



## - The School at Hackney City Farm –

### MEDICAL NEEDS POLICY

We use the term ‘parents’ to signify parents and/or carers, i.e. all those who have parental responsibility for a child or young person.

#### Scope of the Policy

This policy applies to pupils with medical needs, their parents and all staff.

#### Key Requirements/ Legal Duties

1. The guidance set out in this policy is based on the document ‘*Supporting pupils at school with medical needs: Statutory guidance for governing bodies of maintained schools and proprietors of academies in England*’ February (2014) which sets out the legal framework for mainstream schools and LAs in supporting pupils with medical needs.
2. Some children and young people with medical conditions may be disabled. Where this is the case the *Equality Act 2010* provides the legal framework.
3. Some may also have special educational needs (SEN), a Statement of SEN, or an Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For children with SEN, this guidance should be read in conjunction with the school SEN policy and the *Special Educational Needs and Disability Code of Practice: 0 to 25 years (2014)*
4. The *Schools Admissions Code 2012* makes clear that ‘no child with a medical condition should be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made.’

#### Key Principles

1. The School at Hackney City Farm is committed to ensuring that pupils with medical conditions are properly supported in school so that they can:
  - play a full and active role in school life
  - access and enjoy the same opportunities at school as any other

- young person, including school trips and physical education
- remain healthy and safe
- achieve their academic potential

The school would not seek to prevent or create unnecessary barriers to young people participating in any aspect of school life, including school trips.

2. The school is committed to working in partnership with health and social care professionals, pupils and parents to ensure that the needs of young people with medical conditions are effectively supported. It is unacceptable practice to ignore the views of the young person or their parents.
3. The school's medical arrangements will support pupils with medical needs by focussing on the needs of each individual pupil and how their medical condition impacts on their school life. It is unacceptable practice to assume that every young person with the same condition requires the same treatment.
4. The school and its staff will make all reasonable adjustments in consultation with parents to ensure that young people and young people with a disability, medical need or SEN are not discriminated against or treated less favourably than other pupils.
5. A pupil's health should not be put at unnecessary risk simply because they attend school. In addition, and in line with our safeguarding duties we will not place other pupils at risk or accept a pupil in school where it would be detrimental to the young person and others to do so.
6. We will never prevent pupils from drinking, eating or taking toilet or other breaks whenever they need in order to manage their medical condition effectively
7. We will not 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 young person's medical needs.

### **Individual Healthcare Plans**

In instances of a medical condition having a substantial impact on a pupil's provision, the school will draw up an Individual Healthcare Plan in consultation with parents, health professionals and the young person.

- The level of detail within the plans will depend on the complexity of the young person's condition and the degree of support needed.
- Individual healthcare plans may be initiated by a member of school staff, the school nurse or another healthcare professional involved in providing care to the young person.
- Plans will be drawn up with input from professionals such as a specialist nurse, who will be able to determine the level of detail needed in consultation with the school, the young person and their parents
- The plans will be reviewed at least annually or earlier if the young person's needs change.
- Each plan will be developed in the context of assessing and managing risks to the young person's education, health and social well-being and to minimise disruption.
- Where the young person has a special educational need, the individual healthcare plan will be linked to the young person's statement or EHC plan where they have one.

The plans will record the following information:

- the medical condition, its triggers, signs, symptoms and treatments
- the pupil's resulting needs, including medication (its side-effects and its storage) and other treatments, dose, time, facilities, equipment, testing, dietary requirements and environmental issues such as crowded corridors, travel time between lessons
- specific and professional advice on what and what not to do
- specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- the level of support needed, (some young people will be able to take responsibility for their own health needs), including in emergencies
- if a young person is self-managing their own 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 young person's medical condition from a healthcare professional
- who in the school needs to be aware of the young person's condition and the support required
- written permission from parents and the head teacher for medication to be administered by a member of staff, or self-administered by individual pupils during school hours

- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the young person can participate eg risk assessments
- where confidentiality issues are raised by the parent/young person, the designated individuals to be entrusted with information about the young person's condition
- A Risk Assessment to ensure that the young person participates safely in educational activities
- what to do in an emergency, including whom to contact, and contingency arrangements, including a Personal Emergency Evacuation Plan (PEEP)
- Contact details of relevant individuals and agencies
- The role of school and outside staff

### **If a student becomes unwell at school**

Pupils who become unwell at school are to be supervised at all times. We have three first aiders on site who are able to make decisions about next steps.

