OXFORD GARDENS PRIMARY SCHOOL Supporting Children with Medical Conditions in School



Aim

At Oxford gardens our aim is to support children with medical conditions, in terms of both physical and mental health, ensuring that they are properly supported so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

The Inclusion Manager will have overall responsibility for the implementation of this policy with the day-to-day running overseen by Rebecca Fuschillo.

Objective

- All staff understand the common medical conditions that affect children at this school. Staff will receive training on the impact this can have on pupils.
- The school understand that certain medical conditions are serious and can be potentially life-threatening, particularly if ill managed or misunderstood.
- Parents/Carers of pupils with medical conditions feel secure in the care their children receive at this school.
- We ensures all staff understand their duty of care to children in the event of an emergency and feel confident to know what is needed.
- Pupils with medical conditions are encouraged to take control of their condition. Pupils feel confident in the support they receive from the school to help them do this.
- The medical conditions policy is understood and supported by the whole school and local health community.

Procedure

Diagnosis of a medical condition may have occurred before a child has enrolled at Oxford Gardens. If this is the case the Pastoral Deputy Head Teacher, Eileen Keogan, will seek advice and support from previous schools or health care professional to ensure that arrangements are put in place before the child starts.

In the case of a new diagnosis, every effort will be made to have arrangements in place as soon as possible. When a formal diagnosis has not been given or the pupil's medical condition may still be unclear, arrangements can still be made in partnership with the Parents/Carers and school nurse to ensure the right support can still be put in place.

Healthcare Plans

A Healthcare Plan are used to capture key information and actions that are required to support the child's medical condition effectively and provides clarity about what needs to be done, when and by whom. It may be deemed appropriate for a child with a medical condition to have a Healthcare Plan, however, not all children will require one. They are likely to be most helpful in cases where medical conditions are long term or complex. In such cases the school nurse, Debbie Clarke, or other healthcare professionals will be involved in drawing up the healthcare plan along with the parent, the school Inclusion Manager and the pupil, where possible.

Healthcare Plans are reviewed annually or as often as is needed. Should there be significant change to the child's medical condition or to the level of care needed, it is the responsibility of the parent to inform the school immediately. See Annex A for a model process from developing healthcare plans.

Information Sharing

At Oxford Gardens we understand the importance of working co-operatively and sharing information with school staff, parents, healthcare professionals and pupils to ensure the best outcome for the pupil.

- Staff are aware of the most common serious medical conditions at this school and staff understand their duty of care to pupils in the event of an emergency.
- In an emergency situation school staff are required under common law duty of care to act like any reasonably prudent parent. This may include administering medication.
- Healthcare Plans are used to inform the appropriate staff (including supply teachers and support staff) of pupils in their care who may need emergency help.
- A copy of the pupil's Healthcare Plan will be sent to the hospital with the child in case of a medical emergency.

Dealing with an Emergency

All staff know what action to take in the event of a medical emergency.

This includes:

- How to contact emergency services and what information to give
- Who to contact within the school.

Training is refreshed for all staff at least once a year.

Where a child has a Healthcare Plan, this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other pupils in school should know what to do in general terms, such as informing a teacher immediately if they think help is needed. If a child (regardless of whether they have a Healthcare Plan) needs to be taken to hospital, staff should stay with the child until the Parent/Carer arrives, or accompany a child taken to hospital by ambulance.

All staff with responsibility for supporting a child with medical needs will receive suitable training in order to fulfil the requirements set out in the healthcare plan.

Staff must not give medication or undertake healthcare procedures without appropriate training.

Managing Medication

The following are the procedures to be followed for managing medicines:

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- No pupil at the school should be given prescription or non-prescription medicines without their Parents/Carers written consent.
- School will only accept prescribed medicines that are in-date, labelled with the child's name, provided in the original container and include instructions for administration, dosage and storage. School staff will only give medication as prescribed on the label. 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 in its original container.
- For non-prescribed medication, written instructions from the parents are acceptable.
- All medicines will be stored safely in the School Office. Children should know where their medicines are at all times and be able to access them immediately. Green crosses are placed in classrooms to indicate where medication and Healthcare Plans are kept.

- Where relevant, they should know who holds the key to the storage facility, which will be the Office Team.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline
 pens should be always readily available to children and not locked away; these will be stored
 in the classroom cupboards where both class teacher and child know how to access them. If
 a child requires an inhaler it is crucial that there is an inhaler in the school at all times.
- During school trips, the first aid trained member of staff/member of staff in charge of first aid will carry all medical devices and medicines required.
- Staff administering medicines should do so in accordance with the prescriber's instructions.
- We will keep a record 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 at school should be noted.
- Written records are kept of all medicines administered to children. These records offer protection to staff and children and provide evidence that agreed procedures have been followed.
- When no longer required, medicines should be returned to the Parent/Carer to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps.
- All medication will be returned to the parent/carer at the end of the academic year, regardless of the expiration date.

Unacceptable Practice

Although staff should use their discretion and judge each case on its merits with reference to the child's Healthcare Plan, it is not generally acceptable 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/Carers; or ignore medical evidence or opinion, (although this may be challenged)
- Send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual Healthcare Plans
- If the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- Penalise children 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/Carers, or otherwise make them feel obliged, to attend the school to administer medication or provide medical support to their child, including with toileting issues. No Parent/Carer should have to give up working because the school is failing to support their child's medical needs;
- 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/Carers to accompany the child.

Complaints

Should Parents/Carers or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the complaints procedure outlined in the School's Compliments and Complaints Policy.

It was adopted/ratified by our school's Governing Body on the
Signature of the Chair of Governors (Ms Christine Blewett):
Signature of the Head Teacher (Ms Sarah Cooper):
Signature of the Pastoral Deputy Head Teacher (Ms Eileen Keogan)

Review Date: Autumn 2020 Next Review Date: Autumn 2022

Annex A: Model process for developing individual healthcare plans

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

Headteacher or senior member of school staff to whom this has been delegated, co-ordinates meeting to discuss child's medical support needs; and identifies member of school staff who will provide support to pupil

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

Develop IHCP in partnership - agree who leads on writing it. Input from healthcare professional must be provided

School staff training needs identified

Healthcare professional commissions/delivers training and staff signed-off as competent – review date agreed

IHCP implemented and circulated to all relevant staff

IHCP reviewed annually or when condition changes. Parent or healthcare professional to initiate