

## **Shiplake Church of England Primary School**

### **Supporting Pupils With Medical Conditions**

#### **(incorporating the Asthma Policy for Pupils)**

**Reviewed/Updated November 2017**

Shiplake Church of England Primary School wishes to ensure that pupils with medical conditions receive appropriate care and support at school. All pupils have an entitlement to a full time curriculum or as much as their medical condition allows. This policy has been developed in line with the Department for Education's statutory guidance released in April 2014 – "Supporting pupils at school with medical conditions" under a statutory duty from section 100 of the Children and Families Act 2014. The statutory duty came into force on 1<sup>st</sup> September 2014. The school will have regard to the statutory guidance issued. We take account of it, carefully consider it and we make all efforts to comply.

Ofsted places a clear emphasis on meeting the needs of pupils with SEN and Disabilities, also including those pupils with medical conditions.

#### **Key roles and responsibilities**

The Local Authority (LA) is responsible for:

- Promoting co-operation between relevant partners regarding supporting pupils with medical conditions.
- Providing support, advice /guidance and training to schools and their staff to ensure Individual Healthcare Plans (IHP) (Appendix 1) are effectively delivered.
- Working with schools to ensure pupils attend full-time or make alternative arrangements for the education of pupils who need to be out of school for fifteen days or more due to a health need and who otherwise would not receive a suitable education.

The Governing Body of Shiplake Church of England Primary School is responsible for:

- Ensuring arrangements are in place to support pupils with medical conditions.
- Ensuring the policy is developed collaboratively across services, clearly identifies roles and responsibilities and is implemented effectively.
- Ensuring that the Supporting Pupils with Medical Conditions Policy does not discriminate on any grounds including, but not limited to, protected characteristics: ethnicity/national/origin, religion or belief, sex, gender reassignment, pregnancy & maternity, disability or sexual orientation.

- Ensuring the policy covers arrangements for pupils who are competent to manage their own health needs.
- Ensuring that all pupils with medical conditions are able to play a full and active role in all aspects of school life, participate in school visits / trips/sporting activities, remain healthy and achieve their academic potential.
- Ensuring that relevant training is delivered to a sufficient number of staff who will have responsibility to support children with medical conditions and that they are signed off as competent to do so. Staff should have access to information, resources and materials.
- Ensuring written records are kept of any and all medicines administered to pupils.
- Ensuring the policy sets out procedures in place for emergency situations.
- Ensuring the level of insurance in place reflects the level of risk.
- Handling complaints regarding this policy as outlined in the school's Complaints Policy.

The Headteacher and other designated staff are responsible for:

- Ensuring the policy is developed effectively with partner agencies and then making staff aware of this policy.
- The day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and Procedures of Shiplake Church of England Primary School.
- Liaising with healthcare professionals regarding the training required for staff.
- Identifying staff who need to be aware of a child's medical condition.
- Developing Individual Healthcare Plans (IHPs).
- Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHPs in normal, contingency and emergency situations.
- If necessary, facilitating the recruitment of staff for the purpose of delivering the promises made in this policy. Ensuring more than one staff member is identified, to cover absences and emergencies.
- Ensuring the correct level of insurance is in place for teachers who support pupils in line with this policy.
- Continuous two way liaison with school nurses and school in the case of any child who has or develops an identified medical condition.
- Ensuring confidentiality and data protection.
- Assigning appropriate accommodation for medical treatment/ care
- Voluntarily holding 'spare' salbutamol asthma inhalers for emergency use, if appropriate.

Staff members are responsible for:

- Taking appropriate steps to support children with medical conditions and familiarising themselves with procedures which detail how to respond when they become aware that a pupil with a medical condition needs help. A first-aid certificate is not sufficient.
- Knowing where controlled drugs are stored and where the key is held.
- Taking account of the needs of pupils with medical conditions in lessons.

- Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, with particular specialist training if they have agreed to undertake a medication responsibility.
- Allowing inhalers, adrenalin pens and blood glucose testers to be held in an accessible location, following DfE guidance.

