



# **Brookhurst Primary School**

## **Medical Needs Policy Spring 2021**

**01 February 2021**

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**Approved : Chair of Full Governing  
Body**

Staff Name	Last Open	Signature Date
Ms A Stanton	22-10-2018	22-10-2018
Mrs L Wythe	09-02-2021	09-02-2021
Chair of Full Governing Body	02-11-2020	02-11-2020
Emma Hugill	07-02-2018	29-10-2020
Richard Cargill	18-11-2019	21-09-2020
Stephanie Beamish	Not Yet	Not Yet
Jonathan Turton	17-03-2021	17-03-2021
Robert Nash	Not Yet	Not Yet
Mr M Hughes	Not Yet	Not Yet
Mrs S Uddin	22-01-2018	12-10-2020
Mrs K Whipp	01-03-2018	01-03-2018
James Fullbrook	27-09-2018	23-09-2020
Lauren Brough	18-01-2020	04-10-2020
Lucy Hartwright	03-02-2019	01-10-2020
Georgia Morris	09-02-2021	09-02-2021
Anna Archer	28-04-2021	28-04-2021
Becky Gunthorpe	Not Yet	Not Yet
Gill Howell	Not Yet	Not Yet
Alex Oldham	14-06-2021	14-06-2021
Claire Honey	Not Yet	Not Yet
Charlotte Lidgard	19-04-2021	19-04-2021
Verity Maclean	Not Yet	Not Yet
Olivia Whatcott	Not Yet	Not Yet
Amy Sexton	Not Yet	Not Yet
Mrs E Moon	22-01-2018	13-04-2021
Mrs C Clarke	29-01-2018	29-01-2018
Mrs T Henderson	26-02-2018	26-11-2020
Ms F Hughes	Not Yet	Not Yet
Mrs R Jones	22-01-2018	05-10-2020
Mrs G Lindsay	22-01-2018	11-12-2020
Mrs T Taylor	25-06-2018	25-06-2018
Mrs K Waterfield	26-01-2018	26-01-2018
Mrs J Weston	13-12-2017	Not Yet
Gina Reynolds	12-12-2017	15-03-2018
Chrissy Wales	Not Yet	Not Yet
Stella Newman	16-12-2019	25-11-2020
Sioban Mulherin	21-04-2020	04-01-2021
Cathryn Clarke	Not Yet	Not Yet
Sofia Gryparis	Not Yet	Not Yet
Teresa Henderson	Not Yet	Not Yet
Christine Wales	Not Yet	Not Yet

Siobhan Mulherin	Not Yet	Not Yet
Elisabeth Ingham	02-11-2020	Not Yet
Julie Byrne	Not Yet	Not Yet
Billy Jarvis	Not Yet	Not Yet
Rachel Chowanietz	Not Yet	Not Yet

# MEDICAL NEEDS POLICY

## Brookhurst Primary School



*A Place to think and grow*

## Spring 2021

*Written by Georgia Morris- Spring 2021*

*Approved by Governors - Spring 2021*

*To be reviewed - Spring 2024*

**What legislation is this policy issued under?**

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 PRUs to make arrangements for supporting pupils at their school with medical conditions.

In meeting the duty, the governing body, proprietor or management committee must have regard to guidance issued by the Secretary of State under this section. This guidance came into force on 1 September 2014.

This policy is written in regard to Section 100 of the Children and Families Act 2014 which places a duty on governing bodies to make arrangements for supporting pupils at their school with medical conditions.

**INTRODUCTION:**

On 1 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 in this document 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.

Parents of children with medical conditions are often concerned that their child's health will deteriorate when they attend school. This is because pupils with long-term and complex medical conditions may require ongoing support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. It is therefore important that parents feel confident that schools will provide effective support for their child's medical condition and that pupils feel safe.

In making decisions about the support they provide, schools should establish relationships with relevant local health services to help them. It is crucial that schools receive and fully consider advice from healthcare professionals and listen to and value the views of parents and pupils.

In addition to the educational impacts, there are social and emotional implications associated with medical conditions. Children may be self-conscious about their condition and some may be bullied or develop emotional disorders such as anxiety or depression around their medical condition. In particular, long-term absences due to health problems affect children's educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health. Reintegration back into school should be properly supported so that children with medical conditions fully engage with learning and do not fall behind when they are unable to attend.

