

Supporting Pupils with Medical Needs Policy

1. Introduction

At Trinity we recognise that pupils can have long term or short term medical needs and, from time to time, a number of pupils will need to take medication at school. Whilst parents retain responsibility for their child's medication, the school has a duty of care to the pupils while at school and at Trinity we will do all that we can to safeguard and promote the welfare of every pupil.

This policy is written in line with the requirements of:

- a) The Children and Families Act 2014 – section 100
- b) Supporting pupils at school with medical conditions: Statutory guidance for governing bodies of maintained schools and proprietors of academies in England, Department for Education (DfE), December 2015
- c) 0-25 SEND Code of Practice, DfE 2014
- d) Equalities Act 2010

2. Aims

At Trinity, we aim to:

- a) Ensure that sufficient staff are trained to meet the needs of any medical condition in school.
- b) Ensure that all relevant staff are made aware of a pupil's medical condition.
- c) Ensure that a trained member of staff is available in case of staff absence.
- d) Ensure that any supply staff, ancillary staff and examination invigilators are made aware of medical conditions of the pupils that they will be teaching/supporting.
- e) Carry out risk assessments for any activity outside of the normal school timetable.
- f) Maintain up-to-date individual protocols and health care plans.

3. Roles and Responsibilities:

The Governing Body:

- a) Is responsible for ensuring that the policy for supporting pupils with medical conditions in school is in place and implemented. Is responsible for ensuring that the policy covers the relevant information and procedures. This should include:
 - the procedures to be followed whenever school is notified that a pupil has a medical condition.
 - the role of IHCPs, and who is responsible for their development, in supporting pupils at school with medical conditions, they should ensure that the plans are reviewed at least annually.
 - deciding on what information should be recorded on IHCPs.
 - the roles and responsibilities of all those involved in medical arrangements to support pupils at school.
 - arrangements for pupils who are competent to manage their own health needs and medicines.
 - the procedures to be followed for managing medicines.
 - arrangements for keeping written records of all medicines administered to pupils.
 - arrangements in an emergency situation.
 - explicit guidance about what practice is not acceptable.
- b) Should ensure that the policy for supporting pupils with medical conditions is regularly reviewed and readily accessible to parents and school staff.
- c) Should ensure that their arrangements are clear and unambiguous for supporting pupils with medical condition and that they are able to participate as fully as possible in all aspects of school life.
- d) Should take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening and therefore should ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life.
- e) Should ensure that its arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions in school. The arrangements should show an understanding of how medical conditions impact on a pupil's ability to learn, as well as increase confidence and promote self-care.

- f) Should ensure that sufficient staff have received suitable training to meet the needs of pupils with medical conditions.
- g) Should ensure that staff who are supporting pupils with medical conditions are able to access the necessary information, protocols and healthcare plans for pupils who they are supporting.
- h) Should ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.
- i) Should ensure that the school's policy sets out how complaints concerning the support provided to pupils with medical conditions may be made and will be handled.

The Headmaster:

- a) Should ensure that the policy is developed and effectively implemented.
- b) Should ensure that all staff are aware of the policy and understand their role in its implementation.
- c) Should ensure that funding is available to train staff who are responsible for pupils with medical conditions.
- d) Should ensure that individual protocols and health care plans are in place where appropriate.
- e) Should ensure that staff who support pupils with medical needs are appropriately insured.
- f) Should ensure that arrangements are in place for pupils who are competent to manage their own health needs and medication. This should be after discussion with parents. It should be reflected in the individual protocols and health care plans.
- g) Should ensure that there is a safe and secure place (not locked) for medication to be kept. All staff and pupils with medical needs should know where medication is kept and know who they should go to in order to access the medication.

The SENCO will:

- a) Be aware of which pupils have a medical condition and maintain an up-to-date register of pupils with medical needs. This register will be made available to all staff on FirstClass.
- b) Be responsible for ensuring that there is a sufficient number of trained staff to meet the needs of pupils with medical conditions.
- c) Ensure that individual protocols and health care plans are in place and are reviewed at least annually.
- d) Should notify the school nurse when a pupil has been identified as having a medical condition and review the support that may be needed in school for that condition.
- e) Liaise with outside agencies to gain further information with regards to a medical condition or to seek advice.
- f) Ensure that trained staff are aware of the need to keep written records of medicines that are administered. This is to offer protection to staff and pupils and can provide evidence that agreed procedures have been followed.
- g) Ensure that parents are informed if their child has been unwell at school.

