



Policy Number: CRA-AP-007
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SUPPORTING CHILDREN WITH MEDICAL NEEDS IN SCHOOL

Current Status:
FINAL

Ratified
Ratified

Compliance:

**All members of Chandlers Ridge Academy staff will follow Academy policies.
The consequences of non-compliance may include disciplinary or legal action.**



Document Control

Application	This policy pertains to all activities undertaken by all staff at Chandlers Ridge Academy
Associated policy reference and title	Safeguarding SEN
Replacing	Administration of medicines 2013
Policy Lead	Alison Dixon
Members of working party	Louise Lidgard, Head Teacher, Curriculum & Achievement Sub Committee
This policy has been ratified by:	Curriculum & Achievement Sub Committee
Date	9 th February 2017

Consultation Audit Trail

Name	Role	Version	Date
Louise Lidgard	Assurance	V0.2	November 2016
Directors	Approval	V0.2	12/1/17

Change Log

Summarise the major changes between versions below

Pg/Section	Change	Version	Date
6	Insert about temporary administration of medicines	V0.2	Nov 2016
	Change of name to supporting children with medical needs.	V0.2	Nov 2016



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POLICY FOR SUPPORTING CHILDREN WITH MEDICAL NEEDS IN SCHOOL

1. Introduction

1. Most pupils at some time have a medical condition, which could affect their participation in school activities. This may be a short term situation or a long term medical condition which, if not properly managed, could limit their access to education. Individual schools are required to develop their own Health and Safety Policies to cover a wide variety of issues and it is suggested that in a similar way schools should develop policies and procedures for supporting pupils with medical needs, including the safe management of medication.
2. **Teachers are not required to administer medication or to support pupils with medical needs as part of their employment contract but they may volunteer to do so.**
3. **In some cases, the contracts for non-teaching staff or special support assistants may include references to administration of medication and/or the undertaking of medical procedures. Such contracts will of course be agreed on an individual basis.**
4. We are aware of the wider context created by the extension of the requirements of the Disability Discrimination Act 1995 to the field of education in general and the SEN and Disability Code of Practice 2015. We have therefore developed this policy and applied the relevant procedures to ensure we are a fully **inclusive** school.
5. **This policy does not replace the protocol and procedures already in place in school for emergency situations. Failure to act in an emergency situation could result in a teacher or other member of school staff being found in breach of the statutory duty of care.**
6. Legislation from which guidance is issued under- **Section 100 Children and Families Act 2014.**

2. Scope of Policy and Objectives

1. Chandlers Ridge Academy provide a fully inclusive educational and pastoral system. To do this we need to ensure that correct procedures and protocols are in place to enable any pupil with a long-term medical condition to be able to attend school or have minimum disruption to their education.
 - a. To ensure as little disruption to our pupils and other pupils education as possible.
 - b. To develop staff knowledge and training in all areas necessary for our children.
 - c. To ensure we develop links with outside agency support systems including hospital, teachers and specific support groups.
 - d. To ensure safe storage and administration of agreed medication.
 - e. To provide a fully inclusive school.



2. This policy relates to pupils who have a recognised medical condition, which will last longer than 15 days and will require the pupil to have a care plan protocol in school. In such cases the suggested protocol would generally be adopted in school with the parents' consent. Occasionally a National Health Service Plan may be used.
3. This policy is also for those children who need temporary use of prescribed medicines with the consent of parents, for example, antibiotics which are needed four times a day.

3. Responsibilities

1. **BoD:** The BoD has overall responsibility to ensure that policies and procedures are in place for the processes associated with the Chandlers Ridge Academy.
2. **Head Teacher:** The Head Teacher has responsibility to ensure that operational services are suitably established to provide the processes associated with the Chandlers Ridge Academy to ensure that all staff and volunteers understand and comply with the service provision.
3. **Senior Leadership Team:** Each Senior Leader is responsible for ensuring that the policies and procedures are adhered to within their area of accountability.
4. **Teachers:** Each Teacher is responsible for ensuring that the policies and procedures are adhered to within their area of accountability.
5. **All Staff and volunteer helpers:** All staff and volunteer helpers within the scope of the policies and procedures are responsible for the implementation of the policy within their own area of accountability

4. Identification

1. We will work with parents and medical professionals to ensure we have specific protocols in place as soon as the child starts school. This may take the form of information sharing, developing specific care plans, organising training, employing new staff or reorganising classroom facilities.
2. We will also regularly send out medical questionnaires to parents to ensure all our records are up to date.

5. Provision and organisation

1. The school will follow the guidance given by the medical authorities regarding supporting pupils with medical needs in school. This policy will provide a management strategy to fully support the needs of all staff, pupils and parents.



2. Training regarding specific conditions will be delivered as required. This is usually within the first term of a new pupil beginning school but if necessary before they are admitted to Chandlers Ridge Academy.
3. General training on awareness of medical conditions and their possible medication implications will occur as necessary. This will run in parallel with school's first aid training, which will continue under the Health and Safety Policy.
4. The school nurse also offers support for school.
5. Pupils requiring continuous support for a medical condition will be given an 'Individual Health Care Plan' (IHCP).
6. Pupils requiring continuous support for Asthma will have an 'Asthma plan' in school and pupils with a life threatening allergy will have an 'Allergy care plan'.

6. Administration of medicines

1. At times there will be the need to administer medicines temporarily without the need for an IHCP. This will include antibiotics and pain relieving medicine. Medicines will only be administered at the discretion of the Head Teacher and when it would be detrimental to a child's health or school attendance not to do so.
2. Parents need to bring medicine in the original container labelled with the child's name and pharmacy label on with the instructions for administration and dosage and storage and parents must give consent. This should be a medicine which is needed at least four times a day. All medicines will be stored securely. The signed forms will be kept in the filing cabinet in the office.
3. Children should not be sent to school if they are ill.

7. Individual health care plan (IHCP)

1. The main purpose of an IHCP is to identify the level of support that is needed at school for an individual child.
2. The IHCP clarifies for staff, parents/carers and the child the help the school/centre can provide and receive.
3. These plans will be reviewed annually as a minimum, or more frequently at the request of parents/carers or the school, or as required.
4. An IHCP will include:
 - a. Details of the child's condition and what the medication is, dosage and timing if appropriate.
 - b. What constitutes an emergency.



- c. What action to take in an emergency.
 - d. What not to do in the event of an emergency.
 - e. Who to contact in an emergency.
 - f. The role and names of staff who volunteer to administer medicines.
 - g. The date of the training that the member of staff completed.
 - h. Special requirements e.g. dietary needs, pre-activity precautions.
 - i. Side effects of medicines.
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5. A copy of an IHCP will be given to parents/carers and be accessible by class teachers/childcare practitioners.
 6. An asthma plan will be completed by parents of children with Asthma. An allergy care plan will be completed by parents for children who have an allergy.
 7. Copies of all medical plans will be retained in yellow year group medical folders. These are stored in the medical information filing system in the school office and are easily accessible to all staff.
 8. The general medical information sheet accessible by all staff will also indicate that the child has an IHCP, Asthma, Allergy care plan or other identified medical need.
 9. Information about these pupils is also available on the Medical notice board in the form of a photograph and information (in the school office), in a Medical Needs folder kept on the staffroom notice board and on SIMs.
 10. All trained staff will ensure they are aware of the protocols and procedures for specific pupils in school through attending training provided and reading care plans devised for individual pupils.
 11. Children identified with a need to take regular medication (identified in their IHCP) will be kept in pupil Medical files kept in the year group filing system in the school office.
 12. These folders have the pupils name and photograph on the front and are used to keep a record of the administration of their medication on a day to day basis.
 13. Pupils will not be able to carry any medication with the exception of inhalers for asthma control, or care plan specified medication.
 14. No pupil is allowed to have any non-prescription drugs in school. This is to ensure that no child unwittingly or otherwise gives another child his or her medication. This approach will be supported in school through our curriculum.
 15. Medication will be stored in the medical cupboard or refrigerator in the school office as appropriate. School will only accept medicines which are in date, labelled and provided in the original container as dispensed by the pharmacist and include instructions for administration, dosage and storage.
 16. All staff will be aware of where the keys are kept.
 17. Inhalers are kept in medical boxes in the classroom and easily accessible to children. In Key Stage Two when parents feel that children can carry their own, this will be recorded by parents in their Asthma Care Plan and a risk assessment will be in place.



18. Epipens are kept in the Epipen cupboard in the school office. The details of these and any other allergy medication will be detailed by parents in the pupil's allergy care plan.
19. Emergency medical supplies will remain stored in the school office.

8. School Visits

1. When preparing risk assessments staff will consider any reasonable adjustments they might make to enable a child with medical needs to participate fully and safely on visits.
2. Additional safety measures may need to be taken for outside visits and it may be that an additional staff member, a parent/carer or other volunteer might be needed to accompany a particular child.
3. Arrangements for taking any medicines will need to be planned or as part of the risk assessment and visit planning process.
4. Copies of Individual Health Care Plans, Asthma and Allergy care plans must be taken on visits and in the event of information being needed in an emergency.
5. Each year group folder holds all this information and will be signed in and out of the office by an appropriate staff member taking part in the visit.
6. All medications, including inhalers and Epipens used by pupils, will also be signed in and out of the appropriate location in the school office by staff members on the day of the trip.
7. Epipens and any other vital medication must be taken on the visit and returned appropriately to the school office.
8. When the administration of non-emergency medication is required staff may exercise their voluntary right to not administer. This right may be selective on the grounds of the type of medication in question.
9. The members of staff willing to administer medication to a pupil must have had training and their names recorded in the Individual Care Plan and on the child's records. This voluntary responsibility may be withdrawn at any time.

9. In the event of an emergency

1. School has Calpol (liquid paracetamol) and Piriton (liquid antihistamine) in the school medicine cupboard and also for residential visits.
2. In the event of an emergency school will act in 'loco parentis' to administer this.
3. Parents will be contacted to confirm that this can be administered.
4. If parents cannot be contacted in an emergency, the school staff will act in loco parentis.



10. Other support

1. Outside agencies may be contacted to support and advise school in the management of this policy, e.g.
 - a. School Nursing Services
 - b. Medical specialists relating to a pupil
 - c. Social Services
 - d. SEND Advisory Team
 - e. SEND Assessment Team
 - f. Specialist Support Groups
 - g. Local Parent Partnerships
 - h. Educational Psychology Team
 - i. Child Protection Team
 - j. Hospital Teachers
 - k. Home Tutors
 - l. Occupational therapy

11. Implementation of this policy

1. Chandlers Ridge Academy Directors, Head Teacher, Senior Leadership Team and Teachers are responsible for ensuring that this policy is effectively implemented.
2. This policy will be available on the Chandlers Ridge Academy Website.

12. Audit

1. This policy will be reviewed on a 2 year cycle or earlier if necessary following full consultation from the parents, staff and governors.
2. This policy will also be made available to parents through the school website.
3. We will ask parents for annual updates regarding medical information.