



EDUCATION

Supporting Students with Medical Needs Policy

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Date	Version No	Brief detail of change
24/04/15	1.0	Reformatted existing for Staff Portal
30/04/16	1.2	Reviewed according to annual schedule
07/12/16	1.3	Addition to allow storage of emergency salbutamol

Supporting Students with Medical Needs Policy

The Children and Families Act 2014 includes a duty for schools to support children with medical conditions.

Where students have a disability, the requirements of the Equality Act 2010 will also apply. Where students have an identified special need, the SEN Code of Practice will also apply.

All students have a right to access the full curriculum, adapted to their medical needs, and to receive the on-going support, medicines or care that they require at the Academy to help them manage their condition and keep them well.

It is recognised that medical conditions may impact on social and emotional development as well as having educational implications.

Each Academy will build relationships with healthcare professionals and other agencies in order to support effectively students with medical conditions.

1. ROLES AND RESPONSIBILITIES

1.1. Each Academy will designate a named person responsible for children with medical conditions. This person is responsible for:

- Informing relevant staff of medical conditions;
- Arranging training for identified staff. This training will include universal training (e.g. first aid at work) and, as required, that which is necessary to deliver specific support for a student's condition (e.g. administration of medication, management of feeding). Training will be sufficient to ensure staff are competent and have confidence to fulfil the requirements set out in health care plans (HCPs). Training will be provided by qualified healthcare professionals;
- Ensuring that staff are aware of the need to communicate necessary information about medical conditions to supply staff and, where appropriate, taking the lead in communicating this information;
- Assisting with risk assessment for school visits and other activities outside the normal timetable;
- Developing, monitoring and reviewing HCPs;
- Working together with parents, students, healthcare professionals and other agencies.

1.2. The Academy Board is responsible for:

- determining the Academy's general policy and ensuring that arrangements are in place to support students with medical conditions.

1.3. The Principal is responsible for:

- Overseeing the management and provision of support for students with medical conditions;
- Ensuring that sufficient, appropriately-trained numbers of staff are available to implement the policy and deliver HCPs, including to cover absence and staff turnover;

- Ensuring that academy staff are appropriately insured and are aware that they are insured.

1.4. Teachers and support staff are responsible for:

- The day-to-day management of the medical conditions of students they work with, in line with training received and as set out in HCPS;
- Working with the named person, ensuring that risk assessments are carried out for academy visits and other activities outside the normal timetable;
- Providing information about medical conditions to supply staff, who will be covering their role where the need for supply staff is known in advance.

N.B. Any teacher or support staff member may be asked to provide support to a student with a medical condition, including administering medicines. However, no member of staff can be required to provide this support. Staff must not give prescription medicines or undertake health care procedures without appropriate training.

1.5. The school nurse is responsible for:

- Notifying the Academy when a student has been identified as having a medical condition which will require support in the Academy. Wherever possible, this should be done before the student starts at our Academy.
- Providing support for staff on implementing a student's HCP and providing advice and liaison, including with regard to training.

2. PROCEDURE WHEN NOTIFICATION IS RECEIVED THAT A STUDENT HAS A MEDICAL CONDITION

- 2.1. The named person will liaise with relevant individuals including, as appropriate, parents, the individual student, health professionals and other agencies, to decide on the support to be provided to the student.
- 2.2. Where appropriate, an HCP will be drawn up.
- 2.3. Appendix A outlines the process for developing HCPs.

3. INDIVIDUAL HEALTHCARE PLANS (IHCP)

- 3.1. An IHCP will help to ensure that the academy effectively supports students with medical conditions.
- An IHCP will be written for students with a medical condition that is long term and complex.
 - It will clarify what needs to be done, when and by whom and will include information about the student's condition, special requirements, medicines required, what constitutes an emergency and action to take in the case of an emergency. Staff trained to deliver specific support for the student's condition will be indicated in the IHCP.

- Where a student has SEN but does not have a statement or HCP, their special educational needs will be mentioned in their HCP.
- IHCPs will be reviewed annually, or earlier if evidence is provided that a student's needs have changed. They will be easily available to all who need to refer to them, whilst preserving confidentiality.

4. ADMINISTERING MEDICINES

4.1. Written consent from parents must be received before administering any medicine to a student at the Academy.

4.2. Medicines will only be accepted for administration if they are:

- Prescribed;
- In date;
- Labelled;
- Provided in the original container, as dispensed by a pharmacist, and they include instructions for administration, dosage and storage.

4.3. The exception to this is insulin, which must be in date but will generally be available

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an insulin pen or pump, rather than in its original container.

4.4. Medicines should be stored safely. Students should know where their medicines are at all times.

4.5. Written records will be kept of all medicines administered to students.

4.6. Students who are competent to manage their own health needs and medicines will be allowed, after discussion with parents/carers, to carry their own medicines and relevant devices, or will be allowed to access their medicines for self-medication.

