



LOVELACE PRIMARY SCHOOL

Supporting children with medical conditions policy

Definitions of medical conditions

Pupil's medical needs can be broadly summarised as being two types:

- Short term - affecting their participation in Lovelace Primary School due to being on a course of medication or treatment.
- Long term – potentially limiting some access to education and requiring additional care and support. These pupils may be considered as having special medical needs.

The role of the staff at Lovelace Primary School

This school is welcoming and supportive of pupils with medical conditions. It provides children with medical conditions with the same opportunities and access to activities (both school based and out-of-school) as other pupils. No pupil will be denied admission or prevented from taking up a place in this school because arrangements for their medical condition have not been made.

The staff understand the medical conditions of pupils at this school and that they may be serious, adversely affect a child's quality of life and impact on their ability and confidence. All staff understand their duty of care to pupils and know what to do in the event of an emergency. This is outlined in each pupil's Individual Healthcare Plan.

The whole school & local health community understand and support the medical conditions policy. Lovelace Primary School understands that all pupils with the same medical condition will not have the same needs. Our school will focus on the needs of each individual pupil.

The school recognises its duties as detailed in Section 100 of the Children and Families Act 2014. (Other related legislation is referenced in DfE guidance p21). Some pupils with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case, this school complies 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 pupils with SEN, this policy should be read in conjunction with the Special Educational Needs and Disability (SEND) code of practice.

If a pupil has a long term medical condition, Lovelace Primary School will ensure that the necessary arrangements are put in place to support the pupil. In doing this, we hope to provide equal opportunities for all pupils to access and enjoy the same activities and learning experiences. Lovelace Primary School will work with parents/ carers, medical and health professionals to plan these arrangements to support the pupil.

Staff at the school are not allowed to give any medication to a pupil without the necessary training. Healthcare professionals will support the school staff with this training. Staff are also not allowed to give any medication unless parents/ carers have completed a 'Child Medication/ Treatment Request and Consent form' which is signed by the parent/ carer.



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The role of the school

This school is committed to providing a physical environment accessible to pupils with medical conditions and pupils are consulted to ensure this accessibility. This school is also committed to an accessible physical environment for out-of-school activities. Lovelace Primary School makes sure the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities, extended school activities and residential visits. The school understands the importance of all pupils taking part in off site visits and physical activity and that all relevant staff make reasonable and appropriate adjustments to such activities in order they are accessible to all pupils. This includes out-of-school clubs and team sports. Risk assessments will be conducted as part of the planning process to take account of any additional controls required for individual pupil needs.

All staff are aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside the school's anti bullying policy, to help prevent and deal with any problems. They use opportunities such as PSHE and science lessons to raise awareness of medical conditions to help promote a positive environment.

This school understands that all relevant staff are aware that pupils should not be forced to take part in activities if they are unwell. They should also be aware of pupils who have been advised to avoid/take special precautions during activity, and the potential triggers for a pupil's medical condition when exercising and how to minimise these.

Procedures to follow for a pupil with a medical condition at school

Lovelace Primary School will ensure that a designated member of staff meets with the parents/ carers to gain an understanding of the pupil's medical condition, the care arrangements that need to be in place to support the pupil and to discuss when more specific arrangements and care may need to be considered. Discussions may also need to involve what to do in a medical emergency and what constitutes as an emergency for the pupil. These arrangements and procedures will be documented in an Individual Healthcare Plan.

The Individual Healthcare Plan will be written with the member of staff and parents/ carers and will clearly state what specific training may need to be carried out for the designated members of staff supporting that pupil. The Individual Healthcare Plan clearly states the signs and symptoms that the pupil may experience or present and what the necessary steps are to support them. This may include giving medication, which will be clearly stated on the Individual Healthcare Plan. Where medication has to be given in an emergency (eg Piriton, Inhalers, Epipens etc), a 'Child Medication/ Treatment Request and Consent form' also needs to be completed and signed by the parent/ carer.

Copies of the Individual Healthcare Plan are given for the parents/ carers to keep at home for their own records, a copy kept in the pupil's class (with all staff working with that pupil reading and understanding their responsibilities in it) and a copy is kept in the medical file in the First Aid room, next to the school office.



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The Individual Healthcare Plans are reviewed annually. This may be just to check the information is still current and relevant, or it may be necessary to make amendments and changes. The Individual Healthcare Plans can also be amended and updated at any time during the year whenever the pupil's condition changes or the procedures for care and support may need to be changed. Parents/ carers will need to meet with the designated member of staff to ensure the changes are made.

Lovelace Primary School will agree with professionals and parents/ carers when an Individual Healthcare Plan should be written as not all pupils with medical conditions may require one.

Annex A details the process involved for developing an Individual Healthcare Plan

Annex B shows a template for an Individual Healthcare Plan.

Annex C shows a template for 'Child Medication/ Treatment Request and Consent form'.

Pupils with severe and long term medical conditions will also have Alert Cards displayed in key areas that are confidential to staff. These cards state the pupil's name, their class and what their condition is. This is to raise the pupil's profile for all staff to have an awareness of them throughout the school environment. These cards are displayed in the class registers, in the staffroom and in the First Aid room. All members of staff know of these locations and supply teachers are made aware of these whenever they are come in to contact with these children and their classes.

Managing medication

All medication is kept in the First Aid room. This includes medication that pupils need to take if they have a short term medical condition. Medication is either stored in a lockable cupboard, out of reach of children, or stored in the fridge if required. The only exceptions are Epipens and inhalers, which are stored in the pupils' classrooms in a named container, and kept out of reach of children.

All medication that is given to the pupils is recorded and the member of staff that is administering it will initial next to it. Staff will also record any side effects that the medication may be causing to the pupil. These records are stored in the First Aid room in a central file.

If it is deemed, after a discussion with the parents/ carers, that a pupil is competent to manage their own health needs and medicines, Lovelace Primary School will encourage them to take responsibility for managing their own medicines and procedures. However, the medication will still be stored in the First Aid room for safety of the other children.

If a pupil refuses to take medicine or carry out a necessary procedure, staff should not force them to do so but instead any procedure or notes detailed on the Individual Healthcare Plan.

No pupil will be given any medication (both prescription and non-prescription) without written consent from their parent/ carer. Staff will only administer POM medication to a pupil when it has been prescribed by an appropriate practitioner (doctor, dentist, nurse or pharmacist). POM medication must be contained in its original container/packaging, in date, labelled with the child's correct name and include instructions for administration, dosage and storage. Non-prescription medication, however, does not need appropriate practitioner approval. All medication must be



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kept in date and this is the responsibility of the parents/carers to ensure that the medication they provide for use at school is in date.

During school trips the medication will be given to the named staff member who is a First Aider attending that trip to carry and ensure that the pupil is given their medication at the correct time.

When a pupil no longer requires medication, it will be returned to the parents/ carers to arrange safe disposal.

In the event of an emergency

The pupil's Individual Healthcare Plan clearly states what constitutes as an emergency for that pupil and provides clear guidance, which has been written and agreed by the parents/ carers, about what to do in emergency. This includes any medication that the pupil may have to be given.

All staff, including temporary or supply staff should be aware of the content of this policy, know what action to take in an emergency and receive updates at least yearly. School nurses will provide annual training for common conditions e.g. asthma, allergies, epilepsy and diabetes.

If a pupil needs to attend hospital, a member of staff (preferably known to the pupil) will stay with them until a parent/carer arrives, or accompany the pupil taken to hospital by ambulance. They will not take pupils to hospital in their own car.

Names of school staff key to this policy

Headteacher – Rob Meakin

Inclusion Manager – Kirsten Hurford *1 SENCO – Helen Price*

~~Medical and Welfare Assistant – Jane Sapey~~ *First Aid – Reanne Cooper*

SEND Link Governor – Adele Kendrick *Steve May*

Approved on: *9.10.19*

Signed

Signed

Chair of Governors or Chair of Committee

Headteacher

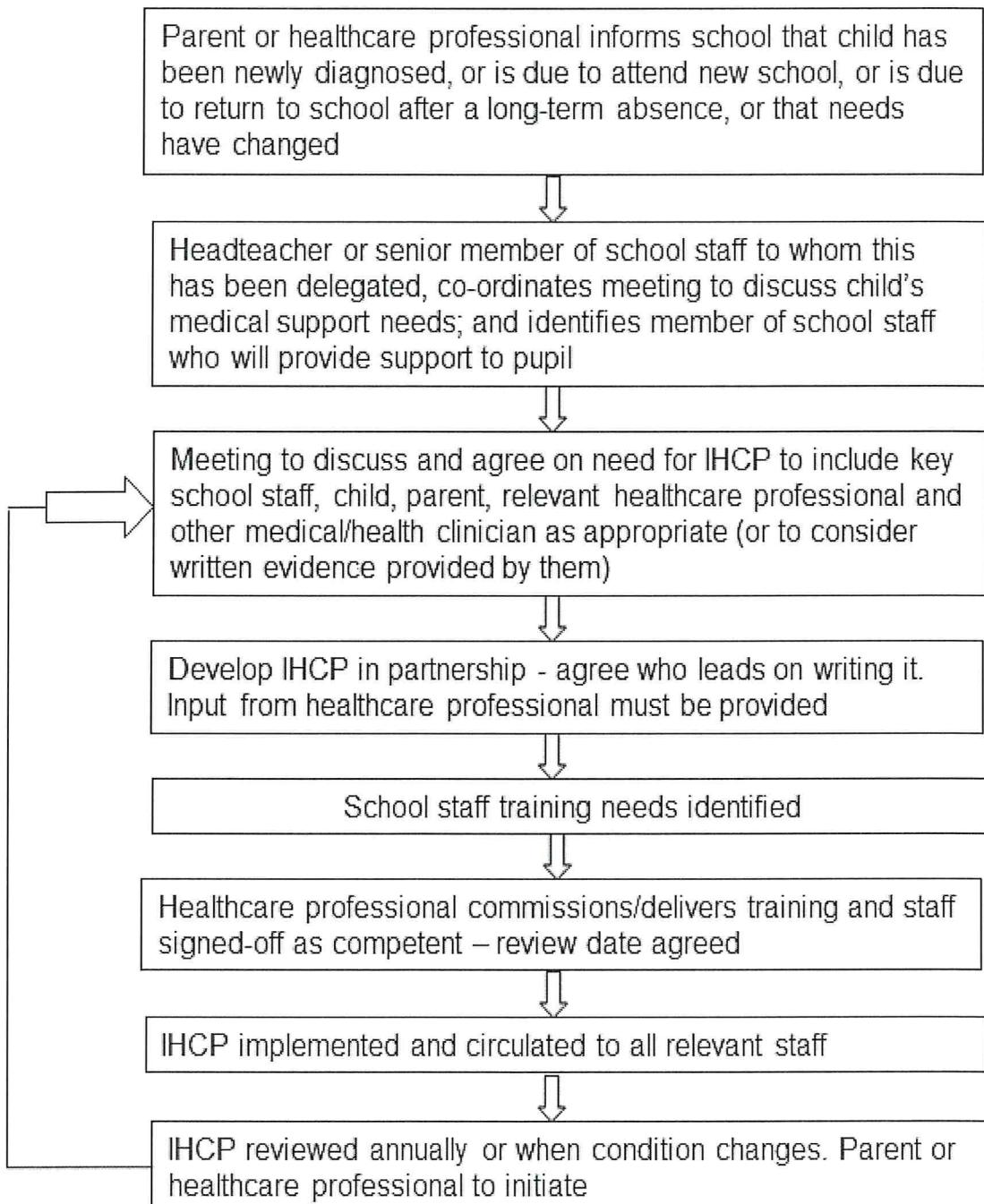


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Annex 1 – process for developing individual healthcare plans



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Child's name		Photo
Parent's surname (if different)		
Child's class		
Date of birth		
Condition		
Date of plan		
Review date		
National Health Number		
1 st emergency contact name	2 nd emergency contact name	
Relationship to child	Relationship to child	
Telephone number	Telephone number	
Alternative telephone number	Alternative telephone number	
Doctor's name and surgery	Hospital / Clinic where condition is treated	
Doctor's telephone number	Hospital / Clinic consultant's name & no.	
Child's condition & diagnosis [describe medical needs: symptoms, triggers, signs etc.,]		
Child's Symptoms [describe medical needs: symptoms, triggers, signs etc.,]		
Daily care requirements [medication, treatment, facilities, equipment, environmental etc.,]		
What medication will be administrated and where is it kept?		



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Describe what constitutes an emergency for the child	
What should happen in an emergency?	
Who is responsible in an emergency? (State if different for trips, playtimes etc) Class teacher and teaching assistant. Lunchtime team in the playgrounds.	
Staff training needed / undertaken – who, what, when? Most teaching assistants are First Aid trained.	
What other arrangements need to be considered? (Playtimes, school trips, food activities in the classroom etc.)	
Parental Permission & Responsibilities (please tick to state you have read these statements) <input type="checkbox"/> I give full consent to members of staff administering medicines that have been supplied/ or providing treatment or care to my child as stated in this plan and recognise that staff do so voluntarily. All medicines must be in the original container as dispensed by the pharmacy. <input type="checkbox"/> I accept that it is my responsibility to update and provide the necessary information about my child's medical needs, held by the school, on a regular basis and if & when something changes or if there is an event / activity which may require further planning. <input type="checkbox"/> It is my responsibility to ensure that the medicine or treatment materials held by the school have not exceeded their expiry date. I understand that the school will send home any equipment that is held for the child to be cleaned and checked.	
Signed	Date

CHILD MEDICATION / TREATMENT REQUEST & CONSENT FORM

Please PRINT and use BLACK ink – Private & Confidential



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Notes: First aid staff / the school administer medicines on a voluntary basis. We prefer parents to administer medicine themselves. We must see all prescribed medicines must in their original container from the pharmacist with the child's name on and must be brought into school by the child's parent/carer ideally with the dose prepared e.g. in a syringe. The school may decline to administer medication without giving a reason. Where medicine is prescribed in three doses this can be administered just before school, at the end of school and before bedtime so no administration in school is required. For four doses, we can administer between 12 and 1pm only.

Child's Name:				Date of Birth:	
Parent's surname if different:				Home telephone:	
Home address:					
Emergency contact names and telephone numbers:	1.	2.	3.		
Doctor's Name:					
Doctor's Address & phone number:					
Nature of medical condition or illness:					

I agree to members of staff administering medicines that have been supplied / or providing treatment or care to my child as directed below. I accept that this is a service that the school is not obliged to undertake.	Name in print: Parent/legal guardian with parental responsibilities
I agree to update information about my child's medical needs, held by the school, on a regular basis	Sign: Date:
I will ensure that the medicine held by the school has not exceeded its expiry date.	
Can the medicine / treatment be self-administered by the child? Yes / No	
Procedures to be taken in an emergency:	

Name of medicine:	Dose & instrument for administering dose: eg. Volumatic, iPen/AnaPen, syringe	Frequency/ Times	Completion date of course of medicines if known	Expiry date of medicine
When was the last dose given?				
Special precautions / side effect? Any other medicines taken at home or allergies?				

Please ensure you collect the medicine from the School Office at the end of the day / week
WHO HAS PARENTAL RESPONSIBILITY?



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For children born before 31st November 2003

- **Mothers** automatically have parental responsibility for their children
- **Fathers** also have parental responsibility if they were married to the mother when the child was conceived or
 - born, or if they got married to her later
- **Unmarried fathers** do not automatically have parental responsibility for their child, but a court order or a "parental responsibility agreement" can give it to them"
- **People looking after your child** like child minders or grandparents do not have parental responsibility, but you
 - can authorise them to take medical decisions for your child, if your wish.

*The National Family and Parenting Institute produce a leaflet, *Is it legal? A parents guide to the law* which gives more information about parental responsibility and how to acquire it. (www.eparents.org or telephone 020 7424 3460) Reference: www.doh.gov.uk/consent/parentsconsent.htm A guide for parents "What you have a right to expect 2002"

For children born after 1st December 2003

- Both of a child's parents have parental responsibility if they are registered on the child's birth certificate, This applies irrespective of whether the parents are married or not.
- Where the child has been formally adopted, the adoptive parents are the child's legal parents and automatically acquire parental responsibility.
Where the child has been born as a result of assisted reproduction, there are rules under the Human Fertilisation and Embryology Act 1990 that determine the child's legal parentage.
- People looking after your child like child minders or grandparents do not have parental responsibility, but you
 - can authorise them to take medical decisions for your child, if your wish.

Reference: BMA Parental Responsibility, Guidance from the Ethics Department, June 2006

School Agreement to Administer Medicine

It is agreed that _____ (name of pupil) will receive
_____ (medicine & dosage)
everyday as close to _____ (time)

(Name of child) _____ will be given / supervised whilst he/she takes their medication by (name of member of staff)

This agreement will continue until

(either end of date of course of medicine or until instructed by parents)

Date/...../.....

Signed.....

(member of leadership team and named member of staff)