

Somerset Nursery School and Children's Centre

Policy for Medication and for Supporting Children with Medical Conditions

Policy Updated.....January 2017

Read by Staff.....

Read by Governors.....

Due to be Reviewed.....January 2019.....

Policy statement

Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained schools, to make arrangements for supporting pupils at their school with medical conditions.

The governing body will ensure that all pupils with medical conditions in our school are supported to enable them to have full access to all aspects of the education provided and the same opportunities as other pupils, including access to school trips.

All pupils with medical conditions, in terms of either physical or mental health, will be properly supported so that they can play a full and active role at school, remain healthy and achieve their academic potential.

The school will consult and work in partnership with health and social care professionals, pupils and parents to ensure the needs of pupils with medical conditions are effectively met.

The school will ensure that there is a focus on the needs of each individual pupil and how their medical condition impacts on their school life.

The school will ensure staff are provided with appropriate training to provide whatever support pupils require, including training in what to do in an emergency.

All staff have a clear understanding that medical conditions should not be a barrier to learning and that they have a duty of care to pupils.

The named person with overall responsibility for pupils with medical needs is the Special Needs Coordinator, Sam Steward.

The designated lead for medication is the Headteacher.

Introduction

Parents* of children with medical conditions are often concerned that their child's health will deteriorate or not be effectively managed when they attend school. This is because pupils with long-term and complex medical conditions may require on-going support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. It is therefore important that parents feel confident that the school will provide effective support for their child's medical condition and that the children feel safe.

In addition to the educational impacts, there are social and emotional implications associated with medical conditions. Children may be self-conscious about their condition and some may be bullied or develop emotional disorders such as anxiety or depression around their medical condition.

Long-term absences due to health problems affect children's educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health. Reintegration back into school should be properly supported so that children with medical conditions fully engage with learning and do not fall behind when they are unable to attend. Short-term and frequent absences, including those for appointments connected with a pupil's medical condition (which can often be lengthy), also need to be effectively managed and appropriate support put in place to limit the impact on the child's educational attainment and emotional and general wellbeing.

Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case the governing body must comply with their duties under that Act.

Some children may have special educational needs (SEN) and a statement or Education, Health and Care (EHC) plan which brings together health and social care needs as well as their special education provision.

* The term 'parent' implies any person or body with parental responsibility such as foster parent, carer, guardian or local authority.

Children with long-term medical conditions

When a long-term medical condition is identified, the Special Needs Coordinator will ensure that all staff are informed about the specific needs of the child.

The key worker and the SEN coordinator will work together with other professionals and with the child's parents to draw up an EHC (Education, Health and Care) Plan which will include an IHP (Individual Healthcare Plan).

Individual Healthcare Plans will include the following information:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication (its side-effects and its storage) and other treatments, dose, time, facilities, equipment, testing, dietary requirements and environmental issues eg crowded areas, safety issues.
- Specific support for the pupil's educational, social and emotional needs.
- Who will provide this support, their training needs and cover arrangements in their absence
- Who in the school needs to be aware of the child's condition and the support required
- Written permission for medication to be administered by a member of staff.
- Separate arrangements or procedures required for school trips or other school activities that will ensure the child can participate.
- Where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition
- What to do in an emergency, including who to contact, and contingency arrangements

All Healthcare Plans will be reviewed annually as a minimum.

Roles and Responsibilities

The **Governors** will ensure that arrangements are in place to support pupils with medical conditions and that they are enabled to access the fullest possible participation in all aspects of school life. Governors will ensure all staff have received the appropriate level of training and are competent to support pupils. Governors will receive annual updates as to the effective working of the policy, will review this carefully and ensure implementation of any changes or recommendations arising from the review.

The Governors will ensure that this policy is reviewed every 2 years.

The **Headteacher and the Deputy Headteacher** (who is also the Special Needs Coordinator) have lead responsibility for the implementation and review of the policy and will ensure that

- the school is inclusive and welcoming
- the policy is in line with national guidance and expectations, is put into action and maintained
- liaise with other interested and relevant parties (including parents and pupils, school health, community and acute health services, the local authority services etc)
- ensure information help by the school is accurate and up to date and good communication and information sharing systems are in place
- ensure pupil confidentiality is respected
- assess the training and development needs of staff and arrange for them to be met
- ensure all staff are aware of the policy, including supply teachers and new staff
- delegate tasks appropriately to named members of staff
- monitor and review the policy every 2 years, with input from pupils, parents, staff and external stakeholders and update it as and when necessary
- report back to governors and to all key stakeholders about the implementation of the medical conditions policy.

All staff at the school have a responsibility to

- be aware of and understand the school's medical conditions policy
- be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency
- know which pupils in their care have a medical condition and be familiar with the content of the pupil's Healthcare Plan
- arrange for all pupils to be provided with their emergency medication when necessary
- maintain effective communication with parents including informing them if their child has been unwell at school
- ensure pupils' essential medication is available for them when they go on a school visit or out of the classroom
- be aware of pupils with medical conditions who may be experiencing bullying or need extra social support
- ensure all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in, and understand the impact a medical condition may have on a pupil and make any reasonable adjustments to accommodate this .
- be aware that medical conditions can affect a pupil's learning and provide extra help when it is needed
- use opportunities to raise pupil awareness about medical conditions

specific responsibilities of key staff

- the **special educational needs co-ordinator** for the school will keep an overview of any pupils whose medical needs impact on their learning, will advise staff working directly with them and ensure appropriate strategies are put in place to support them
- **staff with first aid training** will give immediate help to casualties with common injuries or illnesses and those arising from specific hazards with the school and when necessary ensure that an ambulance or other professional medical help is called.
- **designated lead for medication** (the Headteacher), will ensure all medication is correctly stored and labelled, regularly reviewed, in date and that parents provide new medication as needed.

Procedure for administering medication to children

The Designated Lead for Medication is the Headteacher.

Medication will only be administered to children at the request of parents/ carers. If a parent/carer requests that we administer medication to a child:

- The Headteacher (or in her absence the Deputy Headteacher) will make the decision on whether the medication will be administered by the school. She will then:
 - a) ensure that sufficient information about the medical condition of the child has been noted
 - b) ensure that the medicine has been prescribed by a doctor or dentist. Rarely, non-prescription medicines may be administered but only if the Headteacher or Deputy is sure that there is a health reason to do so, They may seek further advice before agreeing, and will ask for prior written consent from the parent/carer.
- No child will be given any medicine containing aspirin unless prescribed by a doctor.
- If the administration of prescription medication requires technical or medical knowledge, then individual training will be provided for staff from a qualified health professional.
- Medicines will be stored in a locked medicines cabinet (located in the children's toilet area in the Nursery or in the Family Room), strictly in accordance with product information and in their original containers. Medicines requiring cool storage will be stored in the small fridge located in the utility room within the Nursery. Medicines should not be stored with food.
- The Headteacher (or in her absence the Deputy Headteacher), will counter-sign the "Request for Administration of Medication" form completed by the parent/carer following a discussion to clarify the administration detail.
- We will keep written records of all medicines administered to children (the quantity, time, date and who administered the medication), and inform parents.
- No member of staff will accept medication from a parent or carer unless this procedure has been followed.

- All parents or carers are asked to give permission for sun protection cream to be applied as necessary.

Criteria for monitoring

Are parents and staff satisfied that children with medical needs are well supported?

Have there been any incidents to arouse concern since this policy was last updated? E.g:

- Any medication lost or not available when needed
- Any accidents involving medication
- Documentation not in place or not accessible
- The wrong medication administered

Have parents/carers been satisfied with our arrangements?

Are records being kept as stated?

Is there any new guidance that we should take into account?

Are all the staff aware of their responsibilities?

Is the policy clear and concise? Does the format need to be changed?