



# Arrangements for supporting pupils with medical conditions

## WHY?

George Betts Primary Academy recognises that the health and safety of employees, pupils and visitors is paramount to the wellbeing and success of the organisation. This document describes the procedures and arrangements that enable us to support pupils with medical conditions. Such support ensures that children with medical conditions have full access to education, including school trips and physical education.

The following principles and values underpin these arrangements:

- Children with medical conditions must be able to access and enjoy the same opportunities as any other child, this will require flexibility, understanding and compassion.
- The academy, parents, pupil, healthcare professionals and other support services must work in partnership.
- Focus must be on the needs of the *individual* child and how their medical condition impacts on *their* school life.
- Re-integration, where needed, must be well-planned and meet individual pupil's needs.
- Sharing of information must be suitable and sufficient to support the child but with due regard for confidentiality and discretion.
- Schools have a duty to promote and enable self-care and increased independence as appropriate to a child's age.

## WHAT? HOW?

The Pupil Medical Co-ordinator at George Betts Primary manages pupil's medical needs and liaises with the SENDCo and SLT if there is a concern that the medical need could impact on the pupils learning.

Step 1 – **Assessing need** - When an existing pupil shows signs of or is diagnosed with a medical condition, or a child with a medical condition joins the school, the child's needs are identified, the Coordinator holds a meeting with the pupil's parent/s, and pupil if appropriate, to gather information to determine what provision is needed.

Step 2- **Information sharing**; The Pupil Medical Co-ordinator shares the Medical needs of the individual with class teachers and any other relevant adults (e.g. school cook, LSPs, PE coach). All of this information is uploaded to the pupil's individual profile on ScholarPack under the Medical details headings:

- o **Condition** – name or description of medical condition and triggers if appropriate
- o **Emergency Action** – how staff must respond in an emergency
- o **Notes** – controls in place to reduce the risk of illness and/or support the pupil's medical needs
- o **Medicine held** – states whether medicine is held in school

If there is deemed to be a critical medical condition, the key information is in a red bold font to stand out on the pupils profile (scholar pack).

Step 3- **Additional support**- Based on the medical information shared in the initial parent meeting, the Medical Coordinator will gain parents permission to make the necessary referrals to outside agencies such as the School Nurse.

Step 4- **Health Care Plan**- If an outside agency feel that a Health Care Plan is required, they will complete this with the parents and pupil off site/over the phone. Parents are then required to attend the medical practice to sign the Health Care Plan. A copy is then forwarded to the school to put into practise. All paper Health Care Plans are centrally stored and all information is uploaded to Scholar pack.

Step 5 – **Implementation**; in order for the actions agreed on a Health Care Plan the Pupil Medical Co-ordinator ensures that the following are in place; staff training, support equipment, appropriate timetables and routines, medication and cover arrangements for staff absence.

Step 6 – **Review**; Health care Plans are reviewed on an annual basis unless additional information is shared throughout the year. The outside agencies provide copies of all Health Care Plans to school in a sealed envelope, school then ask parents to edit and sign the plan which are later collected by the agency. Over the Summer Holidays, any changes are made by the outside agency and a new Copy is sent to school and parents.

## Education, Health and Care Plans (EHC Plan)

Pupil's medical needs, which **routinely impact on learning and meet the EHCP criteria**, are recorded on a formal EHC Plan and managed by the SEND Leader at each school.

## Administering Medication in School

Pupil medication is only stored and administered in school if prescribed for the child by a doctor and after parents have provided written instructions for use on the school's **Medication Agreement** form. A member of the Senior Leadership Team (Principal, VP or AP) will identify who is best placed to administer the medication (this is usually an LSP) and seek their co-operation, before counter-signing the agreement. Staff members will not be adversely treated if they do not wish to be the named person for administering a child's medication. Medication, labelled with the child's



name, is stored in a labelled box, or in the fridge, in the main school office. Each time medication is administered, the date, time and dosage is logged by the person who gave the medication, on the child's **Medicine Administration Log**. Parents are informed immediately if emergency medication is given.

Training is provided where necessary either by the School Health Nurse or the child's parents.

If non-prescribed medication is needed during the school day, parents are requested to attend school to administer it.