### **Managing medicines on school premises**

- Medicines will only be administered at school when it would be detrimental to a young person's health or school attendance not to do so.
- No young person 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 young person without the knowledge of the parents. In such cases, every effort will be made to encourage the young person to involve their parents while respecting their right to confidentiality.
- Staff should not give prescription medicines or undertake health care procedures without appropriate training (updated to reflect individual healthcare plans at all times) from a healthcare professional, even if they hold a first-aid certificate: this does not constitute appropriate training in supporting young people with medical conditions.
- After discussion with parents, young people will be encouraged to take responsibility for managing their own medicines and procedures. This is accepted good practice. Wherever possible, young people will be allowed to carry their own medicines and relevant devices or will be able to access their medicines for self-medication, quickly and easily. Young people who can take their medicines themselves or manage procedures may require a level of supervision from school staff.
- A young person under 16 will never be given medicine containing aspirin unless prescribed by a doctor.
- Medication, e.g. for pain relief, will not be administered without first checking

maximum dosages and when the previous dose was taken. Parents will be informed.

- School staff should not administer non-prescription medicines. If members of staff have concerns regarding a child's welfare, they should notify the parents, who may decide to refer the matter to the child's G.P. However, there may be rare occasions when, due to an accident or other rare event, it appears that administering a non-prescribed medication is in the best interest of the child. If so, the following guidelines should be followed:
  - The School Manager must provide written authorisation
  - This should only be done at the prior and written request of the parent
  - The parent must provide the medication and details of the timing of the last / next dose of medication
  - Staff must inform parents in writing on the day the medication is taken, detailing time and quantity taken
  - The administration of the medication must be recorded on an appropriate form on each occasion
- The school will only accept prescribed medicines that 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 to schools inside an insulin pen or a pump, rather than in its original container
- Where young people have more than one prescribed medicine, each should be in a separate container.
- It is the responsibility of parents to supply written information about the medication their child needs to take in the school or related educational activities as well as any changes to the prescription or its administration or to the support required. Parents or a suitably qualified health professional should provide the following details as a minimum:

Name and strength of medication	Dosage
Time, frequency and method of administration	Length of treatment
Date of issue	Expiry date
Possible side-effects	Storage details

- A young person 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 for use is an offence.

- A member of staff may administer a controlled drug to the child for whom it has been prescribed providing they have received specialist training/instruction.

### **Storage of medicines**

- All medicines should be stored safely.
- Pupils should know where their medicines are at all times and are able to access them immediately.
- Where relevant, pupils are informed who holds the key to the storage facility.
- All staff should know where to obtain keys to the medicine cabinet or refrigerator for emergency purposes.
- Non-health care staff should not transfer medicines from their original container under any circumstances.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenalin pens are always readily available to young people and not locked away, including during school trips. It is good practice for young people to carry these medicines around with them at all times.
- Prescribed controlled drugs (such as Ritalin- Methylphenidate) are securely stored in a non-portable container and only named staff have access to them. Controlled drugs should be easily accessible in an emergency. A record should be kept.
- Local pharmacists may give advice to the school about correct storage of medicines.

### **Record keeping**

The school keeps a record of all medicines administered to individual young people, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school are noted.

Each time staff administer or supervise the taking of medication they should:

- complete and sign record cards/sheets
- ensure that the child has actually taken the medication

When medicines are returned, or handed over to a pharmacist, this should be recorded appropriately. The child's name, the name of the medication, its form, the amount left and the signatures of the member of staff and parent / pharmacist receiving the medication should be logged.

## **Hygiene/Infection Control**

- All staff should be aware of basic hygiene precautions for avoiding infection, such as washing and drying hands before and after the administration of medication.
- Staff should have access to protective, disposable gloves and take extra care when dealing with spillages of blood or other bodily fluids and when disposing of dressings or equipment.
- Where needles are used, a sharps container and adequate arrangements for collection and incineration should be in place.

