

Marton Manor Primary School

Policy For Supporting Pupils With Medical Needs

Introduction: This policy was formulated in consultation with staff, parents and governors at Marton Manor Primary School in Summer 2014. It was drafted in response to The Children and Families Act 2014 which places a duty on schools to make arrangements for pupils with medical conditions. It was last reviewed by Governors in Autumn 2019 and will be reviewed in Summer 2021 or earlier if necessary. It should be read in conjunction with the Asthma policy, Diabetes Policy, Medicines Policy and Policy for Food Allergies.

Definition: Pupils with medical needs may be summarised as being of two types:

- a) Short term – affecting their participation in school activities during which time they may be on a course of medication
- b) Long term- potentially limiting their access to education and requiring extra care and support (deemed special medical needs)

Rationale : Local authorities and schools have a responsibility for the health and safety of pupil in their care. The Health and Safety at work act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of pupils with special medical needs, the employer is responsible for ensuring that safety measures cover the needs of all pupils in the school. This may mean making special arrangements for particular pupils who may be more at risk than their classmates. Individual procedures may be required. The employer is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support these children may need. This includes supply staff.

The Children and Families Act gives the same right of admission to pupils with special medical needs as other children. These children cannot be refused admission or excluded from school on medical grounds alone. However, teachers and other school staff in charge of pupils have a common law duty to act ‘in loco parentis’ (in the place of parents) to take swift action in an emergency. This duty also extends to teachers and staff leading activities off the school site. This could extend to a need to administer medicine.

The prime responsibility for a child’s health lies with the parent who is responsible for the child’s medication and should supply the school with information. The school takes advice from Middlesbrough Council and the health service which encourages self-administration of medicine where possible (as appropriate to the age and ability of the child) . We may also need to liaise with social care or the Children with disabilities team where necessary. Insurance arrangements also need to be put in place for some medical conditions. Contact details for the School Nursing Service are as follows:

School Nursing Service, Tel 300 628 or Asthma nurse 854 685 Contenance nurse 737737. We may also liaise with hospital teaching services where children are in hospital for more than a few days or have a serious/ long term medical condition. In addition we liaise with the Clinical Commissioning services and the local authority who manage strategic aspects of health care in schools.

Aims:

- To assist parents in providing medical care for their children
- Educate staff and children in respect of special medical needs

- Adopt and implement the LA policy of medication in schools
- Arrange training for school staff to support individual pupils on an agreed basis with them
- Liaise with medical services as necessary in support of the individual pupil
- Ensure full access to education if possible
- Monitor and keep appropriate records.

Entitlement: The school accepts that pupils with medical needs should be assisted if at all possible and that they have the right to the full education available to other pupils. The school believes that pupils with medical needs should be enabled to have full attendance as far as is possible and receive necessary proper care and support. For some children training will need to be given beyond a First Aid certificate and regular training for asthma, anaphylactic shock etc... which the majority of staff undertake.

The school accepts all employees have rights in relation to supporting pupils with medical needs as follows:

- Choose whether or not they are prepared to be involved
- Receive appropriate training
- Work to clear guidelines
- Have concerns about legal liability
- Bring to the attention of management any concern or matter relating to supporting pupils with medical needs.

Expectations:

It is expected that;

- Parents will be encouraged to co-operate in training children to self-administer medication (which may require staff supervision) if this is practicable and that members of staff will only be asked to be involved if there is no practical alternative.
- Where parents have asked the school to administer the medication for their child they must ask the pharmacist to supply any such medication to be dispensed in a separate container, containing only the quantity required for use in school. The prescription and dosage regime should be typed or printed clearly on the outside. The school will only administer medicines in which the dosage is required four times a day. The name of the pharmacist should be clearly visible. Any medication not presented properly will not be accepted by school staff. Pupils should not bring in their own medicine. These should be brought into school by the parent.
- Employees will carefully consider their response to requests to assist with the giving of medication or supervision of self-medication and that they will consider each request separately
- The school will liaise with the Health Service for advice about a pupil's special medical needs, and will seek support from the relevant practitioners where necessary and in the interests of the pupil.
- All pupil medication will be stored safely and where necessary will be made known to the pupil in case of urgent need (See policies for asthma, diabetes and epipens)
- Any medication brought into school by the staff e.g. headache tablets, inhalers for personal use should be stored in a separate place and kept out of the reach of pupils. Any staff medicine is the responsibility of the staff member concerned and not the school.
- Risk assessments will need to be made for school visits, sporting activities and residential visits for some conditions.

- Individual healthcare plans must be monitored and evaluated at least annually. (See Annex A for Model process for healthcare plans)

Policy into Practice

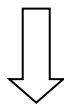
There is a need for proper documentation at all stages when considering the issue of support for pupils with medical needs in school.

Annex A: Model process for developing individual healthcare plans.

Parent or healthcare professional informs the school that child has been newly diagnosed or is due to attend a new school, or due to return after a long absence or that needs have changed.



Head Teacher or Senior Leader co-ordinates meeting to discuss the child's medical needs and identifies a member of staff to support the child



Meeting to discuss and agree on need for Individual healthcare plan to include key school staff, child, parent, relevant healthcare professional and other medical/ health clinician as appropriate (or consider written evidence provided by them)



Develop individual healthcare plan in partnership- agree who leads on writing it. Input from healthcare professionals must be provided.



School staff training needs identified. Healthcare professional commissions/ delivers training and staff signed off as competent- review date as agreed.



Individual healthcare plan implemented, circulated to all relevant staff. To be reviewed annually or when condition changes. Parent or healthcare professional to initiate.