School nurses are responsible for:

- Collaborating on developing an IHP in anticipation of a child with a medical condition starting school.
- Notifying the school when a child has been identified as requiring support in school due to a medical condition at any time in their school career.
- Supporting staff to implement an IHP and then participate in regular reviews of the IHP. Giving advice and liaison on training needs.
- Liaising locally with lead clinicians on appropriate support. Assisting the Headteacher in identifying training needs and providers of training.

Parents and carers are responsible for:

- Keeping the school informed about any new medical condition or changes to their child/children's health.
- Participating in the development and regular reviews of their child's IHP.
- Completing a parental consent form to administer medicine or treatment before bringing medication into school.
- Providing the school with the medication their child requires and keeping it up to date including collecting leftover medicine.
- Carrying out actions assigned to them in the IHP with particular emphasis on, they or a nominated adult, being contactable at all times.

Pupils are responsible for:

- Providing information on how their medical condition affects them.
- Contributing to their IHP, if able to do so.
- Complying with the IHP and self-managing their medication or health needs including carrying medicines or devices, if judged competent to do so by a healthcare professional and agreed by parents.

### **Training of staff**

- Newly appointed teachers, supply staff and support staff will receive training on the 'Supporting Pupils with Medical Conditions' Policy as part of their induction.
- The clinical lead for each training area/session will be named on each IHP.

- No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the condition and signed off as competent by authorized personnel, usually the school nursing team.
- School will keep a record of medical conditions supported, training undertaken and a list of teachers qualified to undertake responsibilities under this policy. They will notify Health & Safety OCC, and Risk, Insurance & Governance Manager, OCC.

### **Medical conditions register /list**

- Schools admissions forms should request information on pre-existing medical conditions. Parents must have an easy pathway to inform school at any point in the school year if a condition develops or is diagnosed. Consideration could be given to seeking consent from GPs to have input into the IHP and also to share information for recording attendance.
- A medical conditions list or register should be kept, updated and reviewed regularly by the nominated member of staff. Each class teacher should have an overview of the list for the pupils in their care, within easy access.
- Supply staff and support staff should similarly have access on a need to know basis.
- Parents should be assured data sharing principles are adhered to.
- For pupils on the medical conditions list key stage transition points meetings should take place in advance of transferring to enable parents, school and health professionals to prepare IHP and train staff if appropriate.

### **Individual Healthcare Plans (IHPs)**

- Where necessary (Headteachers will make the final decision) an Individual Healthcare Plan (IHP) will be developed in collaboration with the pupil, parents/carers, Headteacher, Special Educational Needs Coordinator (SENCO) and medical professionals.
- IHPs will be easily accessible to all relevant staff, including supply/agency staff, whilst preserving confidentiality. Staffrooms are inappropriate locations under Information Commissioner's Office (ICO) advice for displaying IHP as visitors /parent helpers etc. may enter. If consent is sought from parents a photo and instructions may be displayed. More discreet location for storage such as Intranet or locked file is more appropriate. However, in the case of conditions with potential life-threatening implications the information should be available clearly and accessible to everyone.
- IHPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.
- Where a pupil has an Education, Health and Care plan or special needs statement, the IHP will be linked to it or become part of it.
- Where a child is returning from a period of hospital education or alternative provision or home tuition, collaboration between the LA /AP provider and school is needed to ensure that the IHP identifies the support the child needs to reintegrate.

### Transport arrangements

- Where a pupil with an IHP is allocated school transport the school should invite a member of OCC Transport team who will arrange for the driver or escort to participate in the IHP meeting. A copy of the IHP will be copied to the Transport team and kept on the pupil record. The IHP must be passed to the current operator for use by the driver /escort and the Transport team will ensure that the information is supplied when a change of operator takes place.
- For some medical conditions the driver/ escort will require adequate training. For pupils who receive specialised support in school with their medical condition this must equally be planned for in travel arrangements to school and included in the specification to tender for that pupil's transport.
- When prescribed controlled drugs need to be sent in to school, parents will be responsible for handing them over to the adult in the car in a suitable bag or container. They must be clearly labelled with name and dose etc.
- Controlled drugs will be kept under the supervision of the adult in the car throughout the journey and handed to a school staff member on arrival. Any change in this arrangement will be reported to the Transport team for approval or appropriate action.

### Education Health Needs (EHN) referrals

- All pupils of compulsory school age who because of illness, lasting 15 days or more, would not otherwise receive a suitable full-time education are provided for under the local authority's duty to arrange educational provision for such pupils.
- In order to provide the most appropriate provision for the condition the EHN team accepts referrals where there is a medical diagnosis from a medical consultant.

### Medicines

- **Where possible, unless advised it would be detrimental to health, medicines should be prescribed in frequencies that allow the pupil to take them outside of school hours.**
- If this is not possible, prior to staff members administering any medication, the parents/carers of the child must complete and sign a 'Parental Agreement for Shiplake Church of England School to administer medicine' form (Appendix 2).
- No child will be given any prescription or non-prescription medicines without written parental consent except in exceptional circumstances.
- No child under 16 years of age will be given medication containing aspirin without a doctor's prescription.
- 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.

- A maximum of four weeks' supply of the medication may be provided to the school at one time.
- School will keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container within the School Office and only named staff should have access. Controlled drugs should be easily accessible in an emergency.
- Medications will be stored in the School Office unless to do so would put a child at risk. In this instance, medication will be stored in a secure area in the child's classroom.
- Any medications left over at the end of the course will be returned to the child's parents.
- Written records (Record of medicine administered to an individual child – Appendix 3) will be kept of any medication administered to children.
- Pupils will never be prevented from accessing their medication.
- Emergency salbutamol inhaler kits may be kept voluntarily by school
- General posters about medical conditions (diabetes, asthma, epilepsy etc.) are recommended to be visible in the staff room
- Shiplake Church of England Primary School cannot be held responsible for side effects that occur when medication is taken correctly.
- Staff will not force a pupil if the pupil refuses to comply with their health procedure, and the resulting actions will be clearly written into the IHP which will include informing parents.

### **Emergencies**

- Medical emergencies will be dealt with under the school's emergency procedures which will be communicated to all relevant staff so they are aware of signs and symptoms.
- Pupils will be informed in general terms of what to do in an emergency such as telling a teacher.
- If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents arrive.

### **Day trips, residential visits and sporting activities**

- Unambiguous arrangements should be made and be flexible enough to ensure pupils with medical conditions can participate in school trips, residential stays, sports activities and not prevent them from doing so unless a clinician states it is not possible.
- To comply with best practice risk assessments should be undertaken, in line with H&S executive guidance on school trips, in order to plan for including pupils with medical conditions. Consultation with parents, healthcare professionals etc. on trips and visits will be separate to the normal day to day IHP requirements for the school day.

### **Avoiding unacceptable practice**

Each case will be judged individually but in general the following is not considered acceptable in Shiplake Church of England Primary School:

- Preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary.

- Assuming that pupils with the same condition require the same treatment.
- Ignoring the views of the pupil and/or their parents or ignoring medical evidence or opinion.
- Sending pupils home frequently or preventing them from taking part in activities at school
- Sending the pupil to the school office alone or with an unsuitable escort if they become ill.
- Penalising pupils with medical conditions for their attendance record where the absences relate to their condition.
- Making parents feel obliged or forcing parents to attend school to administer medication or provide medical support, including toilet issues.
- Creating barriers to children participating in school life, including school trips.
- Refusing to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

### **Insurance**

- Teachers who undertake responsibilities within this policy will be assured by the Headteacher that they are covered by the LA/school's insurance.
- Full written insurance policy documents are available to be viewed by members of staff who are providing support to pupils with medical conditions. Those who wish to see the documents should contact the Head.

### **Complaints**

- All complaints should be raised with the school in the first instance.
- The details of how to make a formal complaint can be found in the School Complaints Policy on the school website.

### **Definitions**

- 'Parent(s)' is a wide reference not only to a pupil's birth parents but to adoptive, step and foster parents, or other persons who have parental responsibility for, or who have care of, a pupil.
- 'Medical condition' for these purposes is either a physical or mental health medical condition as diagnosed by a healthcare professional which results in the child or young person requiring special adjustments for the school day, either ongoing or intermittently. This includes; a chronic or short-term condition, a long-term health need or disability, an illness, injury or recovery from treatment or surgery. Being 'unwell' and common childhood diseases are not covered.
- 'Medication' is defined as any prescribed or over the counter treatment.

