



Woburn Lower School Supporting Pupils with Medical Needs Policy



Woburn Lower School Supporting Pupils with Medical Needs

Woburn Lower School wishes to ensure that pupils with medical conditions receive appropriate care and support at school. All pupils have an entitlement to a full time curriculum or as much as their medical condition allows. This policy has been developed in line with the Department for Education's statutory guidance released in April 2014 – "Supporting pupils at school with medical conditions" under a statutory duty form section 100 of the Children and Families Act 2014. The statutory duty came into force on 1st September 2014

The school will have regard to the statutory guidance issued. We take account of it, carefully consider it and we make all efforts to comply.

Ofsted places a clear emphasis on meeting the needs of pupils with SEN and Disabilities, also including those pupils with medical conditions.

Key Roles and Responsibilities

a) **The Local Authority (LA) is responsible for:**

- 1) Promoting co-operation between relevant partners regarding supporting pupils with medical conditions.
- 2) Providing support, advice /guidance and training to schools and their staff to ensure SEND Support Plans (SSP) are effectively delivered.
- 3) Working with schools to ensure pupils attend full-time or make alternative arrangements for the education of pupils who need to be out of school for fifteen days or more due to a health need and who otherwise would not receive a suitable education.

b) **The Governing Body of Woburn Lower School is responsible for:**

- 1) Ensuring arrangements are in place to support pupils with medical conditions.
- 2) Ensuring the policy is developed collaboratively across services, clearly identifies roles and responsibilities and is implemented effectively.
- 3) Ensuring that the Supporting Pupils with Medical Conditions Policy does not discriminate on any grounds.
- 4) Ensuring the policy covers arrangements for pupils who are competent to manage their own health needs.
- 5) Ensuring that all pupils with medical conditions are able to play a full and active role in all aspects of school life, participate in school visits / trips/ sporting activities, remain healthy and achieve their academic potential.

6) Ensuring that relevant training is delivered to a sufficient number of staff who will have responsibility to support children with medical conditions and that they are signed off as competent to do so. Staff to have access to information, resources and materials.

7) Ensuring written records are kept of medicines administered to pupils.

8) Ensuring the policy sets out procedures in place for emergency situations.

9) Ensuring the level of insurance in place reflects the level of risk.

10) Handling complaints regarding this policy as outlined in the school's Complaints Policy.

c) The Headteacher is responsible for:

1) Ensuring the policy is developed effectively with partner agencies and then making staff aware of this policy.

2) The day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and Procedures of Woburn Lower School.

3) Liaising with healthcare professionals regarding the training required for staff.

4) Identifying staff who need to be aware of a child's medical condition.

5) Developing Individual SSPs.

6) Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver SSPs in normal, contingency and emergency situations.

7) If necessary, facilitating the recruitment of staff for the purpose of delivering the promises made in this policy.

8) Ensuring the correct level of insurance is in place for teachers who support pupils in line with this policy.

9) Continuous two way liaison with school nurses and school in the case of any child who has or develops an identified medical condition.

10) Ensuring confidentiality and data protection.

11) Assigning appropriate accommodation for medical treatment

d) Staff members are responsible for:

1) Taking appropriate steps to support children with medical conditions and familiarising themselves with procedures which detail how to respond when they become aware that a pupil with a medical condition needs help.

2) Knowing where controlled drugs are stored and where the key is held.

3) Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, with particular specialist training if they have agreed to undertake a medication responsibility.

4) Allowing inhalers, adrenalin pens and blood glucose testers to be held in an accessible location, following DfE guidance.

e) School nurses are responsible for:

1) Collaborating on developing an SSP in anticipation of a child with a medical condition starting school.

2) Notifying the school when a child has been identified as requiring support in school due to a medical condition at any time in their school career.

3) Supporting staff to implement an SSP and then participate in regular reviews of the IEP. Giving advice and liaison on training needs.

4) Taking account of the needs of pupils with medical conditions in lessons.

f) Parents and carers are responsible for:

1) Keeping the school informed about any new medical condition or changes to their child/children's health.

2) Participating in the development and regular reviews of their child's SSP.

3) Completing a parental consent form to administer medicine or treatment before bringing medication into school.

