

The Rydal Academy

Policy for supporting Pupils with Medical Conditions

Accepted by: The Rydal Academy LGB January 2015

Approving Body : Local Governing Body

Committee : LGB

Review Cycle: 1 year

Last reviewed: July 2024

Date for next review: July 2025

Statement of intent

Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRU's to make arrangements for supporting pupils at their school with medical conditions.

The aim of this policy is to ensure that all pupils with medical conditions are properly supported so that they have access to education, including school trips and physical education. The governing board of The Rydal Academy has a duty to ensure arrangements are in place to support pupils with medical conditions.

The Rydal Academy believe it is important that parents/carers of pupils with medical conditions feel confident that the school provides effective support for their child's medical condition, and that pupils feel safe in the school environment.

As illnesses are diverse in nature, the policy will not be able to cover all eventualities. Making sure your child attends school is your legal responsibility as a parent/guardian. It is also crucial for your child's education and future. Full attendance lets your child make the most of their education. By law, only the school can authorise your child's absence. It is important to keep the school informed if your child is going to be absent.

Procedure

During the admissions process, information regarding medical conditions is gathered and shared with staff accordingly. If pupils will require medication or support with managing medication in school, an Individual Health Care Plan (IHCP) will be written alongside the parent/carer.

Individual Health Care Plans (IHCP)

The school and parents/carers agree, whether an IHCP is required for a pupil, or whether it would be inappropriate or disproportionate to their level of need. The school, parents/carers and where required, a relevant healthcare professional, will work in partnership to create and review IHCPs. The IHCP will clarify what needs to be done, when and by whom and include information about the pupil's condition, special requirements, medicines required, what constitutes an emergency and action to take in the case of an emergency. Where a child has special educational needs (SEN) but does not have an Education, Health and Care Plan (EHCP), their special educational needs will be mentioned in their IHCP. Individual Health Care Plans will be reviewed annually, or earlier if evidence is provided that a child's needs have changed. The responsibility for informing school of any changes in health care needs and/or medication lies with parents/carers.

Staff training and support

Staff should not give prescription medicines or undertake health care procedures without appropriate training. A first aid certificate does not constitute appropriate training in supporting pupils with medical conditions. Training should be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions and to fulfil their requirements as set out in Individual Health

Care Plans. Relevant health care professionals should normally lead on identifying and agreeing with the school the type and level of training required and how this can be obtained.

The child's role on managing their own medical needs

Following discussion with parents/carers, pupils who are competent to manage their own health needs and medicines are encouraged to take responsibility for self-managing their medicines and procedures. This is reflected in their IHCP. When medically necessary, pupils are allowed to carry their own medicines and relevant devices. Where it is not possible for pupils to carry their own medicines or devices, they are held in suitable locations that can be accessed quickly and easily. If a pupil refuses to take medicine or carry out a necessary procedure, staff will not force them to do so. Following such an event, parents/carers will be informed so that alternative options can be considered.

Managing medicines on school premises

Medicines are only administered at school when it would be detrimental to a pupil's health or school attendance not to do so. Pupils will not be given prescription medicines without their parent/carer's written consent. Children under 16 should not be given medicine containing aspirin unless prescribed by a doctor. Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.

The school will only accept medicines that are in-date, labelled, in their original container, and that contain instructions for administration, dosage and storage. The only exception to this is insulin, which must still be in-date, but is available in an insulin pen or pump, rather than its original container.

Controlled drugs, that have been prescribed for a pupil will be securely stored in a non-portable container which is only accessible by staff; however, these are easily accessible in an emergency. A record will be kept of any dose used and the amount of controlled drugs held.

The school holds asthma inhalers for emergency use. The inhalers are stored in the medical rooms and their use is recorded.

At the end of the summer term, all medication - including asthma medication will be signed out to parents/carers and MUST be signed into school at the start of the academic year in September. If this is not collected within the prescribed time, it will be disposed of at a local pharmacy. A communication will be sent out to remind parents of this. Sharp boxes should always be used for the disposal of needles and other sharps.

Record keeping

Staff administering medicines should do so in accordance with the prescribers instructions. School 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 also be noted in school.

Emergency procedures

If a child requires hospital treatment, attempts will be made to contact parents/carers. If parents/carers are unsuccessfully contacted, then at least one member of first aid trained staff will accompany the child and remain with them until a parent/carer arrives.

Day trips, residential visits and sporting activities

Pupils with medical conditions are supported to participate in school trips, sporting activities and residential visits. Prior to an offsite activity taking place, the school can conduct a risk assessment to identify what reasonable adjustments should be taken to enable pupils with medical conditions to participate. In addition to a risk assessment, advice may be sought from pupils, parents/carers and relevant medical professionals. The school will arrange for adjustments to be made for all pupils to participate, except where evidence from a clinician, such as a GP, indicates that this is not possible.

Unacceptable practice

Although school staff should use their discretion and judge each case on its merits with reference to the pupil's Individual Health Care Plan, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering it when and where necessary;
- assume that children with the same condition require the same treatment;
- ignore the views of the child or their parents/carers; or ignore medical advice or opinion;
- send children 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 unless specified in IHCP
- if the child becomes ill, sending them to the school office or medical room unaccompanied or with someone unsuitable
- penalising children for their attendance record if their absences are related to their medical condition e.g., hospital appointments
- prevent children from drinking, eating or taking toilet 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 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

There is no legal or contractual duty on teachers, administrative staff or support staff to administer medication or supervise a pupil taking medication. It is a purely voluntary role.

In cases of accident and emergency, teachers and other staff must always be prepared to help, as they and other school staff in charge of pupils have their general legal duty of care to act as any reasonably prudent parent would. In such emergencies, staff should do what is obviously necessary and appropriate to relieve extreme distress or prevent further and otherwise irreparable harm. Qualified medical treatment should be secured in emergencies at the earliest opportunity.

The prime responsibility for a child's health however lies with the parents.

Complaints

Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

Roles and Responsibilities

Supporting a pupil with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with any relevant person or agency to provide effective support for the pupil.

The Governing Body

- must make arrangements to support pupils with medical conditions and ensure this policy is developed and implemented
- must ensure sufficient staff receive suitable training and are competent to support pupils with medical conditions
- must ensure the appropriate level of insurance is in place and appropriately reflects the level of risk

The Head Teacher

- should ensure sufficient numbers of staff are trained to implement the policy and deliver IHCPs, including in emergency and contingency situations, and they are appropriately insured

The Responsible Person – Mrs. L. Gaines

- should ensure all staff are aware of this policy and understand their role in its implementation
- should ensure all staff who need to know are informed of a pupil's condition
- is responsible for the development of IHCPs
- should support the school nursing service in the case of any pupil with a medical condition who has not been brought to their attention.

School Staff

- any staff member may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so
- should receive sufficient and suitable training and achieve the necessary level of competency before taking on the responsibility of supporting pupils with medical conditions
- any staff member should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help

School Nurses

- are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school
- may support staff on implementing a child's IHCP and provide advice and liaison

Other healthcare professionals

- should notify the school nurse when a child has been identified as having a medical condition that will require support at school
- may provide advice on developing healthcare plans
- specialist local teams may be able to provide support for particular conditions (e.g. asthma, diabetes, epilepsy)

Pupils

- should, wherever possible, be fully involved in discussions about their medical support needs and contribute to, and comply with, their IHCP

Parents

- must provide the school with sufficient up-to-date information about their child's medical needs
- are the key partners and should be involved in the development and review of their child's IHCP
- should carry out any action they have agreed to as part of the IHCP implementation