- ‘Prescription medication’ is defined as any drug or device prescribed by a doctor, prescribing nurse or dentist and dispensed by a pharmacist with instructions for administration, dose and storage.
- A ‘staff member’ is defined as any member of staff employed at Shiplake Church of England Primary School.

**Named staff to administer prescribed medicine**

Mrs K Page-Howie	Miss L Leadbetter	Mr A Tugwell	Mrs T Halstead
Mrs M Harris	Mr M Richmond	Mrs S Thomas	Miss H Boucher
Mrs A Crick	Mrs J McKay	Mrs S Capstick	Miss M Smith
Mrs D Graham	Mrs D Boughey	Mrs K Marshall	Mrs M Villa
Mrs S Underwood	Miss C Mills	Miss R Jarvie	Mrs A Robinson

Reviewed Sophie Underwood/Katherine Page-Howie – November 2017

Next review – November 2020

## **Asthma Policy for Pupils**

### **Statement of Intent**

About one in seven children have asthma and numbers are increasing. We want to make sure that having asthma does not mean children losing out when they are at school. Most children with asthma can have a full and active life. This policy will help pupils with the management of their asthma while they are at school. This policy supplements the 'Supporting Pupils with Medical Conditions' and 'Health and Safety' policies.

### **Asthma register**

- When a child joins the school part of their admission pack is a form to alert the school to asthma needs (Asthma Health Care Plan – Appendix 4). The return of this completed form will ensure that they are placed on the Shiplake Church of England Primary School Asthma Register. The Asthma Link person will collate the register and also contact the parents or named responsible carer, to obtain the inhalers that will be held by the school.

### **Indemnity**

- Staff who are happy to administer medication will be provided with indemnity.
- In emergencies staff should act as any prudent parent would, which may include giving medication.
- Each inhaler provided by parents / carers for pupils to use must be within date, named and prescribed with an appropriate pharmacy label.

### **Access to Inhalers**

- Individual pupils' inhalers are kept in a named box in their classrooms.
- Children are allowed access to their inhalers at any time in the school day, should they feel the need to use it.
- Inhalers should accompany them when taking part in off- site activities, or residential trips.
- Inhalers should be taken outside along with the register for fire drills.

### **Staff Awareness and action in asthma emergencies**

- All staff need to be able to manage attacks. Staff will do what a 'reasonable parent' would do in the circumstances prevailing at the time.
- For mild attacks children should take their usual reliever inhaler, as per instructions.
- For severe attacks a Metered Dose Inhaler should be used. Encourage relaxation. An asthma box is kept in each classroom for the children to access.
- If the child does not
  - feel better in 5-10 minutes,
  - is distressed or exhausted,
  - is unable to talk in sentences,
  - has blue lips
  - or you have any doubtsthen the action required is...

- one adult should stay with pupil and use reliever inhaler via spacer while another adult dials 999 for ambulance and states that the child is having a severe asthma attack requiring immediate attention.
- Continue to give relief inhaler while help arrives as per instructions on inhaler.
- Inform parents of the situation and actions taken.
- The incident should then be recorded in the Asthma register in the main office by the person who dealt with the attack, and the entry should be signed and dated by them.

### **Forgotten or Lost Inhalers**

- If a child's condition does not indicate the need to dial 999 i.e. not a severe attack, contact parents to bring in inhaler or collect child.
- If the child is experiencing a severe attack call 999 without delay.
- *In line with the Human Medicines Regulations 2014, Shiplake Church of England Primary School holds a 'Salbutamol' inhaler for use in emergencies. This will be used for any pupil with asthma or who has been prescribed an inhaler as a reliever medication. THIS CAN ONLY BE USED IF THE PUPILS PRESCRIBED INHALER IS NOT AVAILABLE AND A PARENTAL CONSENT TO ADMINISTER THE SCHOOL EMERGENCY SALBUTAMOL INHALER HAS BEEN COMPLETED AND RETURNED TO SCHOOL. (Letter of consent for use of School Emergency Salbutamol Inhaler – Appendix 5)*

### **Training**

- The Headteacher is responsible for assessing and arranging for training needs to be met.
- Posters which contain emergency information will be displayed at key points throughout the school.