School Staff:

- a) Any member of school staff providing support to a pupil with medical needs should have received suitable training. Staff must not give prescription medicines or undertake healthcare procedures without appropriate training.
- b) Have a duty of care which requires that they take action during an emergency and they should be aware of what they should do in the case of a pupil with a medical condition.
- c) Have a responsibility to make themselves aware of the content of a pupil's protocol or health care plan and allow pupils to have access to their medication.
- d) Should be aware of the triggers which may lead to an episode e.g. in the case of epilepsy, diabetes, asthma and anaphylaxis.
- e) Should be aware of the signs and symptoms which may lead to an episode e.g. in the case of epilepsy, diabetes, asthma and anaphylaxis.
- f) Should take into account the medical needs of pupils that they teach and, where necessary, make reasonable adjustments to include pupils with medical conditions into lessons.
- g) Receive any extra training that they request with regards to understanding the medical needs of pupils.

- h) Should familiarise themselves with procedures detailing how to respond accordingly when they become aware that a pupil with a medical condition needs help.
- i) Should recognise that every pupil is a unique individual and staff are reminded that different pupils with the same condition do not always require the same treatment.
- j) Should welcome the views of the pupil and/or their parents which are always listened to and acted upon.
- k) Will take all medical evidence or opinion very seriously.
- l) Will not prevent pupils who have medical needs from taking part in activities at school.
- m) Will ensure that pupils with medical needs will not be sent unaccompanied to the school office if they report that they do not feel well.
- n) Should not penalise students with medical needs for their attendance record when the absences relate to their condition.
- o) Will aim to remove barriers that can prevent pupils from participating in school life, including school trips.
- p) Will allow pupils to eat, drink or use the toilet, if and when required, in order to manage their condition.

School Nurse:

- a) Should notify school when a pupil has been identified as having a medical condition and the support that may be needed in school for that condition.
- b) Should, when possible, advise on training needs and provide the training.
- c) Should liaise with other members of the medical profession and cascade information to school.

Parents:

- a) Should provide sufficient and up to date information about their child's medical needs.
- b) Should be involved in the development and review of their child's individual healthcare plan.
- c) Liaise with school with regards to any changes in their child's medical condition or medication.
- d) Provide adequate medication if it needs to be administered in school. Parents should ensure that the medication is in-date, labelled and in the original container as dispensed by a pharmacist. Instructions on administration, storage and dosage should also be provided. The exception to this is insulin which must still be in date, but will generally be available to schools inside an insulin pen or pump rather than its original container.
- e) Replace expired medication immediately and collect any leftover medicine at the end of the year.
- f) Ensure that they or another nominated adult are contactable at all times.

Local Authority:

- a) Should work with schools to support pupils with medical conditions to attend full-time.
- b) Should be ready to make alternative educational arrangements (under statutory guidance) this can be either consecutive or cumulative across the school year when it is clear that a pupil will be away from school for 15 days or more because of health needs.
- c) Should provide support advice and guidance including suitable training for school staff to ensure that the support specified within individual protocols and healthcare plans can be delivered effectively.
- d) Should promote cooperation between relevant partners and stakeholders regarding supporting pupils with medical conditions.

Clinical Commissioning Groups:

- a) Must make joint commissioning arrangements for education, health and care provision for pupils with SEND.
- b) Should be responsive to LAs and schools seeking to strengthen links between health services and schools.

The Pupil:

- a) Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures.
- b) Where possible, pupils 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.
- c) If pupils refuse to take medication or refuse to carry out a necessary procedure, parents will be informed so that alternative options can be explored.
- d) Where appropriate, pupils will be encouraged to take their own medication under the supervision of a teacher.
- e) Pupils will be required to comply with the advice in their individual health care plan or medical protocol.

4. Procedures to be followed when notification is received that a pupil has a medical condition

- a) The parent should notify school if their child has been diagnosed as having a medical condition.
- b) The school nurse and school will review the support that may be needed in school for that condition. This will be done in consultation with parents and pupils.
- c) An individual protocol or health care plan will be drawn up, if necessary, following the advice of the school nurse.

5. Day Trips, residential trips and Sporting Activities

- a) Teachers should be aware of how a pupil's medical condition will impact on their participation in visits.
- b) Schools should make arrangements for the inclusion of pupils with any adjustments as required unless evidenced from a medical professional that this is not possible.
- c) Schools should consider what reasonable adjustments they might make to enable pupils with medical needs to participate fully and safely on visits.

