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Review Pastoral & Admissions Committee

SUPPORTING PUPILS AT SCHOOL WITH MEDICAL CONDITIONS POLICY

NOTRE DAME HIGH SCHOOL

Part of St John the Baptist Catholic Multi Academy Trust
Company No: 7913261
Registered Office: Surrey Street, Norwich NR1 3PB

THE SCHOOL MISSION STATEMENT

I have come so that they may have life and have it to the full
(John 10:10)

We are a joyous and inclusive Catholic school, inspired by the love of God and the teachings of Jesus, specifically faith, hope, forgiveness and peace.

Our community is committed to a rounded education that develops knowledgeable, morally informed and compassionate young leaders.

If you need this document in large print, audio, Braille, alternative format or in a different language please contact the Company Secretary on 01603 611431 and we will do our best to help.

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Policy Statement

At Notre Dame High School we understand that medical conditions requiring support at school can affect quality of life and may be life-threatening.

Notre Dame High School is an inclusive community that aims to support pupils with medical conditions so that they have full access to education, including school trips and physical education and ensure they have the same opportunities as others at the school.

This policy aims to:

- Make sure that pupils, staff and parents/carers understand how our school will support pupils with medical conditions
- Set out the roles and responsibilities for everyone in the school community regarding pupils with medical conditions
- Set out the procedure for creating, reviewing and managing individual healthcare plans (IHPs)
- Set out how we will manage medicines in school
- Reassure parents/carers that the school will help their child feel safe, supported and included

The named persons with responsibility for implementing this policy are Janice Murphy DSL and Shirley Stevenson Deputy Head (ADSL).

2. Legislation and statutory responsibilities

This policy meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the statutory guidance on from the Department for Education (DfE).

3. Roles and responsibilities

3.1 The governing board

The governing board has ultimate responsibility for making arrangements to support pupils with medical conditions.

The governing board will:

- Review this policy in a timely manner, in line with the relevant legislation and requirements
- Make sure that the policy sets out the procedures to be followed whenever the school is notified that a pupil has a medical condition
- Monitor practice, and staff training, in regard to pupils with medical conditions, in line with this policy
- The governing board delegates the day-to-day implementation of this policy to the Headteacher, Deputy Headteacher and Designated Safeguarding Lead.

3.2 The Headteacher, Deputy Headteacher and Designated safeguarding lead are in charge of implementing this policy.

The Headteacher, Deputy Headteacher and Designated safeguarding lead will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Make sure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- Make sure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development and monitoring of individual healthcare plans (IHCPs)
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- Manage cover arrangements in the case of staff absence or turnover, to make sure a suitable staff member is always available, and supply staff are briefed appropriately about pupils' medical needs
- Approve risk assessments for school visits and school activities outside the normal school timetable that involve provision for pupils with medical conditions
- Make sure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

3.3 Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of 1 person. Any member of staff may be asked to provide support to pupils with medical conditions. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

3.4 Parents/carers

Parents/carers will:

- Provide the school with sufficient and up-to-date information about their child's medical needs.
- Parents/Carers are required to provide evidence of appropriate prescriptions and written permission for medicines to be administered by staff
- Parents/Carers are involved in the development and review of their child's IHCP, and may be involved in its drafting
- Parents/Carers will carry out any action they have agreed to as part of the implementation of the ICHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times
- Parents and Carers are contacted termly (see appendix 4) to request they check IHCP and advise the school of any updates to their child's IHCP

3.5 Pupils

Pupils at Notre Dame are fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHCPs. They are also expected to comply with their IHCPs.

4. Equal opportunities

Notre Dame High School will adhere to the legal responsibilities under the Equality Act 2010 and will not unlawfully discriminate against any pupils. Notre Dame High school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents/carers and any relevant healthcare professionals will be consulted.

5. Being notified that a child has a medical condition

When Note Dame High school is notified that a pupil has a medical condition, the process outlined in Appendix 1 will be followed to decide whether the pupil requires an IHCP.

The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

6. Individual healthcare plans (IHCPs)

The headteacher has overall responsibility for the development of IHCPs for pupils with medical conditions.

The day-to-day responsibility has been delegated to Janice Murphy school DSL.