### **Home/School Liaison**

- Parents are asked to complete and update asthma records on admission, and to update them annually. They are also required to update them more frequently if the condition or medication changes.
- Absence of parental consent should not stop staff from acting appropriately in emergencies.
- Parents will be informed if an inhaler is used during the day by use of a slip (see appendix 1), and the use of an inhaler will also be recorded in school, in the Asthma register.

### **Minimising exposure to triggers**

Where possible...

- We will avoid feathery or furry school 'visitors'.
- We will avoid pollen producing plants.
- There is a complete ban on smoking in or on the premises.

Asthma link staff – Katherine Page-Howie/Michelle Harris

## Appendix 1 : Individual Healthcare Plan

Name of school/setting	Shiplake Church of England Primary School
Child's name	
Group/class/form	
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	
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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, contra-indications, 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

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Form copied to

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## Appendix 2 : Parental Agreement for Shiplake CE Primary School 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/setting	Shiplake Church of England Primary School
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

### Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

**NB: Medicines must be in the original container as dispensed by the pharmacy**

### Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) \_\_\_\_\_

Date \_\_\_\_\_

## Appendix 3 : Record of medicine administered to an individual child

Name of school/setting	Shiplake Church of England Primary School
Name of child	
Date medicine provided by parent	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

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

Signature of parent \_\_\_\_\_

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

**Record of medicine administered to an individual child (Continued)**

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

## Appendix 4 : Asthma Health Care Plan

Child's name	
Year	
Date of birth	
Home address	
Date Asthma diagnosed	

### Family Contact Information (x3 in case of emergency)

1.Parent/Guardians name (relationship)	
Telephone number Home	
Work	
Mobile	
2.Parent/Guardians name (relationship)	
Telephone number Home	

Work	
Mobile	
3.Parent/Guardians name (relationship)	
Telephone number Home	
Work	
Mobile	

**G.P information**

Name	
Telephone number	

**Clinic/Hospital contact**

Name	
Telephone number	

**Describe how the asthma affects your child including their typical symptoms and asthma 'triggers'**

**Describe their daily care requirements including the name of their asthma medicine(s), how often it is used and the dose (eg once or twice daily, just then they have asthma symptoms, before sport)**

**Describe what an asthma attack looks like for your child and the action to be taken if this occurs**

**Advice for parents/guardians**

Remember:

- It is your responsibility to tell the school about any changes in your child's asthma and/or their asthma medication
- It is your responsibility to ensure that your child has their 'relieving' medication and a 'spacer' with them in school and that it is clearly labelled with their name
- It is your responsibility to ensure that your child's asthma medication has not expired

**I consent that I am happy that the above information be passed onto emergency care staff in the event of an emergency during school hours or during after-school activities.**

**Parent/Guardian Signature .....**

**Name of Parent/Guardian (printed) .....**

**Date .....**

## Appendix 5 : Letter of consent for use of School Emergency Salbutamol Inhaler

Child's name .....

Date .....

The Human Medicines Regulations 2014 will allow schools to keep a 'Salbutamol' inhaler for use in emergencies.

This will be used for any pupil with asthma or who has been prescribed an inhaler as a reliever medication. A plastic 'spacer' will be used. Once used, this 'spacer' will be bought home by your child for future personal use. This is to avoid possible risk of cross-infection.

This can only be used if the pupils prescribed inhaler is not available.

As you child is on our Asthma Register we ask that you give your permission for the emergency inhaler to be administered should the occasion arise.

Yours sincerely

Katherine Page-Howie  
Headteacher

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In the event of my child displaying symptoms of Asthma and if their inhaler is not available or unusable I consent for my child to receive the school 'Salbutamol' emergency inhaler.

Parent/Carer name .....

Parent/Carer signature .....

Date .....