## **Disposal of Medication**

- Medicines should not be flushed down the sink or the toilet
- School staff should not dispose of medication. This is the responsibility of parents. When no longer required, medicines should be returned to the parent to arrange for safe disposal. This should be done at least at the end of every term with advice sought from the local pharmacist as to disposal of uncollected medicines
- Sharps boxes should always be used for the disposal of needles. These can be obtained by parents on prescription from the child's GP or paediatrician. Collection and disposal of the boxes should be arranged with the Local Authority's environmental services.

## **Refusal to Take Medication**

- If a pupil refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents should be informed.
- In the event that the parents are not contactable, a named health professional known to the child should be contacted and, in the event, that the refusal has a detrimental impact as identified in the Individual Health Plan emergency procedures, such as calling 999, should be implemented. All the above steps and actions should be recorded.

## **Educational Visits Trips**

The school actively supports pupils with medical conditions participating in school trips and visits. We routinely make arrangements for the inclusion of pupils with medical needs in such activities unless evidence from a clinician such as a GP or consultant states that this is not possible.

Appropriate advice will be sought to ensure the health and safety of pupils with medical needs. This will include all participants in the drawing up of the Individual

Healthcare Plan as well as the teacher/member of staff in charge of the specific activity. In some instances, it may be necessary to undertake a risk assessment or to take additional safety measures, particularly for outdoor visits or activities.

Staff on school trips will be made fully aware of the medical needs of young people, the procedures for administration of medication and any relevant emergency procedures.

Wherever possible these situations will be anticipated and included in the child's Individual Health Care Plan.

At all times the school will ensure that the health and safety of pupils and staff takes precedence over any other consideration.

The moving and handling of young people and young people is not part of any teacher's job or professional obligations and should only be undertaken when a risk assessment has taken place and training has been given. However, teachers should recognise the possible existence of emergency situations in which the moving and handling of pupils for life-threatening and potentially dangerous reasons might be necessary as part of the teacher's general duty of care.

### **Sporting Activities**

The school will ensure that the necessary adjustments will be made for young people with medical conditions to participate in the PE curriculum or sports activities. Some young people may need to take precautionary measures before or during exercise and may need to have immediate access to their medication.

Staff supervising sporting activities will be aware of the relevant medical conditions, medication requirements and emergency procedures through access to their Individual Healthcare Plan.

Restrictions on physical activity and implications of involvement in physical activities will be recorded in the Individual Healthcare Plan.

Risk assessments will be carried out to determine whether the pupil can safely participate in physical activities and specialist equipment will be provided where this is deemed reasonable. Designated members of staff assisting the pupil will be trained in safe manual handling

### **Intimate care and toileting**

The School follows the guidance set out in 'The Dignity of Risk' produced by the Council for Disabled Children, National Children's Bureau and Shared Care Network, and the guidance of the Local Authority.

### **Transport to and from the School**

The school and/or parents should alert the local authority, if it is felt a young person with medical needs, a disability or SEN requires or may require supervision on home/school transport. The local authority will work with the school to provide the necessary transport and appropriately trained escorts where they are considered necessary. They are trained to know what to do in an emergency. Drivers and escorts are not normally required to administer medication.

### **Home tuition**

There may be instances where a pupil's medical needs require alternative provision such as Home Tuition. Parents will be kept informed about arrangements in school and about contacts made with outside agencies.

Parents and pupils will be consulted before referral to the Home Tuition Service which is a service of the local authority and who will:

- provide tuition for pupils with medical needs unable to attend the school for more than 15 working days
- provide tuition for pupils unable to attend due to specific bail conditions
- liaise with the school to ensure continuity of education whilst the pupil is unable to attend and to support the individual's return to the school

### **Absence as a result of a medical condition**

Long-term absences due to health problems affect young people's educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health.

