



## **Policy for Supporting Pupils with Medical Conditions**

<b>Formally adopted by the Governing Board of:-</b>	<b>Denver V. C. Primary School</b>
<b>On:-</b>	<b>24<sup>th</sup> February 2021</b>
<b>Chair of Governors:-</b>	<b>Amanda Dawson</b>
<b>Last updated:-</b>	<b>5<sup>th</sup> December 2019</b>

## **Policy for Supporting Pupils with Medical Conditions at Denver V.C. Primary School**

The named member of staff responsible for this policy and its implementation is:

**Louise Jones, Headteacher.**

1. Children with medical conditions are entitled to a full education and have the same rights of admission to Denver V. C. Primary School as other children. When the school is informed that a child has a medical condition that requires support in school, it may be appropriate to prepare an individual healthcare plan. Such a plan will be essential if the child has a condition which fluctuates or there is high risk that emergency intervention will be needed.
2. When the school is notified that a child has a medical condition, a decision will be made, based on evidence, about whether an individual healthcare plan is appropriate. If necessary, it will be drawn up in consultation with the healthcare professional and the parent.
3. The healthcare plan will clearly define what constitutes an emergency situation and the procedures to be followed in such an event.
4. Healthcare Plans will be reviewed annually or earlier as the child's needs change.
5. Where the child has a special educational need identified in an Education, Health and Care Plan, the individual healthcare plan will be linked to or become part of the EHC Plan.
6. The relevant health care professional will normally lead on identifying and agreeing with the school, the type level of training required and how this can be obtained if it is over and above that routinely provided.
7. Norfolk County Council public liability insurance makes provision for many health care procedures. For those not covered, the Headteacher will contact the Insurance Team on 01603 223822 for further advice.

### **Supporting children with asthma and allergies.**

- Routine First Aid training for staff is carried out regularly and a list of qualified staff is displayed in school.
- Appropriate arrangements are made for children who require an inhaler or epipen, both of which are readily available whenever the child is in the school or on offsite visits.
- The school's Appointed Person for First Aid, Mrs Alves, ensures that parents/carers are asked to collect all medications/equipment when

they expire, and to provide new and in-date medication when required. The school does not hold an emergency salbutamol inhaler for use by pupils.

- All members of staff know what to do and will respond accordingly when they become aware that a pupil with a medical condition needs help.
- Records are kept of any medicine administered in school.

### **Residential Visits**

- If a child is taking part in a Residential Visit, school staff will take responsibility for administering medicine for all children. Medicines MUST be in date, labelled and provided in the original container with dosage instructions
- Written parental consent MUST be obtained prior to the visit.
- Two members of staff check dosages each time medicine is administered.
- Records are kept of all medicines administered.

### **What happens if a pupil is absent from school due to their medical condition?**

- Pupils should not be penalised if their absence from school is related to their medical condition, such as attending hospital appointments. In order to avoid being fined for non-attendance, parents must obtain permission from the school in advance of the appointment, so that the absence can be treated as authorised. An absence can also be authorised if the child is too ill to attend school and the school is notified of that as soon as possible. For more information on non-attendance, please refer to our School attendance policy. Where a child with a life limiting condition receives care from a hospice the school recognises the benefits this can bring the whole family, therefore hospice stays will be considered an authorised absence.
- If the pupil's absence is expected to be for more than 15 days, the Local Authority is under a duty to ensure that the child receives as normal an education as possible while he or she is absent. The Local Authority must start arranging the education from the 1st day that the school receives notice of the length of absence. A senior officer from the Local Authority must be appointed, to oversee the arrangements and provide a written statement to the parents on how the education will be delivered. A range of options can include home teaching, a hospital school or teaching service, or a combination of those options.

A full-time education should be provided unless part-time education is more suitable for the child's health needs.

- The school will work closely with those involved in the care of a pupil to decide what work a child who is off for less than 15 days needs. The school will usually consider that if a child is too unwell to attend then providing school work should not be necessary. However, where it is in the best interests of the child then parents may wish to select additional reading books and arrange for school work to be sent home and returned to school for marking.

**Any parents with a concern about their child's medical needs are asked to speak directly to Mrs Jones.**

## Appendix 1

### Roles and responsibilities

**Governing bodies** – must 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. They should ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. Governing bodies should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. They 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.

**Headteacher** – should ensure that their school's policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. Headteachers should ensure that all staff who need to know are aware of the child's condition. They should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. Headteachers have overall responsibility for the development of individual healthcare plans. They should also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way. They should contact the school nursing service in the case of any child 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.

**School staff** – any member of school staff may 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. School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

**School nurse** – every school has access to school nursing services. They are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they will 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, but may support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training. School nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs - for example, there are good models of local specialist nursing teams offering training to local school staff, hosted by a local school. Community nursing teams will also be a valuable potential resource for a school seeking advice and support in relation to children with a medical condition.

**Other healthcare professionals** - including GPs, paediatricians, nurse specialists/community paediatric nurses – should notify the school nurse and work jointly when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans. Anyone dealing with the medical care of a pupil in school should contact the named school nurse for that school to ensure a coordinated approach.

**Pupils** – with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other pupils will often be sensitive to the needs of those with medical conditions.

**Parents/carers** – should provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents/carers are key partners and should be involved in the development and review of their child's individual healthcare plan, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

**Signed:**

**Date: February 2021**