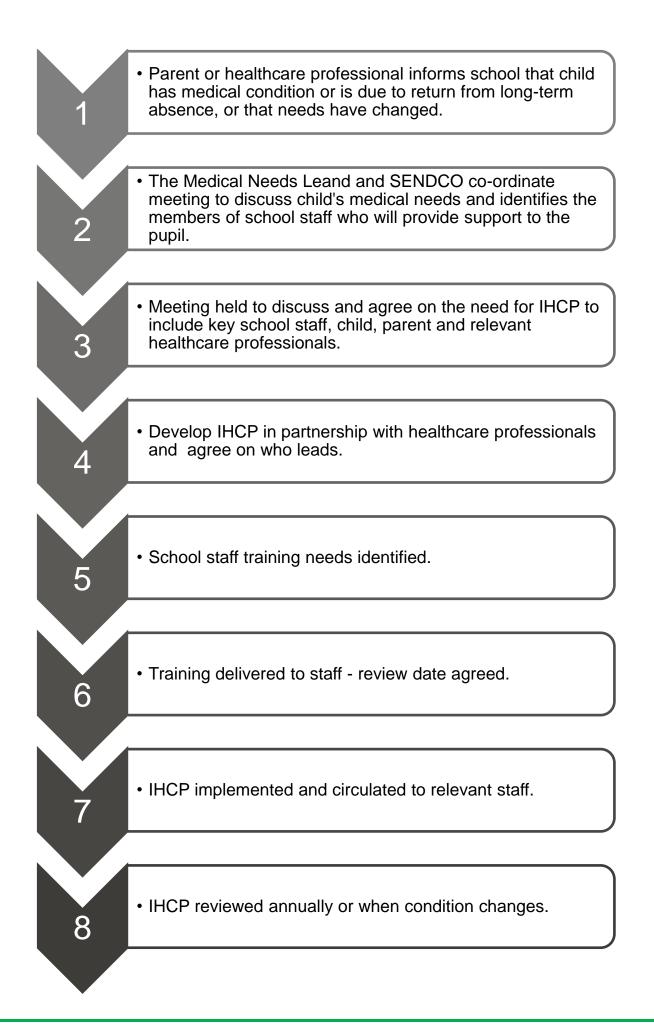
- 7.1. Medical emergencies will be dealt with under the school's emergency procedures.
- 7.2. Where an Individual Healthcare Plan (IHCP) is in place, it should detail:
  - What constitutes an emergency.
  - What to do in an emergency.
- 7.3. Students will be informed in general terms of what to do in an emergency such as telling a teacher.
- 7.4. If a student needs to be taken to hospital, a member of staff will remain with the child until their parents arrive.
- 8. Avoiding unacceptable practice

- 8.1. REACH school understands that the following behaviour is unacceptable:
  - Assuming that students with the same condition require the same treatment.
  - Ignoring the views of the student and/or their parents.
  - Ignoring medical evidence or opinion.
  - Sending students home frequently or preventing them from taking part in activities at school.
  - Sending the student to the medical room or leaving them alone if they become ill.
  - Penalising students with medical conditions for their attendance record where the absences relate to their condition.
  - Making parents feel obliged or forcing parents to attend school to administer medication or provide medical support, including toilet issues.
  - Creating barriers to children participating in school life, including school trips.
  - Refusing to allow students to eat, drink or use the toilet when they need to in order to manage their condition.

# 9. Insurance

- 9.1. Teachers who undertake responsibilities within this policy are covered by the school's insurance.
- 9.2. Full written insurance policy documents are available to be viewed by members of staff who are providing support to students with medical conditions. Those who wish to see the documents should contact the Business Manager.

# Appendix 1 - Individual healthcare plan implementation procedure



Appendix 2 - Individual healthcare plan template

REACH School Individual Health Care Plan			
Child's name			
-			
Tutor group Date of birth			
Child's address			
Medical diagnosis or condition			
Date			
Review date			
Family Contact Information			
Name			
Phone no. (work)			
(home)			
(mobile)			
Name			
Relationship to child			
Phone no. (work)			
(home)			
(mobile)			
Clinic/Hospital Contact			
Name			
Phone no.			
G.P.			
Name			
Phone no.			
Who is responsible for providing support in school			
Describe medical needs and give deta facilities, equipment or devices, environ	ils of child's symptoms, triggers, signs, treatments, nmental issues etc.		
L			

indications, administered by/self-administered with/without supervision.

Daily care requirements

Specific support for the student's educational, social and emotional needs

Arrangements for school visits/trips etc.