- All parents are expected to inform the school on the first day that their child is absent. If an absence lasts for a full week or longer, parents are requested to produce a medical certificate.
- In cases where pupils are absent for periods less than 15 working days, parents will follow the normal arrangements for informing the school. If the length of the period of absence can be anticipated, then it may be appropriate for the school to provide the pupil with a pack of work to do at home.
- Where an absence exceeds 15 working days, the school will inform the Education Welfare Service. The EWS will help to resolve any difficulties and advise and inform parents of the legal responsibilities of everyone involved.
- It is essential that parents inform the school at the earliest opportunity if it is

anticipated that an absence will be long-term (exceeding 15 working days).

- Parents will need to provide the school with a letter from a GP or consultant containing details of the medical condition or intervention and information about the estimated period of absence. The school will also contact the Home Tuition Service.
- If a pupil is to be admitted to hospital for a period longer than 5 working days, then the school will contact the Hospital School so as to ensure continuity of education.
- When an absence of more than 15 working days can be predicted, arrangements for continuing the pupil's education will be made by the Inclusion Manager.
- After speaking to the parents, she will contact the Hospital School and/or Home Tuition Service. She will then communicate the necessary information that will enable appropriate provision to be organised. Information sent will generally include:
  - curriculum targets and relevant coursework
  - a copy of any SEN plan and where appropriate Individual Health Care Plan
  - relevant information from the latest Annual Review if the pupil is statemented
  - in cases where a child has recurrent or regular treatment and is away from the school for a number of shorter periods the School Manager will alert the Home Tuition Service
  - The school, with parents' cooperation, will maintain contact with pupils unable to attend. The School Manager will coordinate the passing on of any information or materials necessary to keep the absent pupil up to date with topics being covered in class.
  - The school will continue to liaise with any outside agency so as to monitor the progress of pupils unable to attend. In cases of extended absence, the School Manager will arrange for a review of provision so as to best meet the pupil's needs.
  - Pupils will not be penalised for their attendance record if their absences are related to their medical condition.

### **Reintegration following absence for medical treatment**

- As with the notification of absence, it is very important that parents give the school as much notice as possible about a pupil's date of return.
- The school will, through the School Manager, ensure that a reintegration plan is prepared in advance of the pupil's return. This plan will set down any new procedures that need to be followed and will ensure that any additional equipment is in place. Particular attention will be given to matters

such as handling and lifting and support staff will be given appropriate training.

- It is essential that all agencies involved with the pupil contribute to the drawing up of the plan. In some cases, it will be necessary to have outside professionals on site when the child first returns.
- For some pupils, reintegration will be a gradual process. Where mobility and independence are reduced, or where additional medical procedures are involved, a preliminary visit will help to establish whether there are any health and safety issues that need to be addressed before reintegration.
- In the event that a pupil has significant medical needs for the foreseeable future, it may be necessary to consider making a request for statutory assessment under the SEND Code of Practice.

### **Risk Assessments**

Where the disability or medical condition of a young person entails specific risks to the individual, a Risk Assessment will be prepared. In most instances it is anticipated that this will be attached to the individual healthcare plan.

### **Emergency Procedures**

All school staff should know how to call the emergency services. They should also know who the first aiders are and the named person who has responsibility for carrying out emergency procedures.

Any child taken to hospital by ambulance should be accompanied by a member of staff, who should remain until a parent arrives.

Normally staff should not take young people to hospital in their own car. However, in an emergency it may be the only course of action. Another member of staff should accompany the driver. The driver should have public liability insurance.

Health professionals are responsible for any decisions on medical treatment when parents are not available.

Where a child has an individual 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 the school should know what to do, such as informing a teacher immediately if they think help is needed.

### **Roles and Responsibilities**

The school understands that supporting a pupil with a medical condition during

school hours is not the sole responsibility of one person. Partnership working between school staff, healthcare professionals, parents and pupils is critical.

The collaborative arrangements between all those involved is set out below, showing how they will cooperate to ensure that the needs of pupils with medical conditions are met effectively.