ICHP plans are reviewed termly, or earlier if there is evidence that the pupil's needs have changed.

IHCPs are developed (see appendix 3) with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all pupils with a medical condition will require an IHCP. It will be agreed with a healthcare professional and the parents/carers when an IHCP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents/carers and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHCPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has special educational needs (SEN) but does not have an EHC plan, the SEN will be mentioned in the IHCP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing board, Headteacher and DSL with responsibility for developing IHCPs will consider the following when deciding what information to record on IHCPs:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil'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, e.g. crowded corridors, travel time between lessons
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods, additional support in catching up with lessons, counselling sessions
- The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- Who in the school needs to be aware of the pupil's condition and the support required
- Arrangements for written permission from parents/carers and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil, during school hours
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments

- Where confidentiality issues are raised by the parent/carer or pupil, the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency, including who to contact and contingency arrangements

7. Managing medicines

Prescription and non-prescription medicines will only be administered at school:

- When it would be detrimental to the pupil's health or school attendance not to do so, **and**
- Where we have parents/carers' **written consent**

The person administering the medicine will keep a written record. Parents/carers will always be informed on the same day the medicine has been administered, or as soon as reasonably possible.

The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents/carers.

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a pupil any medication (for example, for pain relief) will first check recommended and maximum dosages for the pupil's age, and when the previous dosage was taken.

The school will only accept prescribed medicines that are:

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

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely- in the locked cabinet in the school medical room. Pupils will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils and not locked away.

Medicines will be returned to parents/carers to arrange for safe disposal when no longer required or out of date.

7.1 Controlled drugs

Controlled drugs are prescription medicines that are controlled under the Misuse of Drugs Regulations 2001 and subsequent amendments, such as morphine or methadone.

A pupil who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another pupil to use. All other controlled drugs are kept in a secure cupboard in the school medical room and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

7.2 Pupils managing their own needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents/carers and it will be reflected in their IHCPs.

Pupils will be allowed to carry their own medicines and relevant devices wherever possible.

IHCPs will include procedure for staff to follow if a pupil refuses to carry out a necessary procedure or take medicine.

7.3 Unacceptable practice

Although school staff will use their discretion and judge each case on its merits with reference to the pupil's IHCP, they will keep in mind that it is not generally acceptable practice to:

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every pupil with the same condition requires the same treatment
- Ignore the views of the pupil or their parents/carers
- Ignore medical evidence or opinion
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHCPs
- Send an ill pupil to the school medical room unaccompanied or with someone unsuitable (e.g. a fellow pupil who is not old or responsible enough)
- Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupil, including with toileting issues. No parent/carer should have to give up working because the school is failing to support their child's medical needs
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents/carers to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

8. Emergency procedures

All staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHCPs will clearly set out what constitutes an emergency and will explain what to do.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent/carer arrives, or accompany the pupil to hospital by ambulance.

9. Training

All Staff are responsible for supporting pupils with medical needs and will receive suitable and sufficient training to do so, as required.

The training will be identified during the development or review of IHCPs. Staff who need to provide support beyond the usual expectations to pupils with medical conditions will be included in IHCP meetings where this additional medical support is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with DSL who leads on IHCPs. Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
- Fulfil the requirements in the IHCPs
- Help staff to have an understanding of the specific medical conditions they are being asked to support with, their implications and preventative measures
- Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it – for example, with preventative and emergency measures so that they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

10. Record keeping

The governing board will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the Notre Dame High school. Parents/carers will be informed if their child has been unwell at school by the medical room staff.

IHCPs are stored on the school MIS system Brom Com which is a readily-accessible place that all staff in the school are aware of.