4.7. Academies are permitted to purchase and store salbutamol inhalers and spacers to treat asthma attacks in emergencies where the student's personal inhaler is unavailable. A headed letter signed by the Academy Principal stating the quantity and intended purpose must be provided to the supplier in order to facilitate this. An emergency kit with the following contents should be assembled once purchased, containing:

- salbutamol metered dose inhaler
- at least two compatible plastic spacers
- instructions on use
- instructions on cleaning
- manufacturer's information
- inventory of inhalers including batch number and expiry date
- monthly check records
- arrangements for replacing equipment
- a list of pupils permitted to use inhaler as per IHCPs
- records of use of equipment

The Academy must develop a formal process for the storage and care of the equipment, which should detail at least two individuals, one of which should be the named person responsible for students with medical needs, responsible for:

- monthly checks that the equipment is working and sufficient doses remain
- replacement equipment is obtained following use or expiration dates
- replacement spacers are available for use
- inhaler housings are cleaned, dried and returned to storage after use
- the kit is stored as per manufacturer's requirements in a central location away from student's allocated inhalers

The emergency inhaler should be used only by those who have been prescribed a reliever inhaler AND have written parental consent to use an emergency inhaler.

For further information please consult the Department of Health Guidance on the use of emergency salbutamol inhalers in schools March 2015.

5. ACTION IN EMERGENCIES

- 5.1. A copy of this information will be displayed in the Academy office:
- To request an ambulance – dial 999 and be ready with the information below. Speak slowly and clearly and be ready to repeat information if asked:
 1. The academy's telephone number;
 2. Your name;
 3. Your location [Academy address];
 4. The exact location of the patient within the Academy;
 5. The name of the child and a brief description of their symptoms;
 6. Inform ambulance control of the best entrance to use and state that the crew will be met and taken to the patient.
- 5.2. Ask office staff to contact site staff to open relevant gates for entry.
- 5.3. Contact the parents to inform them of the situation.
- 5.4. A member of staff should stay with the student until the parent/carer arrives. If a parent/carer does not arrive before the pupil is transported to hospital, a member of staff should accompany the child in the ambulance.

6. ACTIVITIES BEYOND THE USUAL CURRICULUM

- 6.1. Reasonable adjustments will be made to enable students with medical needs to participate fully and safely in day trips, residential visits, sporting activities and other activities beyond the usual curriculum.
- 6.2. When carrying out risk assessments, parents/carers, students and healthcare professionals will be consulted where appropriate.

7. UNACCEPTABLE PRACTICE

7.1. The following items are not generally acceptable practice with regard to students with medical conditions, although the Academy will use discretion to respond to each individual case in the most appropriate manner:

- Preventing students from accessing their inhalers and medication easily and administering their medication when and where necessary;
- Assuming that every student with the same condition requires the same treatment;
- Ignoring the views of the student or their parents, or ignoring medical evidence or opinion, (although this may be challenged);
- Sending students with medical conditions home frequently or preventing them from staying for normal Academy activities, including lunch, unless this is specified in their HCPs;
- If the student becomes ill, sending them to the Academy office or medical room unaccompanied or with someone unsuitable;
- Penalising students for their attendance record if their absences are related to their medical condition - e.g. hospital appointments;
- Preventing students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- Requiring parents, or otherwise making them feel obliged, to come into the Academy to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the Academy is failing to support their child's medical needs;
- Preventing students from participating, or creating unnecessary barriers to students participating in any aspect of Academy life, including Academy trips - e.g. by requiring parents to accompany their child.

8. LIABILITY AND INDEMNITY

8.1. LAT insurers advise that the employers' and public liability covering all Academies meets the needs of the Trust in relation to the matters covered by this policy. It is incumbent upon the Trust and its Academies to ensure that all staff undertaking work with students who have medical needs are fully trained and qualified for the role that they discharge, and that limitations in training and qualifications are respected. Where necessary, risk assessments must be in place.

9. COMPLAINTS

9.1. An individual wishing to make a complaint about actions regarding the Academy's actions in supporting a student with medical conditions should discuss this with the academy in the first instance.

- 9.2. If the issue is not resolved, then a formal complaint may be made, following the Trust's complaints procedure.

10. EQUALITY IMPACT STATEMENT

- 10.1. LAT will do all it can to ensure that this policy does not discriminate against any individual, directly or indirectly. LAT will do this through regular monitoring and evaluation of policies. On review, the Trust shall assess and consult relevant stakeholders on the likely impact of policies on the promotion of all aspects of equality, as laid down in the Equality Act (2010). This will include, but will not necessarily be limited to: race; gender; sexual orientation; disability; ethnicity; religion; cultural beliefs and pregnancy/maternity. LAT will use an appropriate equality impact assessment to monitor the impact of all our policies and the policy may be amended as a result of this assessment.

PROCESS FOR DEVELOPING INDIVIDUAL HEALTH CARE PLANS

