

Twyford St Mary's C of E Primary School

Supporting Children with Health Needs Policy 23-24

Policy Statement

In line with the duty which came into force on 1st September 2014, to support pupils at school with medical conditions we are committed to ensuring that all children with medical conditions, in terms of both physical and mental health, are properly supported at Twyford St Mary's C of E Primary School so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

No child with a medical condition will be denied admission or prevented from taking up a place in our school because arrangements for their medical condition have not been made.

We will ensure that pupil's health is not put at unnecessary risk from, for example, infectious diseases therefore we will not accept a child in school at times where it would be detrimental to the health of that child or others to do so.

This policy will be reviewed regularly, and it is readily accessible to parents and school staff.

Policy Implementation

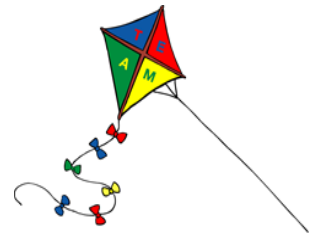
The named person who has overall responsibility for policy implementation, is the headteacher, they will:

- Ensure that sufficient staff are suitably trained
- Ensure that all relevant staff are made aware of the child's condition
- Ensure that there are cover arrangements in case of staff absence or staff turnover to ensure someone is always available
- Brief supply teachers
- Carry out risk assessments for school visits, holidays, and other school activities outside the normal timetable; and
- Monitor individual healthcare plans

Procedure to be followed when notification is received that a pupil has a medical condition

When our school is notified that a pupil has a medical condition we will:

- Make arrangements for any staff training or support
- Make every effort to ensure that arrangements are put in place within two weeks
- Not wait for formal diagnosis before providing support to pupils



Individual Healthcare Plans

The school will send home a health questionnaire at the start of the academic year. Any parent reporting that their child has an ongoing medical condition such as asthma, epilepsy, diabetes or a more complex medical condition will be asked to complete an Individual Healthcare Plan (IHP). It is a legal requirement that this is updated annually. At Twyford St Mary's Primary School, we will ensure that plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed. We will assess and manage risks to the child's education, health and social wellbeing to ensure that disruption is minimised.

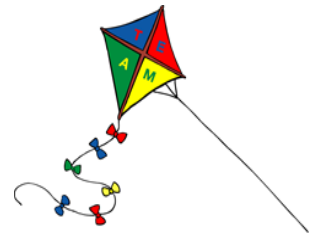
Our IHP (see Appendix 1) requires information about:

- **The medical condition, its triggers, signs, symptoms and treatments;**
- The **pupil's resulting needs**, including medication (dose, side effects and storage) and other treatments, time facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues.
- Specific **support for the pupil's educational, social and emotional needs** – for example how absences will be managed, requirements for extra time to complete tests, use of rest periods or additional support in catching up with lessons, counselling sessions;
- The **level of support** needed (NB if a child is managing their medication, this should be clearly stated with appropriate arrangements for monitoring)
- **Who will provide this support**, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are available;
- **Who** in the school **needs to be aware** of the child's condition and the support required
- **Arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours**
- Arrangements or procedures required for **school trips** or other school activities outside of the normal school timetable that will ensure that the child can participate e.g. risk assessments
- **What to do in an emergency**, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

Roles and Responsibilities

At Twyford St Mary's Primary School, the people involved in arrangements to support pupils at school with medical conditions include:

- Headteacher
- Senior teacher
- Class Teacher
- Learning Support Assistants



- Senior Administration Officer
- Administrative Assistant
- Special Educational Needs Co-ordinator
- Catering Staff employed by HC3S will be advised if appropriate

Staff training and support

Staff are supported in carrying out their role to support pupils with medical conditions through appropriate training (see training record appendix 2) with an annual review of training undertaken and training required. Training needs are assessed regularly and training will be accessed through Hampshire Teaching and Learning College (HTLC).

Any member of school staff providing support to a pupil with medical needs will have received suitable training.

No member of staff will give prescription medicines or undertake healthcare procedures without appropriate training or instruction. This will be updated to reflect requirements within individual healthcare plans.

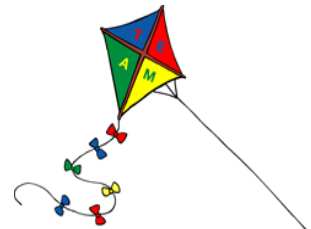
The child's role in managing their own medical needs

Where children are deemed competent to manage their own health needs and medicines by their parents and medical professional, they will be supported to do this. We see this as an important step towards preparing pupils for the next stage of their education.

Managing medicines on school premises

At Twyford St Mary's Primary School:

- Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so
- No child will be given prescription or non-prescription medicines without their parent's written consent
- Medicine containing aspirin will not be given unless prescribed by a doctor
- Medication e.g. for pain-relief will never be administered without first checking maximum dosages and when the previous dose was taken
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside of school hours
- Prescribed medicines will only be accepted if they:
 - **Are in-date**
 - **Are labelled**
 - **Are provided in the original container as dispensed by a pharmacist**
 - **Include instructions for administration, dosage and storage (NB 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 the original container).**
 - **Medicine can only be administered to the child named on the pharmacist's and in accordance with the instructions on the label.**
- All medicines will be stored safely



- Children will know where their medicines are at all times and will be able to access them immediately. Where relevant, they will know who holds the key to the storage facility. **Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to children and not locked away, including when pupils are outside the school premises e.g. on school trips.**
- When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes will always be used for the disposal of needles and other sharps.
- School staff will only administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines will do so in accordance with the prescribers instructions.
- **A record will be kept of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered will be noted in school.**

Non-Prescribed Medicines

Twyford St Mary's will administer non-prescription medicines provided by the parent and will be subject to the procedures detailed above.

In the light of the Supporting Pupils with Medical Conditions document (DfE December 2015), our policies and procedures have been reviewed and we will keep a small stock of homely remedies, such as parents may keep at home, which will include:

- Liquid Paracetamol (Calpol)
- Antihistamine e.g. Anthisan Cream for the relief of bites and stings, or liquid Piriton

These will only be administered:

- when it would be detrimental to the child not to give the medicine
- with parent's specific consent

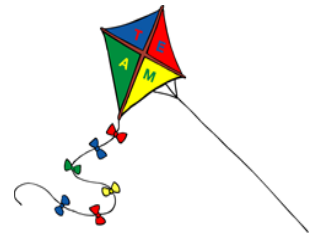
Sunscreen should be applied at home before school wherever possible. Children may bring Sunscreen into school but they will be expected to apply it themselves.

Medical Accommodation

The School Office or SENCo room will be used for medicine administration/treatment purposes. The room will be made available when required.

Training

Where staff are required to carry out non-routine or more specialised administration of medicines or emergency treatment to children, appropriate professional training and guidance from a competent source will be sought before commitment to such administration is accepted.



A 'staff training record' sheet will be completed to document the level of training undertaken alongside the first aid Qualifications of the school.

Such training will form part of the overall training plan and refresher training will be scheduled at appropriate intervals.

Record-Keeping

Written records - compliant with the most recent GDPR policy - will be kept of all medicines administered to children. We recognise that records offer protection to staff and children and provide evidence that agreed procedures have been followed. Parents will be informed if their child has been unwell at school.

Emergency procedures

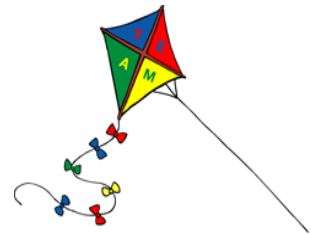
When a medical condition causes the child to become ill and/or require emergency administration of medicines, then an ambulance will be summoned at the earliest opportunity. Our school's policy sets out what should happen in an emergency situation (Appendix 6)

Day trips, residential visits, and sporting activities

We always actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and will not prevent them from doing so. We will ensure – for each residential trip – that a minimum of 2 members of staff will be trained on administering extraordinary medication.

As a school, we believe it to be unacceptable practice to:

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary
- Assume that every child with the same condition requires the same treatment
- Ignore the views of the child or their parents; or 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 activities, including lunch, unless specified in their individual healthcare plans;
- If the child becomes ill, send them to the school office unaccompanied or with someone unsuitable
- Penalise children for their attendance record if their absences are related to their medical condition e.g. medical 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. No parent should have to give up working because the school is failing to support their child's medical needs; or



- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

Liability and Indemnity

Twyford St Mary's Primary School has an SLA with HCC and is covered by insurance as long as all appropriate training and risk assessment has taken place.

Complaints

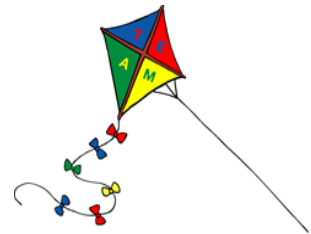
If you have a complaint about how your child's medical condition is being supported in school, please contact the Headteacher and the Chair of Governors in the first instance.

Emergency Asthma Inhalers

Since 2015, schools may hold asthma inhalers for emergency use. This is entirely voluntary, and the Department of Health has published a protocol which provides further information. As a school we have agreed to purchase and keep an emergency inhaler. These will only be used for children who are already prescribed asthma inhalers. They will only be used in an emergency. The school will always seek to use the child's prescribed inhaler if possible.

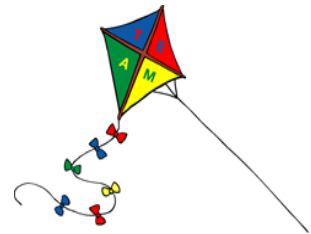
Approved by Governing Body: Summer 2024

Date of next review: Summer 2025



Approved by Governing Body – Spring 23

Date of next review – Spring 24



Appendix 1: Individual Healthcare Plan

Name of school/setting

Child's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Clinic/Hospital Contact

Name

Phone no.

G.P.

Name

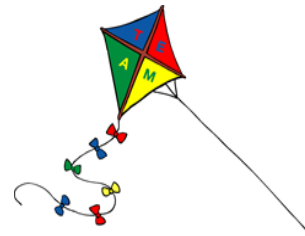
Phone no.

Who is responsible for providing support in school

--

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

--



Name of medication, dose, method of administration, when to be taken, side effects, contra-
indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

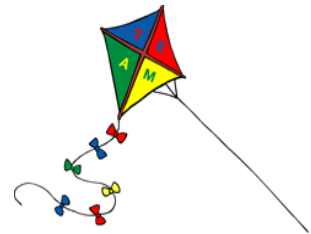
Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to



Appendix 2: parental agreement for setting to administer medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by	
Name of school/setting	
Name of child	
Date of birth	
Class	
Medical condition or illness	

Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy

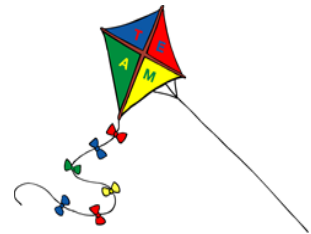
Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s)

Date



Appendix 3: Record of medicine administered to an individual child

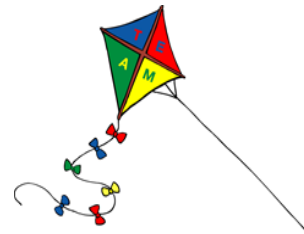
Name of school/setting
Name of child
Date medicine provided by parent
Group/class/form
Quantity received
Name and strength of medicine
Expiry date
Quantity returned
Dose and frequency of medicine

Staff signature _____

Signature of parent _____

Date
Time given
Dose given
Name of member of staff
Staff initials

Date
Time given
Dose given
Name of member of staff
Staff initials



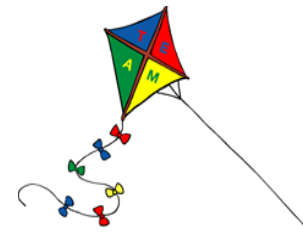
3: Record of medicine administered to an individual child (Continued)

Date
Time given
Dose given
Name of member of staff
Staff initials

Date
Time given
Dose given
Name of member of staff
Staff initials

Date
Time given
Dose given
Name of member of staff
Staff initials

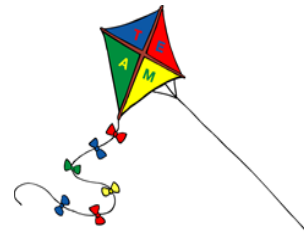
Date
Time given
Dose given
Name of member of staff
Staff initials



Appendix 4: record of medicine administered to all children

Name of school/setting

Date	Child's name	Time	Name of medicine	Dose given	Any reactions	Signature of staff	Print name



Appendix 5: staff training record – administration of medicines

Name of school/setting	
Name	
Type of training received	
Date of training completed	
Training provided by	
Profession and title	

I confirm that [name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated [name of member of staff].

Trainer's signature _____

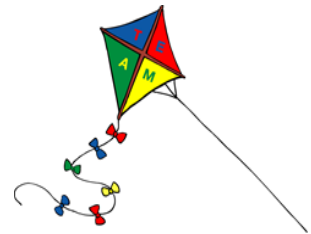
Date _____

I confirm that I have received the training detailed above.

Staff signature _____

Date _____

Suggested review date _____

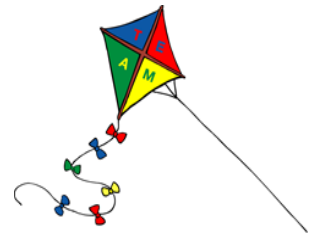


Appendix 6: contacting emergency services

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

1. your telephone number
2. your name
3. your location as follows [insert school/setting address]
4. state what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code
5. provide the exact location of the patient within the school setting
6. provide the name of the child and a brief description of their symptoms
7. inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
8. put a completed copy of this form by the phone



Appendix 7: model letter inviting parents to contribute to individual healthcare plan development

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely