



**POLICY:** Supporting Students with Medical Needs Policy

**STATUTORY:** Yes

**DATE AGREED:** December 2018

**REVIEW DATE:** December 2019

**RESPONSIBLE MEMBER OF STAFF:** K Barker

**GOVERNOR COMMITTEE:** Personnel & Welfare (approval by FGB)

**SIGNED HEADTEACHER:** A Evans

**SIGNED CHAIR OF GOVERNORS:** D Hiley



# JMHS Supporting Students with Medical Needs Policy

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. The key points of Section 100 state:

- Pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.
- Governing bodies must ensure that arrangements are in place in schools to support pupils at school with medical conditions.
- Governing bodies should ensure that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported. The support should be developed and led by the professionals involved.

Some children with medical conditions may be disabled. Where this is the case governing bodies must comply with their duties under the Equality Act 2010. 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 SEN code of practice. This policy also follows DfE guidance, 'Supporting Pupils at School with Medical Conditions 2011', NHS UK and asthma UK.

## **The Governing Body is responsible for:**

1. Ensuring that arrangements are in place to support pupils with medical conditions. In doing so they should ensure that such children can access and enjoy the same opportunities at school as any other child.
2. Taking into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. Some will be more obvious than others. Governors will therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life.
3. Ensuring that the school's arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions in school. The arrangements should show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care.
4. Ensuring that staff are appropriately trained within reasonable and practical parameters to provide the support that pupils need.
5. Ensuring there are clear procedures to be followed whenever the school is notified that a pupil has a medical condition.
6. Ensuring that the Supporting Pupils with Medical Needs Policy, as written, does not discriminate on any grounds including, but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation.
7. Ensuring that relevant, appropriate and practical training provided by the school is delivered to staff members who take on responsibility to support children with medical conditions. The school will be led by the professionals involved as to what training is necessary.

8. Ensuring that staff make reasonable adaptations in their teaching and materials for students with medical needs where appropriate. This need is guided by professionals involved.
9. Keeping written records of first aid administered to individual pupils and across the school population.
10. Ensuring the level of insurance in place reflects the level of risk.
11. Handling complaints regarding this policy as outlined in the school's Complaints Policy. The overall implementation of the Supporting Pupils with Medical Needs Policy and procedures at John Masefield High School.

**The Headteacher is responsible for:**

1. Ensuring the policy is developed effectively with partner agencies. This also relies on good provision by the local Clinical Commissioning Group (CCG) and relevant medical professionals.
2. Making staff aware of this policy (including updates – relevant examples of practice).
3. Ensuring the correct level of insurance is in place for teachers who support students in line with this policy.

**The SENDCO is responsible for:**

1. Leading on the implementation of a Medical Care Plan (MCP) for any student that comes to JMHS with a medical condition.
2. Ensuring that plans are reviewed by healthcare professionals at least annually or earlier if evidence is presented that the student's needs have changed.
3. Overseeing the MCP which is developed primarily by healthcare professionals and educational professionals. Parental and student input is always welcome but the process must be finalised and agreed by the professionals. The SENDCO will therefore be involved in and be the lead on liaising with healthcare professionals, the school nursing service and other agencies to ensure that the MCP addresses the following:
  - a. what to do in an emergency, including whom to contact, and contingency arrangements. Some students may have an emergency medical care plan prepared by their lead clinician that could be used to inform development of their medical care plan. Some MCPs may be bespoke from health departments and be used alongside the JMHS MCP;
  - b. the medical condition, its triggers, signs, symptoms and treatments;
  - c. the student's resulting needs, including medication (dose, side-effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues eg crowded corridors, travel time between lessons;
  - d. specific support for the student's educational, social and emotional needs eg 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;
  - e. the level of support needed, (some students will be able to take responsibility for their own health needs) including in emergencies.
  - f. who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the student's medical condition from a healthcare professional with cover arrangements for when they are unavailable. These needs will be advised by HC professionals;

- g. who in the school needs to be aware of the student's condition and the support required, ensuring processes enable appropriate sharing of information regarding students with medical needs;
  - h. the arrangements for written permission via the MCP from parents and the SENDCO for medication to be administered by a member of staff, or self-administered by the student during school hours;
  - i. separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the student can participate, eg risk assessments. School will discuss where relevant any specific issues with parents, and/or health professionals and/or student in suitable time so that specific arrangements can be put in place where practicable. If new concerns are raised it must be in a timely manner. A yellow consent form indicating medical needs or medication that may be needed including travel sickness medication should be completed;
  - j. where confidentiality issues are raised by the parent/student, the designated individuals to be entrusted with information about the student's condition.
4. Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver MCPs in normal, contingency and emergency situations. Training will be reviewed on an annual basis and guided by professional instructions.
5. Ensuring appropriate risk assessments are in place to enable students with medical needs to participate in school trips and visits where this is appropriate, or in sporting activities, and not prevent them from doing so.
6. Making staff who need to know aware of a student's medical condition, whilst respecting the need for confidentiality

## **ASTHMA**

The school recognises that asthma is a serious medical condition for a very large number of students and that these students must have access to their reliever medications (inhalers).

It is essential that we are notified regarding a student's asthma and informed of the medications needed on the school's information and consents form on entry to JMHS by parents/carers and updated regarding this.

- Specifically with asthma, most students would not be expected to have a MCP, however JMHS requests that any student who is under the care of the hospital for asthma or who has been hospitalised with asthma in the last 12 months has a MCP. Please see annex 3, asthma criteria for medical care plan.

All relevant parties would be expected to comply with the following:

- inhalers should be labelled and carried with the student at all times so they can administer; spares can be kept in the medical room
- inhalers must be taken on school trips and any updated information regarding acute illnesses relevant shared with appropriate staff
- all staff will allow students to take their medication when they need to

- there is an emergency inhaler in school for emergency use only – we request parents'/carers consent to the use of this in an emergency situation on the information and consents form

### **Emergency situation with asthmatic students**

In the event a student doesn't have their inhaler then we may use the emergency inhaler as above or in exceptional circumstances may use another student's reliever inhaler (if an ambulance has been called).

#### **Asthma and MCPs**

- NB. students will be asked on entry regarding the severity of their asthma.
- We welcome any personal asthma plans to be shared and kept on school records as these may be helpful.
- Staff concerned about the level of reliever use may also request a MCP be considered and/or should discuss with the family and direct to GP/healthcare for review. This concern should be registered with appropriate members of pastoral team.
- The school also needs to be made aware of any relevant precipitants for specific students so that triggers can be avoided where possible. Generally, school has no pets and as far as possible doesn't use chemicals in science or art that may be asthma triggers. Pupils are encouraged to go to the medical room if a particular fume seems to trigger their asthma. School complies with CLEAPPS advice.

#### **Staff members are responsible for:-**

1. Ensuring information shared on entry is recorded appropriately & shared with SENDCO & team supporting students with medical needs.
2. Taking appropriate steps to support students with medical conditions. As guided by SENDCO and MCP.
3. Where necessary and appropriate, making reasonable adjustments to include students with medical conditions in lessons.
4. Administering emergency medication, if they have agreed to undertake that responsibility.
5. Undertaking training to achieve the necessary competency for supporting students with medical needs if they have agreed to undertake that responsibility and the SENDCO judges this to be appropriate.
6. Familiarising themselves with procedures detailing how to respond when they become aware that a student with a medical condition needs urgent help. Being aware of how their condition may impact on their learning, well-being and progress.

#### **Parents and Carers are responsible for:-**

1. Keeping the school informed about any changes to student's health and ensuring we have contact details and consent to liaise with the relevant healthcare professionals.
2. Parents should complete the relevant information in the JMHS Information & Consents form immediately prior to entry to school and any changes to this should be communicated to school immediately.

3. Confirming parental agreement in writing for school to administer emergency medicine as agreed by the MCP.
4. Providing the school with the medication their child requires and keeping it up to date.
5. Collecting any leftover medicine at the end of the course or year.
6. Discussing medications with child/children prior to requesting that a staff member administers the medication.

### **Definitions**

1. "Medication" is defined as any medicine – prescribed or "over the counter".
2. "Prescription medicine" is defined as any drug or device prescribed by a doctor.
3. A "Staff member" is defined as any member of staff employed at John Masefield High School.

### **Training of Staff**

1. Where relevant, staff will receive training on the Supporting Students with Medical Needs Policy as part of their new starter induction.
2. Staff will receive regular and ongoing training as part of their development as appropriate and overseen by SENDCO.
3. ALL staff who undertake responsibilities under this policy with a first aid role will receive the following training:
  - a. Epipen Training
  - b. First Aid Training –to the level required by the H&S executive
  - c. Other as required

A record of first aid training of staff is maintained by the reception team .

Other staff may receive any additional training deemed practical, relevant and necessary by the SENDCO, based on the MCP.

4. No staff member may undertake any health care specific/specialised procedures without undergoing training specific to responsibility.
5. No staff member may administer drugs by injection unless they have received training in this responsibility.

### **The role of the student**

1. Students who are competent will be encouraged to take responsibility for managing their own medicines and procedures.
2. Where possible, students will be allowed to carry emergency medicines and devices. Other prescription medication will be located in a locked cabinet in Reception or other secure area, where there is always a trained first aider.
3. If students refuse to take medication or to carry out a necessary procedure parents/carers will be informed so that alternative options can be explored. Keeping the student safe is paramount here.

Where appropriate, students will be encouraged to take their own medication.

### **Medical Care Plans (MCPs)**

1. Where necessary, a Medical Care Plan (MCP) will be developed in collaboration with the pupils, parents/carers, Headteacher, Special Educational Needs and Disability Co-Ordinator (SENDCO) and medical professionals. The input of students and parent/carers is most helpful but the

recommendations must come from the healthcare professionals and the educational professionals at JMHS.

2. MCPs will be easily accessible whilst preserving confidentiality.
3. MCPs will be reviewed at least annually or when a student's medical circumstances change, whichever is sooner.
4. Where a student is returning from a period of hospital education or alternative provision or home tuition, we will work with the LA and education provider to ensure we provide the support the student needs to reintegrate. It is important that families communicate with us and share contacts and information regarding difficulties.
5. A model process for developing MCPs is attached at annex 1.
6. A JMHS MCP is attached at annex 2.

### **Medicines**

1. Where possible it is preferable for medicines to be prescribed in frequencies that allow the student to take them outside of school hours e.g. medicines that are taken three times daily can be done outside school hours. Students with acute infections should remain at home until recovered.
2. Medicines should only be administered at school when it would be detrimental to a student's health or school attendance not to do so. Prior to staff members administering any medication, they will receive appropriate training also including what to do if the child suffers an adverse reaction to the medicine, how it is to be stored and any other necessary medical advice. The School and parents/carers will agree the terms under which the medicine will be given with appropriate guidance from healthcare professionals where necessary. Medicines **MUST** always be in their original containers as dispensed by the pharmacist and include the prescriber's instructions for administration & dosage.
3. No students will be given any prescription medicines without written consent from their parent/carer, eg as in a MCP except in exceptional circumstances.
4. No student under 16 should be given non-prescription or prescription medicines, eg as in a MCP, without their parent's written consent except in exceptional circumstances including where the medicine has been prescribed to the student without the knowledge of the parents. In such cases, every effort should be made to encourage the student to involve their parents while respecting their right to confidentiality. No student under 16 years of age will be given medication containing aspirin without a doctor's permission.
5. Medicines **MUST** be in date, labelled and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered.
6. JMHS will store medicines securely in the medical room, or other secure area when necessary but will not be **expected** to administer them or remind students to do so / attend to have medicines, as we believe that students generally will be sufficiently responsible to manage this. There may be exceptional circumstances, as per MCPs decided with medical input whereby staff do administer medication under strict guidelines.

But it must be noted staff have no legal or contractual duty to administer medicines, or to supervise a child taking it. However in exceptional circumstances the duty of care could extend to administering medicines & taking actions in an emergency situation.

7. A maximum of two weeks supply of the medication may be provided to the school at any one time. Parents/carers will be asked by JMHS to collect out of date medicines.
8. Students requiring inhalers are encouraged to carry their own medication; spares can be sent in and stored in medical room; severe asthmatics (those under hospital care or who have special

concerns) will also need a MCP. The school has one emergency inhaler in the medical room and we ask parents to consent to their students using this on entry to school.

9. Epipens for severe allergies must be kept in a clearly labelled container provided by the parents/carers-including a photo of the student.
10. The school can keep emergency supplies for students that have been provided by their parents.
11. Nicotine replacement products such as tablets may be used and issued with agreement but e-cigarettes and nicotine inhalation replacement is not permitted at all.
12. JMHS will ask parents/carers to collect any left over medication.
13. Written records will be kept of any medication administered to students.
14. Students will never be prevented from accessing medication they need in compliance with above.
15. JMHS cannot be held responsible for side effects that occur when medication is taken correctly.
16. JMHS staff are not permitted to provide/administer non-prescribed medication. If a child regularly suffers from frequent or acute worrying pain the parents would be advised and expected to refer the matter to the child's GP and take appropriate advice .

### **CONTROLLED DRUGS/MEDICATION**

Some medicines supply, possession and administration are controlled by the Misuse of Drugs Act and its associated regulations. Some of these controlled drugs, such as methylphenidrate, may be prescribed for use by children for conditions such as ADHD. A child who has been legally prescribed this drug may legally have it in their possession, but we do not permit them to have it in their possession at school.

The school policy is that JMHS will look after the controlled drug securely (where it is agreed that it will be administered to the child for whom it has been prescribed). Any such system involving JMHS storing and administering such drugs must be set up through a student's MCP.

Passing any such drugs to others is an offence and would be dealt with under the JMHS drugs policy. It is essential that medical professionals support the school in managing these students medication and through their MCP.

Controlled drugs will be kept in a locked non portable container and only named staff will have access and manage administration. A record of their usage will be kept for audit and safety purposes.

### **Emergencies**

1. A first aid trained member of staff will lead the emergency and will call 999.
2. If a student needs to be taken to hospital, a member of staff will remain with the student until their parent/carer arrives. Parents/carers will be notified as soon as practicably possible.
3. Where a Medical Care Plan (MCP) is in place, it should detail:
  - a. What constitutes an emergency
  - b. What to do in an emergency
  - c. What will be shared with the ambulance if called.
4. Students will be informed in general terms of what to do in an emergency such as telling a member of staff, lying down, needing food etc.

### **Avoiding unacceptable practice**

JMHS understands that the following behaviour is unacceptable:



1. Assuming that students with the same condition require the same treatment
2. Not considering the views and concerns of the students and/or their parents/carer
3. Not following medical advice or opinion
4. Sending students home frequently or preventing them from taking part in activities at school where this is avoidable
5. Sending the student to the medical room or school office alone if they become ill
6. Not monitoring visits to the medical room for frequency and other concerns
7. Penalising students with medical conditions for their attendance record where the absences relate to their condition.
8. Making parents/carers feel obliged or forcing parents/carers to attend school to administer medication or provide medical support, including toilet issues.
9. Creating barriers to students participating in school life, including school trips.
10. Refusing to allow students to eat, drink or use the toilet when they need to in order to manage their condition.

#### **RETENTION OF MEDICAL RECORDS**

For legal reasons, records of all medicines administered are kept at school until the student reaches 25 years old.

#### **Insurance**

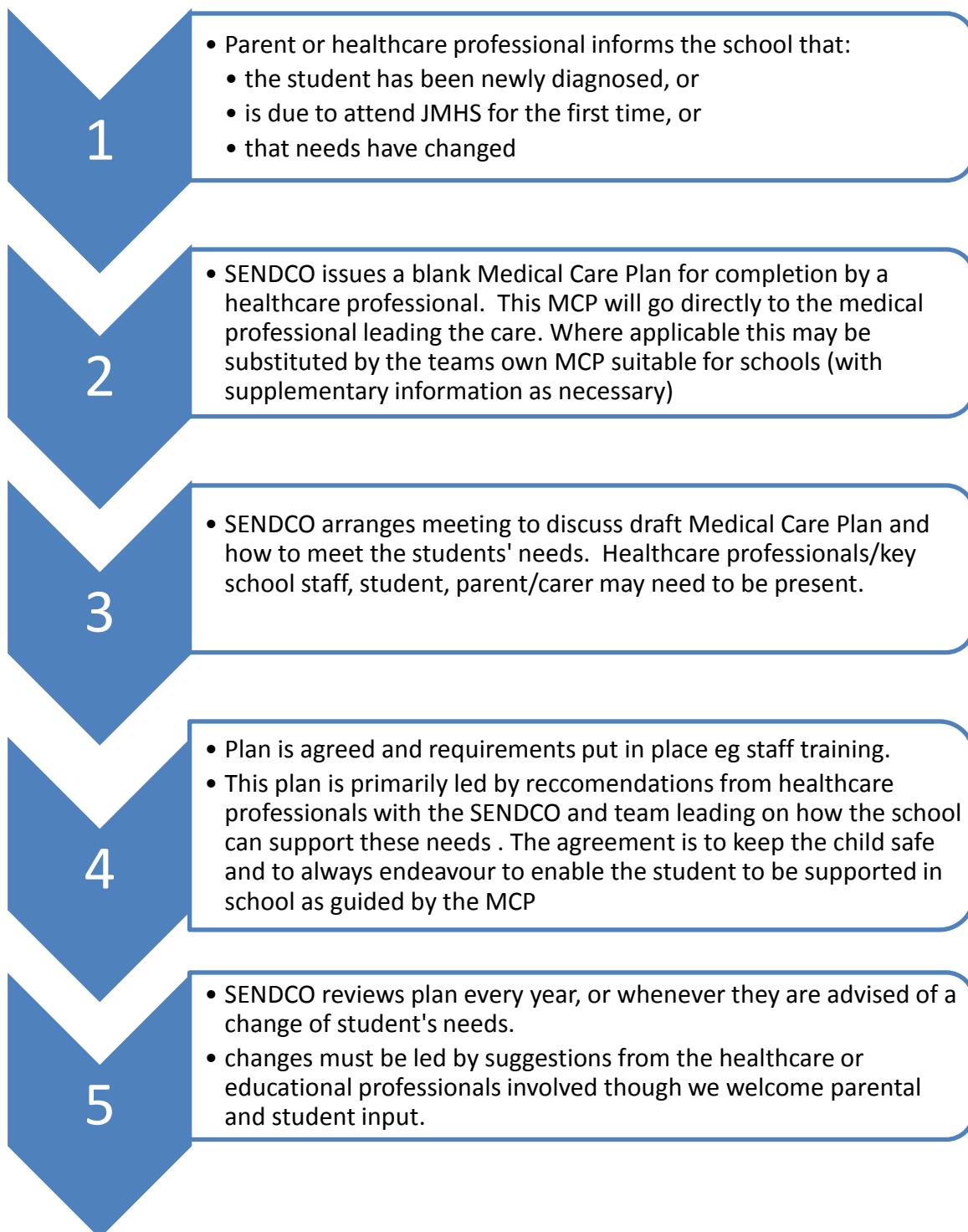
1. Staff who undertake responsibilities within this policy are covered by the school's insurance.
2. Zurich Insurance is our insurance provider, details are available from the Finance Office.

#### **Complaints**

The details of how to make a complaint can be found in the Complaints Policy.

Policy developed by:  
School Business Manager  
SENDCO  
Chair of Governors

## Annex 1: Model process for developing individual healthcare plans



## MEDICAL CARE PLAN

For completion unless medical professional's document is more appropriate



Attach photo of child  
here

Name of Student:

Date of Birth:

Health Condition:

*Sections 1 – 3 medical professional to complete*

*Sections 4 - 5 JMHS to complete*

*Sections 6 – 11 medical professional to complete in conjunction with JMHS where it is relevant to the student's needs, or omitted if not relevant to the student by the medical professional.*

### 1. Emergency Details

Please state circumstances that would need a 999 emergency call	1. 2. 3. 4.
What are the symptoms?	1. 2. 3. 4.
What are the triggers?	1. 2. 3. 4.
What action must be taken?	1. 2. 3. 4.