6. Unacceptable Practice

- a) It is not generally acceptable practice to:-
 - prevent pupils from easily accessing their inhalers and medication and administering their medication when and where necessary.
 - assume that every pupil with the same condition requires the same treatment.
 - ignore the views of the pupil or their parents; or ignore medical evidence or opinion.
 - send pupils 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 individual healthcare plans.
 - send pupils, unaccompanied or with someone unsuitable, to the school office.
 - penalise pupils for their attendance record if their absences are related to their medical condition e.g. hospital appointments.
 - prevent pupils 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 child, including with toileting issues.
 - prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life by requiring parents to accompany their child.

Definitions:

- a) "Medication" is defined as any prescribed or over the counter medicine.
- b) "Prescription medication" is defined as any drug or device prescribed by a doctor.
- c) A "staff member" is defined as any member of staff employed at Trinity Catholic High School; this includes all teachers and ancillary staff.

7. Training for Staff:

- a) Teachers and support staff will receive training on the “Supporting Pupils with Medical Needs Policy” at the start of every academic year. Further training is available at the start of the spring and summer term for new staff and student teachers that join the school later in the year.
- b) Teachers and support staff will receive regular and ongoing training as part of their development.
- c) No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the responsibility, including administering.
- d) No staff member may administer drugs by injection unless they have received training in this responsibility.
- e) The SENCO will keep a record of training undertaken and a list of teachers qualified to undertake responsibilities under this policy.

8. Protocols and Individual Health Care Plans:

- a) Where necessary, Protocols and Individual Healthcare Plans (IHCP) will be developed in collaboration with the pupil, parents/carers, SENCO and medical professionals.
- b) IHCPs will be easily accessible whilst preserving confidentiality.
- c) IHCPs will be reviewed at least annually or when a child’s medical circumstances change, whichever is sooner.
- d) Where a pupil has an Education, Health and Care plan or a Statement of Special Educational Needs, the IHCP will be linked to it or become part of it.
- e) Where a child is returning from a period of hospital education or alternative provision or home tuition, we will work with the LA and education provider to ensure that the IHCP identifies the support the child needs to reintegrate.

9. Managing Medicines on School Premises

- a) Medicines should only be administered at school when it would be detrimental to a child’s health or school attendance not to do so.
- b) No child under 16 should be given prescription or non-prescription medicines without their parent’s written consent – except in exceptional circumstances where the medicine has been prescribed to the pupil without the knowledge of the parents. In such cases, every effort should be made to encourage the pupil to involve their parents while respecting their right to confidentiality.
- c) A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor.
- d) Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents should be informed.
- e) Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- f) Schools will only accept prescribed medicines if these are in-date, labelled, provided in the original container as dispensed by a Pharmacist and include instructions for administration, dosage and storage. (The exception to this is Insulin – which must still be in date, but will generally be available inside an insulin pen or a pump, rather than its original container.)
- g) Medications will be stored in a secure, but not locked, location in the main office on both sites. Pupils should know where their medicines are at all times and be able to access them immediately. Medicines should not be locked away.
- h) When no longer required, medicines should be returned to the parent to arrange for safe disposal. Sharp boxes should always be used for the disposal of needles and other sharps.
- i) A child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so. But, passing it to another child is an offence.
- j) school staff may administer a controlled drug to the pupil for whom it has been prescribed. Staff administering medicines should do so in accordance with the prescriber’s instructions. A record should be kept of all medicines administered to individual pupils, stating:
 - what was administered
 - how it was administered
 - how much was administered
 - when it was administered
 - who administered it

- whether there were any side effects - Trinity cannot be held responsible for side effects that occur when medication is taken correctly.

10. Emergencies:

- a) Where an Individual Protocol or Healthcare Plan (IHCP) is in place, it will detail:
 - What constitutes an emergency for the individual.
 - What action to take in the case of an emergency.
- b) Pupils will be informed in general terms of what to do in an emergency such as telling a teacher.
- c) If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents arrive. Arrangements should be made for the member of staff to be able to return to school once the parent has arrived at the hospital
- d) Dealing with emergencies for all school activities wherever they take place, form part of the school's general risk management processes.

11. Complaints:

Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with their child's Year Leader or with the director of site:

- Mr Dalton should be contacted for medical matters relating to lower-site pupils.
- Mr Cantwell should be contacted for medical matters relating to upper-site pupils.
- M. Keegan should be contacted for medical matters relating to Sixth Form pupils.

Parents/carers can also contact the School Nurse Team on 020 8491 3319.