

## **Supporting Students with Medical Needs Policy**

#### 1.0 School Mission Statement

#### The Haggerston Way: Our Mission

- Aspiration: We strive to be the best versions of ourselves. We work hard every day to master the knowledge and skills we need to lead successful, fulfilled lives.
- Creativity: We create beautiful work to inspire others. We are independent-minded creative thinkers and problem-solvers.
- Character: We are articulate, brave and determined individuals. We work to build the qualities of Resilience, Ambition, Curiosity and Community Spirit.

## 2.0 Policy links to school mission, aims and values

All of the work at Haggerston School is intended to support the delivery of our mission statement in full. This policy is intended to ensure the school remains a positive and safe environment for all our students and staff.

This policy aims to ensure that:

- Students, staff and parents understand how our school will support students with medical conditions.
- Students with medical conditions are properly supported to allow them to access the same education as other students, including school trips and sporting activities.
- Reasonable adjustments are made to enable these students to participate fully and safely on school trips, visits and sporting activities.
- Risk assessments are carried out so that planning arrangements take account of any steps needed to ensure that students with medical conditions are included.
- Students, their parents and any relevant healthcare professionals are consulted throughout the process of making adjustments and support of their individual medical needs / condition.

The named person with responsibility for monitoring the implementation of this policy and annual review of this policy is R.Ray-Choudhuri. The named person with responsibility for implementing this policy is Martina Honorio.

The school will ensure this policy is being fully implement by:

- Making sure sufficient staff are suitably trained.
- Making sure staff are aware of students' conditions, where appropriate.
- Making sure there are cover arrangements to ensure someone is always available to support students with medical conditions.
- Providing supply teachers with appropriate information about the policy and relevant students.
- Developing and monitoring individual healthcare plans (IHPs).

## 3.0 Statutory Framework

This policy meets the requirements under <u>Section 100 of the Children and Families Act 2014</u>, which places a duty on governing boards to make arrangements for supporting students at their school with medical conditions.

It is also based on the Department for Education's statutory guidance on <u>supporting students with medical</u> <u>conditions at school</u>.

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding Policy



Special educational needs information report and policy

#### 4.0 Definitions

IHP - Individual Healthcare Plan

## 5.0 Roles and responsibilities

#### 5.1 Local School Board

The Local School Board has ultimate responsibility for health and safety matters in the school, but delegates operational matters and day-to-day tasks to the Co-Headteachers and staff members.

#### 5.2 The Co-Headteachers

The Co-Headteachers are responsible for the implementation of this policy, including:

- Making sure all staff are aware of this policy and understand their role in its implementation.
- Ensuring that there are a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations.
- Ensuring that all staff who need to know are aware of any student's condition.
- Making sure that school staff are appropriately trained and ensure actions outlined in 'Appendix 4:
   Training' are implemented and monitored.
- Making sure that school staff are appropriately insured and aware that they are insured to support students in this way.
- Ensuring contact is made with the school nursing service in the case of any student 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.
- Ensuring that systems are in place for obtaining information about a student's medical needs and that this information is kept up to date.

## 5.3 Staff

Those staff who take on the responsibility to support students with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

#### All staff must:

- Take into account the needs of students with medical conditions that they teach.
- Know what to do and respond accordingly when they become aware that a student with a medical condition needs help.
- Be aware of medical needs' list of students and attend appropriate training.

Please note: supporting students with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to students with medical conditions, although they will not be required. This includes the administration of medicines.

#### **5.3.1 SENDCO**

The SENDCO must:

- Ensure that 'Appendix 4: Training' is implemented in full so that staff are equipped to provide high quality support to students with medical needs.
- Delegate responsibility for completion and distribution of IHPs for students with medical conditions to the Inclusion Co-ordinator, Alistair King.
- Liaise with healthcare professionals and parents to determine where an IHP would be inappropriate or disproportionate and base this decision on evidence. If there is no consensus, the Co-Headteachers will make the final decision.
- Ensure IHPs are reviewed at least annually, or earlier if there is evidence that the students' needs have changed.