4) Providing the school with the medication their child requires and keeping it up to date including collecting leftover medicine.

5) Carrying out actions assigned to them in the SSP with particular emphasis on, they or a nominated adult, being contactable at all times.

g) Pupils are responsible for:

1) Providing information on how their medical condition affects them.

2) Contributing to their SSP.

3) Complying with the SSP and self-managing their medication or health needs including carrying medicines or devices, if judged competent to do so by a healthcare professional and agreed by parents.

h) Training of staff

1) Newly appointed teachers, supply or agency staff and support staff will receive training on the 'Supporting Pupils with Medical Conditions' Policy as part of their induction.

2) The clinical lead for each training area/session will be named on each SSP.

3) No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the condition and signed off as competent.

4) School will keep a record of medical conditions, training undertaken and a list of teachers qualified to undertake responsibilities under this policy.

i) Medical conditions register/list

1) Schools admissions forms should request information on pre-existing medical conditions. Parents must have easy pathway to inform school at any point in the school year if a condition develops or is diagnosed. Consideration could be given to seeking consent from GPs to have input into the SSP and also to share information for recording attendance.

2) A medical conditions list or register should be kept, updated and reviewed regularly by the nominated member of staff.

3) Supply staff and support staff should similarly have access on a need to know basis. Parents should be assured data sharing principles are adhered to.

4) For pupils on the medical conditions list, key stage transition points meetings should take place in advance of transferring to enable parents, school and health professionals to prepare SSP and train staff if appropriate.

j) SEND Support Plans (SSPs)

1) Where necessary (the Headteacher will make the final decision) an IEP will be developed in collaboration with the pupil, parents/carers, Headteacher, Special Educational Needs and Disability Coordinator (SENDCo) and medical professionals.

2) SSPs will be easily accessible to all relevant staff. In cases of conditions with potential life-threatening implications, the information is readily available on the staff noticeboard.

3) SSPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.

4) Where a child is returning from a period of hospital education or alternative provision or home tuition, collaboration between the LA /AP provider and school is needed to ensure that the IHP identifies the support the child needs to reintegrate.

k) Medicines

1) Where possible, unless advised it would be detrimental to health, medicines should be prescribed in frequencies that allow the pupil to take them outside of school hours.

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 consent to administration of medicine form.

3) No child will be given any prescription medicines without written parental consent. 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.

4) Medications will be stored in the Staff room and in extreme cases in the classroom safely out of reach.

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

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

7) Pupils will never be prevented from accessing their medication.

8) Staff will not force a pupil, if the pupil refuses to comply with their health procedure, and the resulting actions will be clearly written into the SSP which will include informing parents.

l) Emergencies

1) If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents arrive.

m) Day trips, residential visits and sporting activities

1) Arrangements should be made and be flexible enough to ensure pupils with medical conditions can participate in school trips, residential stays, sports activities and not prevent them from doing so unless a clinician states it is not possible.

2) To comply with best practice risk assessments should be undertaken, in line with H&S executive guidance on school trips, in order to plan for including pupils with medical conditions. Consultation with parents, healthcare professionals etc. on trips and visits will be separate to the normal day to day SSP requirements for the school day.

n) Avoiding unacceptable practice

Each case will be judged individually but in general the following is not considered acceptable.

The following behaviour is unacceptable in Woburn Lower School:

1) Preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary.

2) Assuming that pupils with the same condition require the same treatment.

3) Ignoring the views of the pupil and/or their parents or ignoring medical evidence or opinion.

4) Sending pupils home frequently or preventing them from taking part in activities at school.

5) Penalising pupils with medical conditions for their attendance record where the absences relate to their condition.

- 6) Making parents feel obliged or forcing parents to attend school to administer medication or provide medical support, including toilet issues.
- 7) Creating barriers to children participating in school life, including school trips.
- 8) Refusing to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

Complaints

- 1) All complaints should be raised with the school in the first instance.
- 2) The details of how to make a formal complaint can be found in the School Complaints Policy.

Related Policies

Health and Safety

First Aid

Physical Intervention

Asthma

Intimate Care

Equality Information and Objectives statement

Safeguarding

SEND

Governor:

Date: March 2024

Headteacher:

Date: March 2024

Review: March 2025