## 2. Medical Condition(s)

This child has the following medical condition(s) and requires the following treatment

Medical Condition	Drug	Dose	When	How it is administered?	Who administers?

Are there any side effects of the medication?

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## 3. Essential Information Concerning This Child's Health Needs

	Name	Contact details
Specialist nurse (if applicable)		
Consultant paediatrician (if applicable)		
GP		
School Nurse		
Any other provider of medical care		

#### 4. Child's Information

Child's name

--

Group/class/form

--

Date of birth

--

Child's address

--

Medical diagnosis or condition

--

Date form completed

--

Review date

--

#### 5. Family Contact Information

Name

--

Relationship to child

--

Phone no. (work)

--

(home)

--

(mobile)

--

Name

--

Relationship to child

--

Phone no. (work)

--

(home)

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(mobile)

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## 6. Additional Needs/Routine Care/Monitoring (if applicable)

Some medical conditions will require monitoring to help manage the child's condition.

What care/monitoring is required?	
When does it need to be done?  How will school support this?	
Does it need any equipment?  How will school support this?	
Does the child need any help with care/monitoring and what training will be necessary to support and provide help required?  How will school provide / enable this?	

## 7. Physical Activity

Are there any physical restrictions caused by the medical condition(s)?  How will school support and manage these needs?	
Is any extra care needed for physical activity?  How will school manage and support any needs?	

## 8. Trips and Activities

These will be considered on an individual basis.

## 9. School Environment

Can the school environment, including moving around the school, affect the child's medical condition?  What reasonable adjustments can school consider to support the student with this?	
Location of school medical room	By main reception

## 10. Educational, Social and Emotional Needs

Is the child likely to need time off because of their condition? Are there any ongoing treatments?  How can school support and help manage this time off, including "catching up"?	
Does this child need to be referred to the hospital education service?  Does the school feel this may be necessary?	
How does the child's medical condition affect learning?  How can the school monitor this and support where appropriate?	
Does the child require any further assessment of their learning?  This may be a decision best made by a clinician or the SENDCO (or joint).	
Does treatment of the medical condition affect behaviour or concentration?  How can school best support and monitor this area and provision?	

<p>Does this child require extra time or support (including emotional support) for keeping up with work?</p> <p>This may be a decision which is joint or led by HC or education depending on condition and other factors.</p>	
<p>Is there a situation where the child's medical condition necessitates them leaving the classroom?</p> <p>How will the school manage this safely?</p>	

## 11. Staff Training

<p>What training is essential? What training would be desirable?</p> <p>How will school facilitate?</p>	
<p>Who needs to be trained?</p>	
<p>Has the training been completed? (sign and date)</p>	

**Please use this section for any additional information for this child**



**Plan developed with**

The healthcare plan will be developed by the relevant professionals (HC & Educationalist/SENDCO & team) and then shared and discussed with parents/student as appropriate to ensure their input is considered.

**Plan developed by**

	Name	Signature	Job Title	Date
HC Professional				
School Representative				

**Plan shared with**

	Name	Signature	Date
Parent / Carer			
Student			

**Notable feedback from meeting with parent/carers and student**

**Form copied to**

To be completed by JMHS in conjunction with the parent/carers

### Annex 3 Asthma Criteria for Medical Care Plan

Name of student:

	Yes	No
Has your child been hospitalised with asthma in the past year?		
Is your child under the care of a paediatrician?		
Do you as the parent or your child's GP feel the child's condition warrants a healthcare plan?		
Does your child use a reliever inhaler frequently in school, causing concern?		
All students are expected to carry necessary reliever inhalers to school with them. Are you concerned that your child doesn't?		
Would you prefer you child NOT to receive the school salbutamol inhaler in an emergency?		

Conversation between parent and JMHS held on date:

Time:

Name and signature of JMHS staff: