

SUPPORTING CHILDREN WITH MEDICAL NEEDS

PHASE	JUNIOR & SECONDARY
POLICY LEAD	CHERYL BARQUERO (ACET LEAD ON SAFEGUARDING)
DATE OF APPROVAL BY TRUSTEES	JULY 2021
DATE OF RECEIPT BY LOCAL GOVERNING BODY	JULY 2021
FREQUENCY DATE	ANNUALLY
NEXT REVIEW DATE	JULY 2022

<u>Introduction</u>

This policy has been developed by the academy's Local Governing Body and reflects guidance produced by the 'Supporting Pupils at School with Medical Needs, December 2015 (updated August 2017) (DfE). This guidance is issued under Section 100 of the Children and Families Act 2014.

This policy sets out how the Academy intends to manage the arrangements for supporting children with medical needs. Some children with medical needs are able to attend the academy regularly and, with support from the academy, take part in most routine activities, whilst others with more significant medical needs require an Individual Health Care Plan (IHCP) to be drawn up. The policy also provides information on the administration of medicines in schools.

ACET Mission Statement

ACET is committed to providing quality learning and teaching enabling everyone to reach their full potential, whatever their age, ability, gender or ethnicity.

Every person in our community is unique. We work together in an environment of mutual respect, and consideration, valuing everyone's contribution.

Through our partnership with the local and wider community, we aim to support our young people in successfully taking their place in society.

Academy Responsibility

- 1. The Principal accepts responsibility, in principle, for Academy staff administering or supervising the taking of prescribed medication or medical care during the Academy day. The acceptance of responsibility may depend, however, upon the nature of any individual needs.
- 2. Where the Principal decides that he/she cannot meet the medical needs in individual cases, this decision will be notified to parents/carers promptly.
- 3. The Principal will seek staff volunteers for first aid training to administer medicine. However, teachers' conditions of service do not allow for Principals to require teachers to give medications or supervise the taking of medicine.
- 4. Provided that current procedures are followed, staff will normally be fully covered by their employer's public liability insurance in the event of a claim. If legal action over an allegation of negligence were pursued, the employer rather than the employee is likely to be held responsible.
- 5. The designated member of staff with key responsibility for medicines/medical care is the SENDCo, working closely with other staff. They will oversee the initiation of Individual Health Care Plans where this is recommended by a Health Professional and arrange for staff training as necessary. They will oversee liaison with Health Professionals. This liaison will be carried out on a day to day basis by Lead First Aid staff. Any arrangements for children with medical

- needs participating in off-site school activities will also be overseen by the SENDCo and Lead Trip staff with support from Lead First Aid staff and a risk assessment will be put in place.
- 6. A signed and dated parent/carer agreement concerning the administration of medicines will be received by a member of the Lead First Aid team who will keep a record of medicines administered and will ensure medicines are stored appropriately and securely. A register of all students at the Academy who have significant medical needs, as identified through an Individual Health Care Plan, will be maintained. They will inform parents/carers if any expired/unwanted medicine has been left in school and requires collection.
- 7. Where a professional advises that an Individual Health Care Plan is required and it has been completed for a child with significant medical needs, it will be, for reasons of confidentiality kept in the staffroom or academy office (primary phase) and secure staff Intranet (secondary phase), to enable all staff to have access to this information.
- 8. Where children need to carry their own medicine, they should <u>never</u> give their medicine to other children.
- 9. In some circumstances which may require immediate administration of medicines, those staff who have volunteered will receive training, e.g. severe allergic reaction may require EpiPen training.
- 10. Ordinarily, all medicines will be stored and locked in a cupboard in the first aid room/reception excluding those requiring refrigerated storage.
- 11. Where a child's medical needs require the appointment of care workers, this arrangement is likely to come under the direction of the Special Educational Needs Co-ordinator and be reviewed in line with statutory processes.
- 12. Any student under 16 years will not knowingly be given medication containing Aspirin unless it is prescribed by a doctor or requested by parents, as it may cause severe illness in young people.

The Responsibility of Parents/Carers

- 13. Whilst we encourage regular school attendance, children who are acutely unwell should not be sent to the Academy.
- 14. Parent/carers should try to ensure that their child's medication is taken out of academy hours wherever possible.
- 15. Where children are required to take medicines during academy time, parents/carers are required to complete a written agreement which provides details of the medication including dose and frequency as outlined in the *Policy on Medicines in the Academy*.
- 16. If parent/carers are required to, or prefer to administer medication themselves to their children during academy time, they should discuss this with the appropriate academy staff.