Other information

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

Staff training needed/undertaken - who, what, when

Form copied to

# Appendix 3 - Parental agreement for a school to administer medicine template

Name of Student:	Personal Tutor:
Date of Birth:	Condition/Illness:

	4
Name/Type of Medication (as described on the container)	
How long will your child need to take the medication:	
Date dispensed:	
Dosage & Method:	
Timing:	
Any special precautions:	
Side effects:	
Self-administration:	
Designated member(s) of staff:	
Procedures to take in an emergency:	

#### **Emergency Contact Details**

Name:		Daytime telephone number:		
Address:				
Relationship to child:				

I understand that I must deliver the medicine personally to an agreed member of staff and accept that this is a service which the school is not obliged to undertake. It is my responsibility to inform school immediately if medication needs change.

Print Name:	Signed:
Relationship to child:	Date:
Headteacher/Deputy Headteacher:	Date:

### **Request for School to Administer/Supervise Medication**

The school will only administer medicine to a student on completion of this form by parent/carer and that the Headteacher/Deputy Headteacher has agreed that an identified member of staff can administer and/or supervise the taking of it.

Appendix 4 - Record of medicine administered to an individual child template

# **REACH** school record of medicine administered to an individual child

Name of child			
Date medicine provided by parent			
Tutor group			
Quantity received			
Name and strength of med	licine		
Expiry date			
Quantity returned			
Dose and frequency of me	dicine		
Staff signature			
Signature of parent		 	
Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			
Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			
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Date

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Staff initials		

Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		

Appendix 5 - Record of medicine administered to all children

REACH school							
Date	Child's name	Time	Name of medicine	Dose given	Any reactions	Signature of staff	Print name

# Appendix 7 - Contacting emergency services

# Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

- Your telephone number **0121 675 8989**
- Your name.
- Your location as follows: **REACH school**, **9 High Street**, **Kings Heath Birmingham B14 7BB**
- The exact location of the patient within the school.
- The name of the child and a brief description of their symptoms.
- The best entrance to use and state that the crew will be met and taken to the patient.

Put a completed copy of this form by the phone.

Appendix 8 - Model letter inviting parents to contribute to individual healthcare plan development

Dear parent/carer's name

### RE: DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting students at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support each student needs and how this will be provided. Individual healthcare plans are developed in partnership with the school, parents/carers, students, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx at xxxx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will include staff names. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. Please do not hesitate to contact staff names if you would like more information or discussion regarding this.

Yours sincerely,

Appendix 8 - Model letter to parents to on the administration of medicines

### Dear parent/carer's name

### **RE: ADMINISTRATION OF MEDICATION**

Thank you for informing us of your child's medical condition and for completing the request for school administration of medication.

A central requirement of school policy is to ensure that you are fully aware of the regulations we follow with regards to this. Please read the information points following points from our policy carefully:

#### Parents and carers are responsible for:

Keeping the school informed about any changes to their child/children's health.

Completing a parental agreement for school to administer medicine form before bringing medication into school.

If necessary, providing the school with the medication their child requires and keeping it up to date. This must be in boxes with labels.

Collecting any leftover medicine at the end of the course or year.

Discussing medications with their child/children prior to requesting that a staff member administers the medication.

#### The role of the child:

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

Where possible, students will be allowed to carry their own medicines and devices. Where this is not possible, their medicines will be located in an easily accessible location.

If students refuse to take medication or to carry out a necessary procedure, parents will be informed so that alternative options can be explored.

Where appropriate, students will be encouraged to take their own medication under the supervision of a teacher.

#### **Medicines:**

Where possible, it is preferable for medicines to be prescribed in frequencies that allow the student to take them outside of school hours.

If this is not possible, prior to staff members administering any medication, the parents/carers of the child must complete and sign a parental agreement for a school to administer medicine form.

No child will be given any prescription or non-prescription medicines without written parental consent except in exceptional circumstances.

Medicines MUST be in date, labelled, and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered.

If medication changes to another brand, or different dosage, a new form has to be completed by parents before it can be administered.

A maximum of four weeks supply of the medication may be provided to the school at one time.

Medications will be stored in a lockable cabinet.

Any medications left over at the end of the course will be returned to the child's parents.

Written records will be kept of any medication administered to children.

Students will never be prevented from accessing their medication.

REACH school cannot be held responsible for side effects that occur when medication is taken correctly.

Please do not hesitate to contact us if you would like more information or discussion regarding this.

Yours sincerely,

(insert name)

(insert job role)

Signed by:

Headteacher

Date:

\_\_\_\_\_

\_\_\_\_

Chair of governors

Date: