

Wren's Nest Primary School Medical Needs Policy

January 2016

Alison Keyes Pupil and Family Support Co-ordinator and Ann Allport
Specialist Teaching Assistant with Responsibility for First Aid

In September 2014 a new duty came into force for Governing Bodies to make arrangements to support pupils at school with medical conditions. The statutory guidance **“Supporting pupils at school with medical conditions” (Sept 2014)** is intended to help governing bodies meet their legal responsibilities and sets out the arrangements they will be expected to make, based on good practice.

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

Accepted by Governors:
Disseminated to All Staff:
Review Date: January 2017

SUPPORTING PUPILS WITH MEDICAL NEEDS

The school's mission statement:

“Unlock potential and reach for the stars”

applies to all children at Wren's Nest Primary School. We are an inclusive community and we positively welcome and support pupils with medical needs and their families.

Medical Needs can present a significant barrier to participation and achievement. Some pupils may have a medical condition that could affect their participation in school activities which, if not properly managed, could limit their access to education and/or be potentially life threatening. In some cases, staff may need to make reasonable adjustments when arranging some activities to make sure that these pupils are not put at risk or treated less favourably as a result of their medical need.

The purpose of this policy is to help governors, staff, parents and other professionals to understand how those barriers might be overcome and their role and responsibilities in doing so.

A pupil may be said to have a medical need if they have a condition requiring management by a health care professional, this may or may not include the taking of medication. At Wren's Nest, this includes:

- *Children with epilepsy, ADHD, anaphylaxis, asthma, diabetes, Perthes Disease, bowel /bladder conditions, eczema, sickle cell, heart conditions, hyper-mobility, tubular sclerosis, I.B.S and Neurofibromatosis II*
- *pupils requiring post –hospitalisation care*
- *a child with mental health needs e.g. depression, self-harming, anxiety, school phobia etc.)*

Wren's Nest Policy and Procedures

- The policy will be reviewed regularly and updated to reflect new guidance.
- Wren's Nest has well established procedures for working in partnership with children, parents and outside agencies to plan for and support children with Medical Needs.
- Information regarding medical needs is communicated to staff through training sessions and staff meetings. To include:
 - All staff will need to have training regarding the new updated General Emergency Procedures. (Appendix 1),
 - All staff have received additional training to meet the medical needs of specific groups of pupils. (e.g. asthma and epilepsy)
 - Some staff have particular responsibility for and are therefore specifically trained to manage particular medical needs (e.g. epilepsy, diabetes, sickle cell and anaphylaxis). A training log is appended to this policy.

Information about specific pupil's health care needs is shared with parents and within school on a need to know basis through Health Care Plans and the Medical Needs Register.

Information on the Medical Needs Policy is freely available to parents with key information included in the Prospectus. The policy is available on the school's website.

- School is to the best of its ability and knowledge, fully compliant with the DDA 2010

Roles and Responsibilities

Please refer to DFE Guidance pages 11-14

In addition,

All staff are responsible for passing on any relevant information about a child as soon as possible. A list of qualified first aiders has been appended to this policy.

The Head Teacher and Deputy Head is responsible for

- Risk assessments for school visits and other activities outside the normal school timetable. Mrs Wylie is responsible for completing the risk assessments for the Pioneer Centre Visit. The Local Authority have to pass it and other Category 2 visits.
- Staff absence within their phase; arranging cover as necessary to ensure someone is always available to support the children with Medical Needs– especially on school trips .

All teachers and support staff are responsible for

- The progress of all children in their care, including children with medical needs. They are responsible for the planning or delivery of additional sessions delivered by TA's or Home and Hospital during a child's protracted absence.
- Understanding how the child's medical condition will impact on their participation in activities in school, including after school activities and out on trips etc. and making reasonable adjustments to ensure their inclusion.
- Writing risk assessments for trips, visits, activities using information from the Care Plans and ensuring that appropriately trained staff as well as their care plans are taken on the visit.
- Knowing what to do and how to respond should a child in their care with a medical condition need help.
- Collecting the first aid bag from the office to take out on school trips and local visits.

In addition, First Aiders are the first contact for a child who is injured or has an illness. Their training is updated in line with statutory requirements. This is managed by Mrs Armitage.

Mrs Keyes Pupil and Family Support Manager has additional responsibility:

- To write and review the policy with advice from Mrs Allport and School Health
- For partnership working, liaison and referrals
- To manage and support Mrs Allport's role and deputise in her absence.
- To plan for the arrival of a child with a known medical condition (liaising with the former school and relevant health care professionals, parents and the child (where appropriate)).
- To make provision for newly diagnosed conditions within 2 weeks of being informed – working closely with other health care professionals, Home and Hospital and the Physical and Sensory Service (where appropriate), parents and the child.

Mrs Allport – Specialist Teaching Assistant for Children with Medical Needs

- Arranges the training for specific medical needs (e.g. anaphylaxis) and whole school training in consultation with Mrs Wylie. (at least annually) A register of attendees is

kept by Mrs Allport writes and monitors the health care plans with parents, health care professionals and the child (where appropriate).

- Attends all training and can advise on all the conditions described in the Wren's Nest Policy.
- Maintains the Medical Needs Register This is updated and disseminated by mid-September each year to all staff. Further updates are shared as necessary.
- Ordering and Distributing First Aid resources.

Paul Tonks (Kitchen Manager)

- Ensures he and the kitchen staff are aware of children's specific dietary needs and allergies and takes appropriate action to ensure their safety.

Mrs Armitage arranges the training for Paediatric First Aid Certificates.

Parents/Carers

- Parents and Carers are responsible for their child's health and must provide school with sufficient and up-to-date information about their child's medical condition, dietary needs and treatment on entry to school or as soon as it develops.
- Parents have a responsibility to ensure their child attends subsequent medical appointments as well as keeping school informed of any follow up appointments and their outcomes. This is essential now as current hospital and clinic practice means that letters are not sent to SHA for the information to be passed on to school.
- Parents must ensure that they are contactable at all times – they are responsible for updating contact information with the school office.

Children

Children who are competent are actively encouraged to take responsibility for managing their own medication and procedures e.g. inhalers, applying creams, using sticks etc. Some diabetic children will be encouraged to inject themselves where appropriate and under strict supervision. In the event that a child refuses to take their medication, parents should be called to school to take responsibility for this.

Individual Healthcare Plans (Appendix 2) please refer to DFE Guidance p 9-11)

Individual Health Care Plans are provided by the Local Health Authority and are compliant with DEF regulations.

- Individual Healthcare Plans are currently written for children with the following conditions: epilepsy,) including absences, anaphylaxis, sickle cell, heart conditions and diabetes, ADHD as well as those with complex medical needs and for children following hospitalisation on the advice of health care professionals.
- They each include reference to what constitutes a medical emergency for that child and how that needs to be managed.
- They are written by Mrs Allport, and The School Nurse or Health Visitor) or a Specialist Nurse as well as the Parents (and the child where appropriate) to identify necessary safety measures, medication and treatment programmes to support the pupil with medical needs.

- Copies are given to the class teacher and parent and the original is kept in the Medical Needs file in the School Office.
- A summary of these plans, with photos of the individual children attached is distributed to the following places/staff: School Kitchen, School Office and Staffroom, the Senior Dinner Supervisor, Head Teacher, Deputy Heads and Pupil and Family Support Manager.
- Parents are asked to give consent to display photos of their children, with their list of allergies and sensitivities, in the kitchen.
- These plans are reviewed at least annually by Mrs Allport, parents and the relevant health professionals.
- Mrs Allport will ensure that the children with Individual Healthcare Plans will know how to keep themselves safe whilst managing their specific condition in a developmentally appropriate way.
- Children with mobility issues (only) will require risk assessments to be completed and PEEPS.

Asthma Records (Appendix 3) and Eczema Plans (Appendix 4) are completed by Mrs Allport, the Parent and child (where appropriate). For children with asthma, parents sign to give permission for their child to carry and use their asthma medication. In future this will also include the emergency inhaler, kept in the Head Teacher's Office. For children with eczema, parents sign to give permission for creams to be applied (where the child is very young) or for children to be supervised in the application of their creams as appropriate. Asthma and eczema plans are also kept in the Medical Needs File.

Please refer to DFE Guidance Managing Medicines (see pages 16-17)

No member of staff has to give medication to a child unless they choose to do so.

- Non- prescription medication is only given in exceptional circumstances where it would be detrimental to the child's health or well-being not to do so:
 - In an emergency, parents can be asked to come into school to administer Paracetamol to their children. During school visits to the Pioneer Centre, Paracetamol may be administered with parents' prior consent. This is obtained before the visit.
 - Travel sickness tablets – are only given to children known to be travel sick and with the prior, informed and written consent of the parents.
- No medication can be given to a child without their parents' **written** consent.
- Prescribed medication will only be given in school if it has been prescribed for 4 doses a day or if it states before or after a particular meal.
- Parents have to complete a Request for the School to give Medication form and this has to be agreed by Mrs Wylie or in her absence Mrs Pugh or Mrs Keyes before the medication can be administered.
- Where children are given medication for pain relief, the maximum dose needs to be checked along with the time of the last dose. Parents should be informed when this has been given
- School will only accept medication that is in date, labelled and in the original container as dispensed by the pharmacist and include instructions for administration, dosage and

storage. Insulin is generally provided within a pen or pump rather than the original container.

- Medicines are kept in a locked filing cabinet in the school office at room temperature or in the fridge as necessary. Emollient creams are kept in the classroom for application as directed in the plan. Epi- Pens and inhalers should be kept on the child (best practice) when it is appropriate to do so. This information will be kept on the relevant health care plans. See Appendix 5 – Epi Pens.
- Teachers are responsible for ensuring they have the relevant medication and health care plans when out on trips.
- Any medication given must be recorded on the child's individual Medication Given Record. A tally is kept of the number of tablets remaining
- Emergency inhalers are kept in Mrs Wylie's office and in Mrs Parkes office. Parents sign to give consent to use the school's emergency inhaler, if their own inhaler has run out or fails to work. Parents are responsible for replacing their child's inhaler.

Key Partners (see pages 12-13)

Laura Bickley School Nurse (Children aged 5-11)

1. Provides advice and support to school regarding children with medical needs as well as any other health care issues. This includes whole school training (e.g. asthma) as well as health promoting advice to specific year groups on request.
2. Takes referrals from parents and staff through Mrs Keyes, Mrs Allport or Mrs Smith (Learning Mentor) A referral form is completed and a copy is kept in the child's record. Where a meeting cannot be facilitated, with their permission, the parents' details are passed directly to the SHA to enable her to contact them.
3. Is a partner in all Child Protection and Looked -After Children Plans and some CAF's and CIN Plans. She may also be a partner in SEND Support Plans/EHCPs
4. Carries out Reception and Year 6 health assessments.

Health Visitors – The Greens Health Centre – for children aged 0-4

See 1 and 3 above.

Referrals are made by Mrs Keyes by phone and a record kept in the child's individual SEN file

Home and Hospital Tuition Service (Mrs Keyes or hospital referral) see Appendix 8

Paediatrician at Russell's hall Hospital (referral through GP/SCMO)

School's Medical Officer (referral through SHA)