- Ensure IHPs are developed with the student's best interests in mind and set out: what needs to be done, when, by whom
- Ensure plans are drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the students specific needs. The student will be involved wherever appropriate.
- Ensure IHPs are linked to, or become part of, any education, health and care (EHC) plan. If a student has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP.
- Tailor the level of detail in the plan to the complexity of the student's condition and how much support is needed.
- Make arrangements for written permission from parents for medication to be administered by a member of staff, or self-administered by the student during school hours.
- Ensure separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the student can participate, e.g. risk assessments.
- Where confidentiality issues are raised, determine the designated individuals to be entrusted with information about the student's condition and what to do in an emergency, including who to contact, and contingency arrangements.

## 5.3.2 Office Manager (Lead First Aider)

- Ensure that written records are kept of all medicine administered to students for as long as they are at the school
- Ensure that parents are informed if their child has been unwell at school.
- Ensure 'Appendix 1: Managing Medicines' is implemented in full.
- Ensure 'Appendix 3: Emergency Procedures' is followed in full.

### 5.4 Parents

#### Parents must:

- Provide the school with sufficient and up-to-date information about their child's medical needs by completing the medical needs google questionnaire before admission, updating the information using the data collection form sent out annually, or as soon as their medical needs change.
- Be involved in the development and review of their child's IHP and may be involved in its drafting.
- Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times.
- Discuss any concerns about their child's medical condition or provision for their needs promptly and directly with the SENDCo in the first instance.

## 5.5 Students

#### Students should:

- Be aware of their medical needs.
- Be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs.
- Comply with their IHPs.
- Be encouraged to take responsibility for managing their own medicines and procedures, where competent to do so and if appropriate. This will be discussed with parents and it will be reflected in their IHPs.
- Will be allowed to carry their own medicines and relevant devices wherever possible and appropriate to their medical need and ability, see Appendix 1 (Managing medicine) for further clarification.

Please note: staff will not force a student to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered.

## 5.6 School nurses and other healthcare professionals

The school nurse will notify the school when a student has been identified as having a medical condition that will require support in school. This will be before the student starts school, wherever possible. They may also support staff to implement a child's IHP.



They will also liaise with other relevant healthcare professionals, such as GPs and paediatricians and notify them of any students identified as having a medical condition. They may also provide advice on developing IHPs.



## **Appendix 1: Managing medicines**

Prescription and non-prescription medicines will only be administered at school when it would be detrimental to the students health or school attendance not to do so and where we have parents' written consent. **The only exception to this is where the medicine has been prescribed to the student without the knowledge of the parents.** 

Students under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a student any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed.

The school will only accept prescribed medicines that are:

- In-date
- Labelled
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date. (Government Guideline stated EpiPens can be used 3 months after their expiration date).

All medicines will be stored safely. Students will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing metres and adrenaline pens will always be readily available to students.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

#### **Controlled drugs:**

<u>Controlled drugs</u> are prescription medicines that are controlled under the <u>Misuse of Drugs Regulations 2001</u> and subsequent amendments, such as morphine or methadone.

A student who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another student to use. All other controlled drugs are kept in a secure cupboard in the school office and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.



### Appendix 2: Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the student's IHP, but it is generally not acceptable 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
- Ignore medical evidence or opinion (although this may be challenged)
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- If the student becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- Penalise students for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- Prevent students from drinking, eating or taking toilet or other breaks whenever they need to 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 student, including with toileting issues. No parent should have to give up
  working because the school is failing to support their child's medical needs
- Prevent students from participating, or create unnecessary barriers to students participating in any aspect
  of school life, including school trips, e.g. by requiring parents to accompany their child
- Administer, or ask students to administer, medicine in school toilets

## **Appendix 3: Emergency procedures**

Staff will follow the school's normal emergency procedures (for example, calling 999) in the event of a medical emergency.

All students' IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a student needs to be taken to hospital, staff will stay with the student until the parent arrives, or accompany the student to hospital by ambulance.

## **Appendix 4: Training**

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

Staff who are responsible for supporting students with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to students with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the SENDCo. Training will be kept up to date.

Training will:

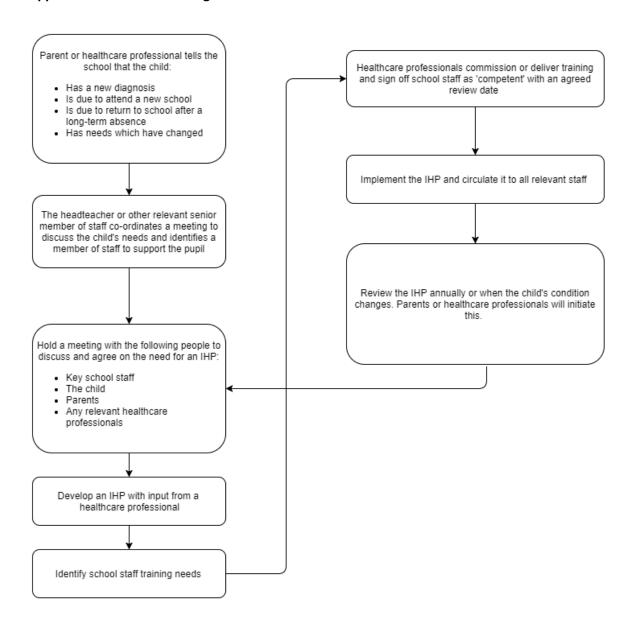


- Be sufficient to ensure that staff are competent and have confidence in their ability to support the students
- Fulfil the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.



## Appendix 5: Actions following identification of a medical need





# Appendix 6: Individual Healthcare Plan Template

Mobile

Email

1a. Child / Young Pers	son Details	
Child's Name:		Year group:
Hospital/NHS number:		DoB:
Nursery/School/Colleg		•
e:		
Post code Child's Address:	<del> </del>	
Town:		
County:		
Postcode		
Primary Medical Need:		
Other medical conditions:		
Allergies:		
Date:	Document to be Updated:	
1b. Family Contact In	formation	
Name		
Relationship		
Telephone Numbers	Home Work Mobile	
Email		
Name		
Relationship		
	Home	
Telephone Number	Work	
	Mobile	
Email		
Name		
Relationship		
	Home	
Telephone Number	Work	



## 1c. Other Contacts

Contacts		<b>Contact Number</b>
Child/s Connection Norway(s)		
Child's Specialist Nurse(s):		
Key Worker:		
Consultant Paediatrician:		
General Practitioner:		
Link Person in Education:		
School email contact:		
Class Teacher:		
Health Visitor/School Nurse:		
SEN Co-ordinator:		
Other Relevant Teaching Staff:		
Other Relevant Non-Teaching Staff:		
Head teacher:		

# 2. Details of Medical Need

Reason for IHP/Details of Medical Need:	
Adjustments Required:	
Medication Required:	
Parent Concerns:	
student Concerns:	
School Concerns:	
Other staff who information should be shared with:	

# 3. Daily Routines

	Time	Note
Travel Arrangements		
Arrive School		
Morning Break		



Diabetes).

ACCOMMODATE THE STUDENTS RETURN TO SCHOOL AFTER A PERIOD OF SIGNIFICANT ABSENCE.
SIGNED AGREEMENT
PARENT:
DATE:
SCHOOL:
DATE:
STUDENTS:
DATE:

Please Note: This is a generic template. Bespoke planning documents may be required for specific conditions (eg

THIS PLAN HAS BEEN DEVISED AND AGREED BY HAGGERSTON SCHOOL AND THE PARENT / CARER OF



## **Appendix 7: Public Liability Insurance Cover**

The Public Liability Insurance Cover via the London Borough of Hackney (Policy number: CY096936QBE0120A) covers staff providing support to students with medical conditions. The cover is on the basis that those providing it aren't healthcare professionals (i.e. a doctor or nurse). The Insurance policy also provides liability cover relating to the administration of medication. They insurers have further provided guidance on the insurer expectations for the cover to operate:

- Prescribed medicines: Subject to being pre-prescribed by a medical practitioner and written guidelines.
   Via nasogastric tube, gastronomy tube or orally. Where this involves children, wherever possible parents/guardians should provide the medication prior to the child leaving home. A written consent form will be required from parent/guardian and this should be in accordance with LEA procedure on medicines in schools etc. Similar considerations should be given when asked to administer 'over the counter' medicines.
- Asthma inhalers: No specific guidance
- Blood glucose testing metres: Only by glucometer following written guidelines.
- Adrenaline pens: Following written guidelines with a preassembled epipen.
- Defibrillator: Following written instructions and appropriate documented training.

### 6.0 Policy documentation control

Responsible for review:	SENDCo
Version:	04
Reviewed:	October 2024
Next review date:	October 2025