- 17. Parents/carers should ensure that they provide the academy with emergency contact(s) where they, or a nominated person can be contacted should their child become ill.
- 18. Parents/carers should regularly check the expiry date of medicines; the responsibility for collecting expired or unwanted medicines lies with the parent/carer. Lead First Aid staff will periodically check medicines held at the academy parents/carers will be contacted and they should make arrangements to collect and dispose of such medicines.
- 19. Where a child has a significant medical need and health professionals advise that any Individual Health Care Plan is required, parents/carers will be expected to fully participate in providing accurate information in relation to the medical condition, agreeing and signing the plan for their child.
- 20. Parents/carers should inform the academy as soon as possible of any changes in their child's condition or treatment.
- 21. Whilst we will endeavour to maintain confidentiality, in some cases in the interests of the child's safety, information about their condition and treatment will be made available to staff in areas where students do not normally have access. In these cases, the permission of the parent/carers and students will be sought.

The Responsibilities of the Child

- 22. Whilst we encourage regular academy attendance, children who feel very unwell before leaving home in the morning should ensure that they tell their parent/carer, who can then decide whether they are well enough to attend the academy.
- 23. Prescribed medicine should be taken out of academy hours if possible. However, if with their parent/carer's permission they need to bring medicine into the academy, this should be accompanied by a note from home, which should be handed in to the Lead First Aid staff and then followed up by a signed agreement.
- 24. <u>All</u> medicine (except that which may be required to be taken in an emergency, for example, inhalers) needs to be handed in to First Aid staff who will supervise the taking of it. Children should <u>never</u> give their medicine to anyone else.
- 25. Where a child of sufficient understanding has a significant medical need which requires an Individual Health Care Plan, the child will be invited to participate in drawing up and agreeing the plan.
- 26. Whilst the academy will try to maintain confidentiality, in the interests of safety, some medical information relating to their condition and treatment may be required to be made available to staff at the academy. This will be discussed when drawing up the Individual Health Care Plan.
- 27. Children should take care in carrying medicines to and from the academy. They should never give their medicine to other children.

The Academy's Emergency Procedures

- 28. Where it is clear that a child requires urgent medical attention, an ambulance will be called.
- 29. The caller will try to provide details of the child's known condition and symptoms. Where possible, they will give the name and date of birth of the child, etc.
- 30. Where urgent medication is required, eg EpiPen, trained academy staff will endeavour to administer the medication and call for an ambulance simultaneously.
- 31. The caller will give their name and provide details of the academy's location to aid the Ambulance Service.
- 32. Parents/carers will be contacted as soon as possible where emergencies arise.
- 33. A child taken to hospital by ambulance will be accompanied by a member of staff who should remain until the parents/carers arrive.

Children Unable to Attend the Academy Because of Medical Needs

- 34. The designated member of staff with responsibility for these students is the SENDCo. They are responsible for notifying the LA/EWO if a student is, or is likely to be, away from the academy due to medical needs for more than 15 working days.
- 35. The academy will follow the Local Authority's processes in referring children to appropriate support and services if a child is unable to attend the academy for a continuous period of 15 days or more. The academy will supply the appropriate education provider with information about a student's capabilities, educational progress, and programmes of work.
- 36. The academy will be active in the monitoring of progress and in the reintegration into the academy, liaising with other agencies, as necessary.
- 37. The academy will ensure that children who are unable to attend the academy because of medical needs are kept informed about the academy social events, are able to participate, for example, in extended learning tasks, clubs, study support and any other activities.
- 38. Appropriate academy staff will encourage and facilitate liaison with peers, for example, through visits and other means.

Training

- 39. Staff who volunteer to administer medication will receive training by a suitably qualified medical professional.
- 40. Request for school training will be arranged through liaison with Health and other associated professionals.
- 41. A record of who delivered the training and who received the training will be kept by the academy. A date for review of further training will be agreed at the first training session.

42. If a serious medical incident occurs in school, a debriefing session will be arranged in the academy.

Record Keeping

- 43. The academy will keep records of the following:
 - a) Medication administered or supervised;
 - b) Individual Health Care Plans;
 - c) Written notification from parents/carers giving consent regarding medication issued;
 - d) Training records;

All records will be transferred with the child to any other educational provision;

Secondary academies will retain these records for Y11 leavers until they reach the age of 25.

Confidentiality

- 44. Whilst the academy will endeavour to maintain confidentiality, in the interests of safety some medical information relating to the child's condition and treatment may be required to be made available to staff at the academy. This will be discussed at the meeting to arrange an Individual Health Care Plan.
- 45. Sometimes it will be appropriate for a photograph to be kept with the child's Individual Health Care Plan. These will be displayed in areas where children have restricted access, eg staff intranet. This will be discussed with parents/carers and children as appropriate.

Monitoring and Reviewing the Policy

46. The Local Governing Body will receive an annual report on the implementation and monitoring of the policy.

Reviewed annually.