The school will:

- Enter each pupil's medicine need in the school's Brom com system in the health background section of the pupils dashboard profile
- Update our records when parents/carers of pupils inform us of changes to their child's needs
- Make sure that all staff have access to records so that they are informed about pupils' medical needs
- Securely hold this information digitally in accordance with the UK GDPR
- Inform parents/carers about how they can access their child's information (provided no relevant exemptions apply to their disclosure under the Data Protection Act 2018)

11. Liability and indemnity

The governing board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

The details of the school's insurance policy are:

The **RPA** Administrator **will** subject to the Definitions, Extensions, Exclusions and Conditions of the Rules **indemnify the Member**
1. for all sums that the Member shall become legally liable to pay for damages or compensation in respect of or arising out of Personal Injury occurring during the Membership Year within the Membership Year within the Territorial Limits in connection with the Business
2. against legal liability for claimant's costs and expenses in connection with clause 1 above
3. in respect of:
i) costs of legal representation at:
a) any coroner's inquest or inquiry in respect of any death
b) proceedings in any court arising out of any alleged breach of statutory duty which may be the subject of indemnity under this extension 15
ii) all other costs and expenses in relation to any matter which may form the subject of a claim for indemnity under clause 1 above
incurred with the prior written consent of the RPA Administrator.

Provided that the Member complies with the statutory guidance on supporting pupils at school with medical conditions, December 2015 or similar amending statutory guidance.

Notre Dame High school is a member of the DfE's risk protection arrangement (RPA).

12. Complaints

Parents/carers with a complaint about the school's actions in regard to their child's medical condition should discuss these directly with the Headteacher or DSL in the first instance. If the Headteacher or DSL cannot resolve the matter, they will direct parents/carers to the school's complaints procedure.

13. Monitoring arrangements

This policy will be monitored by the Headteacher and DSL.

It will be reviewed and approved by the governing board every year.

14. Managing Allergy Safety

- Notre Dame High school has a pupil allergy policy followed by all staff within the school

15. Links to other policies and Documentation:

- NDHS Behaviour for Learning Policy
- NDHS Health and Safety Policy
- NDHS Anti-bullying Policy
- NDHS Safeguarding Policy
- SJB CMAT Learning Beyond the Classroom (Offsite visits) policy
- SJB CMAT Allergy Safety Policy
- Norfolk Critical Incidents Guidelines

Appendix 1: Following a notification that a child has a medical condition:-

Medical Conditions Information Pathway

Action Form sent out by the school asking parents to identify any medical conditions. Form (see Appendix 2,3) to be sent out, depending on the school's usual procedures including: • Transition • At the start of the each new school year • New enrolment during the school year • New diagnosis informed by parents	School
↓	
School collates response and identifies those needing a Individual Health Care Plan (IHCP) and if required to link to EHC plan (If a child has SEN)	Parent/ School
↓	
Designated member of school staff writes to parents either to review IHCP or start new Plan if needed	School
↓	
Parents complete IHCP and return it to the school. If no response this is documented DSL organises a meeting as required to discuss and agree on the needs for IHCP this will include key school staff, child, parent and relevant health care professional if required or consider written evidence provided by them	Parents/school
↓	
IHCP implemented, placed on the child's bromo com page and circulated to all relevant staff Designated member of staff (DSL) commissions delivery of staff training to meet IHCP needs if required All health care plans stored in school MIS – Brom com system according to policy	School
↓	
IHCP is reviewed termly or when a condition changes. Parent or designated professional to initiate	Parent/School

NOTE

Pupils with medical conditions requiring IHCP are: Diabetes, epilepsy with rescue medication, anaphylaxis, gastronomy feeds, central line or other long term venous access, Tracheotomy, severe asthma that has required a hospital admission within the last 12months, and others.

Appendix 2: Template of Letter from Designated staff to all parents regarding IHCP

Dear Parent/Carer

Re: Individual Health Care Plans

As you are aware, the Department for Education requires that pupils with Complex medical needs or are prescribed medication for an on-going period of time have an Individual Health Care Plan (IHCP) which is reviewed annually. This School uses an IHCP for children with complex health needs to record important details about the individual children's medical needs at school, their triggers, signs, symptoms, medication and other treatments. Examples of complex health needs which may generate an Individual Health Plan following discussion with the designated member of staff in the school:

Diabetes
Gastronomy feeds
A tracheostomy
Anaphylaxis
A central line or other long term venous access
Severe asthma that has required a hospital admission within the last 12 months
Epilepsy with rescue medication.

Individual Health Care Plans are uploaded to MCAS .

The Policy can be found on the schools website , Supporting pupils at school with medical conditions.