#### Parents are responsible for

- notifying the school that their child has a medical condition
- providing the school with sufficient and up-to-date information about their child's medical needs including letting the school know in writing of any changes to the prescription, its administration or to the support required
- liaising with the School Manager to agree the school's role in helping to meet their child's medical needs
- contributing to the development and review of their child's individual healthcare plan with other relevant professionals
- carrying out any action they have agreed to as part of its implementation, e.g. providing medicines and equipment or ensuring they or another nominated adult are contactable at all times
- ensuring their child is well enough to attend school
- informing the school on the first day that their child is absent
- providing a medical certificate in all cases where absence exceeds one week
- where possible arranging with their doctor for medication to be administered outside of school hours
- supplying written information about the medication their child needs to take in school
- where possible, arranging for a separate supply of medication for use in school
- the disposal of medication

It only requires one parent to agree to or request that medicines are administered.

Where parents have difficulty supporting or understanding their child's medical conditions, the school will liaise and refer to the appropriate agency.

It is very important for the school to have sufficient information about the medical condition of any child with a long-term medical need at the earliest point possible. Parents have a duty to contribute such information at the formulation of a child's Individual Healthcare Plan.

#### Young People are responsible for

- managing their own health needs and medicines, where they are judged competent to do so and parents agree

- being fully involved in discussions about their medical support needs and contributing as much as possible to the development of, and comply with, their individual healthcare plan.

The Governing body is responsible for ensuring that

- school policies for supporting pupils with medical conditions in school are developed and implemented
- arrangements to support pupils with medical conditions in school are in place
- a pupil with medical conditions is supported to enable as full participation as possible in all aspects of school life
- the roles and responsibilities of all those involved in the arrangements they make to support pupils at school with medical conditions are made clear
- the appropriate level of insurance is in place

The School Manager is responsible for

- working with the governing body to develop the school's policy
- ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation
- ensuring that sufficient trained staff are available to implement the policy and deliver against all individual healthcare plans
- identifying named staff to support medical needs (including the administration of medicines) and ensuring they receive proper support and training
- ensuring that insurance fully covers staff acting within the scope of their employment duties
- ensuring appropriate systems for information sharing, including confidentiality, are in place and followed
- ensuring medication is stored safely
- ensuring staff and parents are aware of the school's policy and procedures
- liaising with the Consultant in Communicable Disease Control following the outbreak of an infectious disease
- ensuring that emergency procedures are in place
- informing the Education Welfare Service of the prolonged absence of a pupil due to medical issues
- informing parents of any concerns they have about a pupil's medical condition
- agreeing with parents what support the school can provide
- seeking agreement with parents concerning sharing information about their child's medical condition/health with other staff members
- making day to day decisions about the administration of medication
- maintaining a record of pupils' medical needs on the school's database
- providing an Individual Healthcare plan (IHCP) for any pupil requiring it
- seeking an Education Health and Care assessment under the SEN Code of

Practice where it is clear that the pupil will have significant and chronic medical needs in the future

- monitoring of individual healthcare plans
- informing all staff of relevant pupils' conditions
- alerting the Local Authority's Home Tuition Coordinator where a child is absent for regular or recurrent treatment
- liaising with the Home Tuition Service and the Hospital School, depending on the circumstances, to ensure continuity of education
- liaising with outside providers to monitor the progress of pupils receiving education elsewhere
- contacting the school nursing service in the case of any child who has a medical condition that may require support at school but who has not yet been brought to the attention of the school nurse

#### Teaching staff:

- Administering medicines is not part of teachers' professional duties but all teachers should take into account the needs of pupils with medical conditions that they teach.

#### Support staff:

- Any member of the school's support staff may volunteer or be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so.
- All staff who take on responsibility for supporting young people with medical conditions have received suitable training and are competent before they take on this role.
- Designated First Aiders are responsible for providing First Aid assistance whenever necessary

### **Staff training and support**

Training will be of sufficient depth to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in Individual Healthcare Plans. They will need to understand the specific medical conditions they are being asked to deal with, their implications and preventative measures.

## **Complaints**

If a parent wishes to complain about the support provided to a child with medical needs, they should discuss their concerns directly with the School Manager.

If this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

## **Reviewing this policy**

In keeping with *Supporting pupils at school with medical needs: Statutory guidance for governing bodies of maintained schools and proprietors of academies in England' February (2014)* the Governing Body will review this policy on a regular basis.