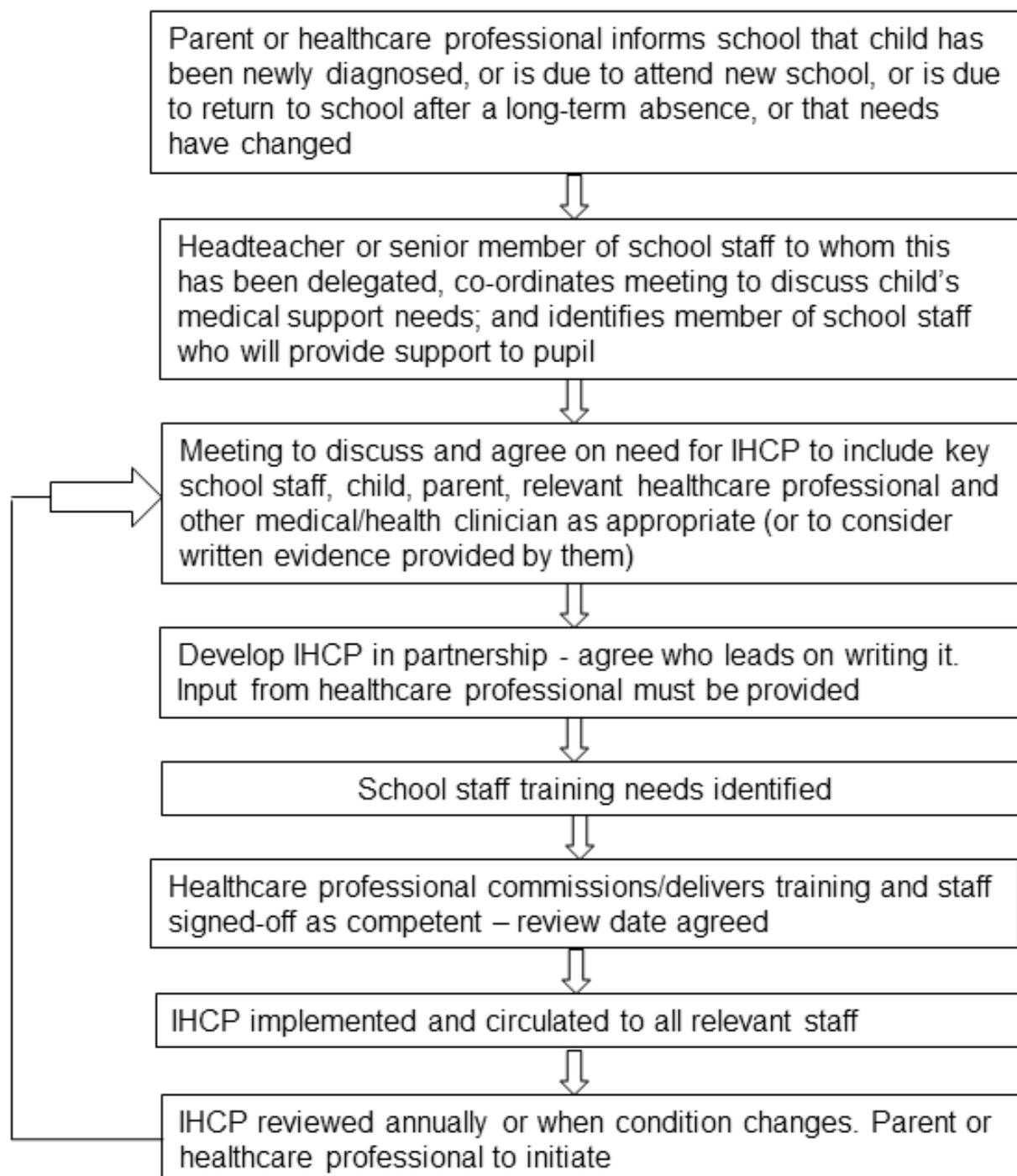
CAMHS – referral through GP

Physical and Sensory Service – referral through Mrs Keyes

Procedure to be followed when developing an individual health care plan.

(For a newly diagnosed condition, for a child new to the school with an existing condition, following long term absence or changing needs)

(DFE guidance states that every effort should be made to do this within 2 weeks.)



In addition:

- Children in school may need to be prepared for their arrival – a brief description of their presentation and how we support them in school –
- A start date will be agreed by parents, school and health care professionals

Additional Information

Risk Assessments - Trips

Staff supervising trips should always be aware of any medical needs and their relevant emergency procedure. They should check the Medical Needs Register and children's individual health care plans as necessary and arrange for inhalers, the additional epi- pen, medication etc. to be collected prior to embarking. When completing the Off Site Mag. Risk Assessment, if a pupil has a medical need that could affect their safety or physical or emotional well-being, staff should tick the box in section 10 – Group Detail – Additional Needs Yes/No and a further section will appear in the risk assessments drop down box under risk type in Section 11. Should staff have any queries, they should discuss this with Mrs Allport or Mrs Keyes.

It is best practice to take 2 people trained in managing a specific medical condition (ie epilepsy or anaphylaxis). (The whole school training should ensure this is practicable but if there are any concerns regarding this, Mrs Allport and Mrs Wylie must be informed and staffing adjustments made.) This is especially important when the class separates into different groups and move around independently of each other. It is therefore advisable to keep all children with health care issues together in the group with additional support.

Children with Long Term Medical Needs and Significant Periods of Absence from School.

Some children, as a result of a pre-existing medical condition or as the result of an accident or newly diagnosed condition may require significant periods of time away from school on a regular basis (e.g. for transfusions/dialysis etc.) or infrequently as a result of hospitalisation or convalescence. Wherever possible and in consultation with parents, these children will be offered some additional teaching from either school and / or through the Home and Hospital Tuition Service. The class/booster group teacher continues to take responsibility for the child's progress and directs the work of the individual support teacher or TA.

Home and Hospital Tuition Service

- The referral is made by Mrs Keyes if a pupil has surgery planned and/or a known and extended future absence, due to a medical need, is likely (15 days or more)
- The hospital refers were absence is the result of the sudden onset of a serious medical condition or illness, surgery or other hospitalisation,
- For children with mental health problems such as anxiety, depression or school phobia, their needs will be discussed with Parents, GP and the Educational Psychologist before a referral is made.

Following a long period of absence, Mrs Keyes will initiate a return to school plan, liaising with the child, parents, class teacher, School Health and the Home and Hospital Tuition Service where appropriate to ensure a successful and safe return to school. Parents must now provide a letter from the GP or hospital stating the child is well enough to return to school.

Liability and Indemnity

Wren's Nest Primary has full insurance and indemnity through Dudley Metropolitan Borough Council. Policy no. Y108389QBE0115A

Limit of Indemnity:

Public Liability cover is no less than £5million

Complaints

All staff carry out their duties to care for and support all children, to the best of their ability under the direction of the Head Teacher. Should a parent ever wish to make a complaint over the care and support provided by the school, then it should be made in writing or in a meeting with the Head Teacher, Mrs Wylie.

In the event of the complaint being made against Mrs Wylie, the complaint should be addressed to Mrs Abrahams, The Chair of Governors.

This guidance has been written with reference to the following documents

- **Supporting Pupils at school with medical conditions. DFE September 2014 (key guidance) and Supporting Children in Early years provision with medical Conditions (Dudley March 2014)**
- Managing Medicines in Schools and Early Years settings DH March 2005
- Equality Act 2010
- Learners with Medical Needs, OFSTED Jan 2011
(available in staff shared area)
NAHT Guidance Supporting Pupils at School with medical Conditions Sept.2014.

The following are available as hard copies and are kept in the Medical Needs Section in the cupboard in the school office.

- Guidance for the Management of Anaphylaxis in Schools Dudley PCT
- Guidance for the Management of Epilepsy in School Dudley PCT
- Dudley Schools' Asthma Policy, Dudley PCT
- Guidance for the Management of Children and Young People with Diabetes in Schools Dudley NHS/Diabetes UK
- Understanding Meningitis – The Meningitis Trust

Appendices

- 1 The Home and Hospital Tuition Service – Guidance and Referral Forms
- 2 Blank Individual Health Care Plans

3. Asthma Record
- 3a "What to do in an asthma attack"
- 4 Eczema Plans
- 5 Protocol for Giving the Epi-Pen
- 5a Check Sheet for Assessing the Child's Condition
- 6 Request for School to give medication
- 6a medication given record (updated 2014)
- 7 Medical Needs Training Log
- 8 SHA Referral form
- 9 Hypoglycaemia Flow Chart
- 10 Child weigh Management referral Form

Guidance

Supporting pupils at school with medical conditions April 2014 (DFE)

Managing Medicines in Schools and early Years Settings DoH March 2005