If your child currently has an IHCP I would be grateful if you would read through the Policy, and let me know, by email to jmurphy@ndhs.org.uk confirming either that the details on your child's MCAS are correct or that alterations are required, or it is no longer necessary, in which case please provide the details to be amended. The IHCP will be updated accordingly. To ensure our records are current, please reply in either case.

It is essential we have up-to-date and accurate information to ensure everything is in place to support your child's health and well-being whilst they are in school. Any relevant hospital/clinic letters, or information regarding changes to medication would be appreciated. If your child has an NHS Health Care Plan, completed by healthcare professionals, we would be grateful to have a copy of the most recent document and to receive up-dated versions following annual reviews

Yours Sincerely

Janice Murphy
Designated Safeguarding Lead
Student Support Manager
(jmurphy@ndhs.org.uk) 01603 611431 x 1029

Appendix 3: **Template of Individual Health Care Plan Form**

Strictly Confidential

Individual Health Care Plan

Child's Name			
Year Group		Date of Birth	
Child's address			
Medical Diagnosis			
Date of Care Plan		Review Date	

Family Contact Information

	Priority 1	Priority 2
Name		
Relationship to child		
Mobile phone		
Home phone		
Work phone		
Further contact instructions:		

Medical Contact Information

	Clinic / Hospital	GP
Name		
Telephone		

Staff Responsibilities

Key Worker(s)	Student and Pastoral Support Assistant, PSW, Head of Year
Staff Training	
Care Plan Developed by	Janice Murphy in liaison with parents/carers

Name of Medication	
Dose	
When to be administered	

Side effects / Contra-indications	
Administration Details	

Medication Details

Description of medical needs including child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues, etc.
Daily care requirements
Specific support for the pupil's educational, social and emotional needs
Arrangements for school visits/trips etc.
To be risk assessed by visit/trip leader.
Emergency details (what constitutes and emergency and action to be taken)
Normal emergency procedures.
Who is responsible in an emergency
Trip leader and member of first aid team accompanying any visit/trip. Normal emergency contact details.
Additional Information
SEN information

Parent/carer signature:			
Print name:		Date:	
Student Support Manager:		Date:	

Appendix 4: **Template of Parental consent form for administration of medicine**

Parental Consent Form for Administration of Medicine

This form must be completed **in full** and **signed.** The completion of this form does not act as a guarantee that the school will administer medication and the school may refuse to administer medication at any time. Any medication to be administered **must have been administered previously by the parent** to minimise the risk of adverse or allergic reaction to any new medication. All medication must be stored its original container and be clearly labelled with the child's name. Please refer to the Administration of Medication policy for more information.

Name of Child:	
Date of Birth:	
Form:	
Medical Condition / Illness:	
Name of Medicine: (as described on container):	
Is the medicine prescribed?	Yes / No
Is the medicine to be self-administered?	Yes / No
Will the student keep the medicine with them?	Yes / No
Dosage and method:	
Timing(s):	
Duration of course:	
Special Precautions:	
Are the any side effects that you know of?	
Procedures to take in an emergency:	
EMERGENCY CONTACT	
Name:	
Telephone Number:	
Relationship to Child:	
SIGNATURE:	
PRINT NAME:	
DATE:	

FOR OFFICE USE ONLY:

Storage location:	Medicine Cupboard		Fridge		With student		Student Reception	

Record of Administered Medication

Date	Time	Name of medicine	Dose given	Any reactions	Administered by

Appendix 5: Template of Form for visits and journeys:

Emergency contact name:		Relationship to child:	
Home phone:		Mobile phone:	
Does your child suffer from any illness or physical disability?			
How will this affect their involvement in this trip?			
What treatment or medication will they require during the trip? (please include dosage, timings and/or circumstances to administer)			
Is your child allergic to any medication?			
Has your child received a tetanus injection in the last 5 years?	Yes / No		
I give consent for my child to take part in the above activity as described, including all organised activities. I undertake to inform the visit organiser of any relevant changes in medical circumstances. I hereby authorise any accompanying member of school staff to administer the above medication or to give consent to such medical treatment as is considered necessary by a qualified medical practitioner during the visit.			
Parent/carer signature:			
Print name:		Date:	