Short-term and frequent absences, including those for appointments connected with a pupil's medical condition (which can often be lengthy), also need to be effectively managed and appropriate support put in place to limit the impact on the child's educational attainment and emotional and general wellbeing.

Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case governing bodies must comply with their duties under that Act. Some may also have special educational needs (SEN) and may have a statement, or 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 Special educational needs and disability (SEND) code of practice.

The Special educational needs and disability code of practice explains the duties of local authorities, health bodies, schools and colleges to provide for those with special educational needs under part 3 of the Children and Families Act 2014. For pupils who have medical conditions that require EHC plans, compliance with the SEND code of practice will ensure compliance with this guidance with respect to those children.

#### **AIMS:**

To ensure pupils at school with medical conditions, in terms of both physical and mental health, are properly supported so they can play a full and active role in school life, remain healthy and achieve their academic potential.

To ensure the needs of children with medical conditions are effectively supported in consultation with health and social care professionals, their parents and the pupils themselves.

#### **PROCEDURE:**

The Headteacher is responsible for ensuring that whenever the school is notified that a pupil has a medical condition:

- sufficient staff are suitably trained
- all relevant staff are made aware of a child's condition
- cover arrangements in case of staff absence/turnover is always available
- supply teachers are briefed
- risk assessments for visits and activities out of the normal timetable are carried out
- individual healthcare plans are monitored (at least annually)
- transitional arrangements between schools are carried out
- if a child's needs change, the above measures are adjusted accordingly

Where children are joining our school at the start of a new academic year, these arrangements should be in place for the start of term.

Where a child joins mid-term or a new diagnosis is given, arrangements should be in place as soon as possible, ideally within two weeks.

Any pupil with a medical condition requiring medication or support in school should have an individual healthcare plan which details the support that child needs.

If the parents, healthcare professional and school agree that a healthcare plan is inappropriate or disproportionate, a record of the child's medical condition and any implications for the child will be kept in the school's medical record and the child's individual record.

### **INDIVIDUAL HEALTHCARE PLANS (IHPs)**

The following information should be considered when writing an individual healthcare plan:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication and other treatments, times, facilities, equipment, testing, dietary requirements and environmental issues
- Specific support for the pupil's educational, social and emotional needs
- The level of support needed including in emergencies
- Who will provide support, their training needs, expectation of their role, confirmation of their proficiency and cover arrangements
- Who in school needs to be aware of the child's condition and the support required
- Arrangements for written permission from parents and the head teacher for medication to be administered by a member of staff or self-administered (children who are competent should be encouraged to take responsibility for managing their own medicines and procedures, with an appropriate level of supervision)
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate
- Confidentiality
- What to do if a child refuses to take medicine or carry out a necessary procedure□
- What to do in an emergency, who to contact and contingency arrangements

Where a child has SEN but does not have an Education, Health and Care plan, their special educational needs should be mentioned in their individual healthcare plan

### **ROLES AND RESPONSIBILITIES**

Supporting a child 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 child.

#### **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 children with medical conditions
- Must ensure the appropriate level of insurance is in place and appropriately reflects the level of risk

**The Headteacher**

- 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 child's condition
- Should ensure sufficient numbers of staff are trained to implement the policy and deliver IHPs, including in emergency and contingency situations, and they are appropriately insured
- Is responsible for the development of IHPs
- Should contact the school nursing service in the case of any child with a medical condition who has not been brought to the attention of the school nurse

**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.
- Staff will counter sign where medicines are administered i.e inhalers.
- Should ensure the children know where their medication is stored.
- Will ensure that wherever possible if a child needs certain medical treatment administered (ie epi-pen, inhalers, anti - histamine) the child is kept stationary and staff go to them
- Should receive sufficient and suitable training and achieve the necessary level of competency before taking on the responsibility of supporting children 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 IHP and provide advice, training 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 (eg. Asthma, diabetes)

**Pupils**

- Should, wherever possible, be fully involved in discussions about their medical support needs and contribute to, and comply with, their IHP and know where their medication is stored.



## **Parents**

- Must provide the school with sufficient and 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 IHP
- Should carry out any action they have agreed to as part of the IHP implementation
- Are responsible for ensuring that medication kept in school is the correct, in date, prescribed medication and it is replaced when necessary

## **Additional Notes**

The school does not have to accept a child identified as having a medical condition at times when it would be detrimental to the health of that child or others to do so.

At Brookhurst the following practice is considered not acceptable:

- Preventing children from easily accessing their medication and administering it when and where necessary
- Assuming children with the same condition require the same treatment
- Ignoring the views of the child, their parents; ignoring medical advice or opinion
- Sending children with medical conditions home frequently or prevent them from staying for normal school activities (unless specified in an IHP)
- Penalizing children for their attendance record if their absences are related to their medical condition that is recognized under this policy
- Preventing children from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively
- To automatically require parents 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)
- Preventing children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips (such as requiring parents to accompany the child)
- At Brookhurst we are happy to administer the following non-prescribed medicines with the correct signed parental permission:
  - Products containing Paracetamol
  - Products containing Ibuprofen
  - Anti-Histamines
  - Travel sickness medicines.
  - Cough Medicine

For prescribed antibiotics we are happy to give them if they are prescribed 4 times daily. However, for 3 times daily these should be given before school, after school and late evening.

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 in general terms, such as informing a teacher immediately if they think help is needed.

If a child needs to be taken to hospital, staff should stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance. Schools need to ensure they understand the local emergency services' cover arrangements and that the correct information is provided for navigation systems.

## **COMPASS**

### **School nursing services**

- COMPASS provides health and wellbeing services for school aged children aged from 5-19 years old (up to 25 years old for people with special educational needs and disabilities) and their families and carers. Our healthcare professionals deliver preventative and universal public health programmes primarily in schools, but also in youth centres, children's centres and homes as part of the national Healthy Child Programme
- Support focuses on helping children to make positive choices to improve their health and wellbeing ranging from physical, mental and emotional health, and lifestyle behaviours. Services range from health assessments and the National Child Measurement Programme to supporting children and young people with long-term conditions such as diabetes and asthma. Services are provided via individual appointments, 'open access' drop ins in and outside of schools and in group-based sessions.
- The school nursing services deliver preventative and universal public health programmes for school-aged children.

## **COMPLAINTS**

Should parents be dissatisfied with the care that the school provides they should ideally first discuss this with the school.

If following this they are still dissatisfied they may then make a formal complaint via the complaints procedure.

**Appendix****Documents to support implementation of policy.**

- 1) Contacting of Emergency Services Procedure.
- 2) Parental Agreement for Setting to Administer Medicine.
- 3) Record of Medicine Administered
- 4) Record of Medicine Administered to **ALL** Children.
- 5) Staff Training Record - Administration of Medicines
- 6) Parental letter - Developing an IHC plan for your child.
- 7) Individual Healthcare Plan Proforma

## 1) Contacting emergency services

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

1. Your telephone number - 01926 420051
2. Your name -
3. Your location as follows - Brookhurst Primary School, Ullswater Avenue, Leamington Spa
4. State what the postcode is - CV32 6NH
5. Provide the exact location of the patient within the school setting
6. Provide the name of the child and a brief description of their symptoms
7. Inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient

## 2) Parental agreement for setting to administer medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by

Name of school

Name of child

Date of birth

Class

Medical condition or illness

**Medicine**

Brookhurst Primary School








**5) Staff training record - administration of medicines**

Name of school

Brookhurst Primary School

Name of Staff Member

Type of training received

Date of training completed

Training provided by

Profession and title of Trainer

I confirm that the staff member named above has received the training detailed above and is competent to carry out any necessary treatment.

Trainer's signature \_\_\_\_\_

Date \_\_\_\_\_

**I confirm that I have received the training detailed above.**

Staff signature \_\_\_\_\_

Date \_\_\_\_\_

Suggested review date



6)

Date

Dear Parent / Carer

#### DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I would be happy for you contact me by email or to speak by phone if this would be helpful.

Yours sincerely

Angela Stanton (Headteacher)

**7) Individual**

**Healthcare Plan**



Name of school

Brookhurst Primary School

Child's name

Class

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

**Family Contact Information**

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

**Clinic/Hospital Contact**

Name

Phone no.

**G.P.**

Name

Phone no.

Who is responsible for providing support in school

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contraindications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (state if different for off-site activities)

Plan developed with

Staff training needed/undertaken - who, what, when

Form copied to