### **Non-routine Activities**

Risk Assessments for non-routine activities (such as educational visits, sporting activities and events in school) give details of the individual medical needs of children and adults taking part. Where **medication** will need to be administered to pupils, written instructions and agreement are obtained from parents prior to the event (see Administering Medication in School, above). **First Aid kits** are carried on all offsite visits. When a visit involves a journey outside the local area a '**Sick Kit**' is taken, which includes; bucket, plastic bags, protective gloves, paper towels and a bottle of water.

### **Staff Training**

Training is essential to ensure that staff have the competence and confidence to support pupils' medical needs. Generic training is provided annually for all staff on the most common medical conditions in schools; asthma, epilepsy and allergic reactions/anaphylaxis. Specific training is also provided where necessary to meet the requirements of Health Care Plans, based on guidance from healthcare professionals (who may also deliver the training).

The Executive Principal/H&S Leader monitor and review training needs to ensure that suitable and sufficient training is delivered to support and enable staff in carrying out their duties. All new staff receive induction training which includes reference to these arrangements.

### **Unacceptable Practice**

Academy staff use their discretion and make support decisions based on individual needs, recommendations in IHPs and individual circumstances. However, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary
- assume that every child with the same condition requires the same treatment
- ignore the views of the child or their parents; or ignore medical evidence or opinion, (although this may be challenged)
- send children with medical conditions home frequently or prevent them from staying for normal academy activities, including lunch, unless this is specified in their individual healthcare plans;
- if the child becomes ill, send them to the academy office or medical room unaccompanied or with someone unsuitable
- penalise children for their attendance record if their absences are related to their medical condition eg 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, or otherwise make them feel obliged, to attend academy to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the academy is failing to support their child's medical needs
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of academy life, including academy trips, eg by requiring parents to accompany the child.

## **WHO?**

### **Roles and Responsibilities**

#### **Local Governing Body**

*Ensure arrangements are in place and fully implemented*

**Executive Principal** – Allan Shephard, supported by **H&S Leaders** – Nikki Rolfe & Louise Carroll (Vice Principals)

*Ensure arrangements are in place and fully implemented, overall responsibility for Health Care Plans including deciding whether a plan is appropriate and necessary if other parties cannot agree.*

**Pupil Medical Co-ordinator** – Zoe White

*Liaise with all relevant parties to ensure pupils with medical needs are implemented and adhered to.*

**SEND Leader** – Whitney Plant

*Ensure Health Care Plans are referred to in EHCPs for pupils with both SEN and medical needs*

#### **All academy staff**

*Understand the following medical conditions which may affect pupils; asthma, epilepsy, allergic reactions/anaphylaxis. Staff may be asked to support individual pupils with a medical condition in a variety of ways according to Health Care Plans, staff may be asked (but not required) to administer medication to pupils.*

#### **External Parties**

#### **Pupils with Medical Conditions**

Fiona Wilkes 2014

Reviewed July 2018 (N Rolfe)

Reviewed June 2019 (W Plant and Z White)



Where appropriate pupils are involved in writing and reviewing their Health Care Plans. Pupils are expected to take increasing responsibility for self-managing managing their condition as appropriate to their age.

**Parents of pupils with medical conditions**

*Provide up to date information on their child's condition.  
Attend appointments with medical outside agencies.  
Sign Health Care Plans  
Review annually*

**Sandwell School Health Nursing Service – 0121 612 2974**

*Notify the academy of any newly diagnosed medical conditions or changes to existing conditions. Offer advice and training, write and review Health Care Plans.*

**GPs and Paediatricians**

*Notify the academy of any newly diagnosed medical conditions or changes to existing conditions. Offer advice and training, contribute to writing and reviewing Health Care Plans with the school nurse.*

**Sandwell Local Authority**

*Offer advice in supporting pupils with medical conditions. Arrange alternative provision if a child is out of school for 15 or more days due to a medical condition.*

[Sandwell LA - Managing medical needs in school 2016-2019](#)

[Supporting Pupils with Medical Needs](#), TEFAT, July 2014 (Includes specific guidance on supporting pupils with

Asthma, Epilepsy and Anaphylaxis)

GB/SHP SEND Policies (available on school websites)

GB/SHP Medication Agreement Form (Google Docs)

GBSHP Medicine Administration Log (Google Docs)

