

2023-2024 Ratified November 2023

Bishop Walsh Catholic School

Medical Policy

Aims

This policy aims to ensure that:

- Pupils, staff and parents understand how our school will support pupils with medical conditions.
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities.

The governing board will implement this policy by:

- Making sure sufficient staff are suitably trained.
- Making staff aware of pupils' conditions, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions.
- Providing supply teachers with appropriate information about the policy and relevant pupils
- Developing and monitoring individual healthcare plans (IHPs) (Yellow Forms Appendix 2)

The named person with responsibility for implementing this policy is Miss Fraser SENCO, Heads of Year and relevant administrative staff.

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 Department for Education (DfE)'s statutory guidance on supporting pupils with medical conditions at school.

Roles and responsibilities:

The governing board

- The governing board has ultimate responsibility to annually review this policy to ensure that it is fit for purpose.

The Principal:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Ensure 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 school staff are appropriately insured and aware that they are insured to support pupils in this way

The SENCO (general roles):

- Ensure that all staff who need to know are aware of a child's condition (long term or chronic)
- Take overall responsibility for the development of IHPs.
- Contact the school nursing service in the case of any pupil who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date.

Staff

- Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. 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 consider 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.

Parents

- Provide the school with sufficient and up-to-date information about their child's medical needs.
- Be involved in the development and review of their child's IHP and **may be** involved in its drafting.
- Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times.
- Inform school in advance **before** bringing their child into school with an injury that requires a risk assessment (eg leg/arm braces, broken limbs, any injury that prevents normal movement around school site).

Pupils

- Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.
- Pupils who carry their own medication (stated on their IHP) are instructed not to misuse it and report to parents if the medication is damaged or empty. They must also **NOT distribute** this or give to another pupil in the school. This is a serious breach of the school's behaviour policy and will be dealt with in accordance with this policy. This is protect all other students on school site.

School nurses and other healthcare professionals

- Our school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible. They may also support staff to implement a child's IHP.
- A member of staff can make a nurse referral when a pupil's condition changes and advice is needed. (appendix 4)
- Healthcare professionals, such as GPs and paediatricians, will liaise with the school's nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

School Specific Roles and Responsibilities:

The SENCO and Medical Administrator:

Responsible for Long Term and Chronic medical needs: (appendix 2 yellow IHP form)

The SENCO has overall responsibility for the development of IHPs for pupils with medical conditions.

Pupils with long term or chronic medical conditions will have an IHP completed (yellow form) by the SENCO and this information will be placed on the school medical needs register by the medical administrator. New additions or changes to the register will result in an alert to staff by the SENCO.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

Not all pupils with a medical condition will require a nurse care plan. It will be agreed with a healthcare professional and the parents when an additional nurse care plan would be inappropriate or disproportionate. This will be based on evidence.

Plans will be drawn up in partnership with the school, parents 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.

If a pupil has an EHCP or SEN support plan and an IHP, this will be referenced on their SEN provision plan.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed.

The IHP (yellow form will detail the following)

- The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing.
- The storage areas of the pupil medication.
- Specific support for the pupil's educational, social and emotional needs.
- 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
- What to do in an emergency, including who to contact, and contingency arrangements

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

Pupils will be allowed to carry their own medicines where appropriate and stated on the IHP and relevant devices wherever possible. Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered, if necessary.

Medication will be stored in the main school office. Pupils under the care of the SENCO will have a yellow form with the medication in a labelled bag/envelope.

Parents who present at school or email for the first time regarding on going medical condition should be referred to the SENCO. The medical needs administrator may attend this initial meeting to take notes on behalf of the SENCO.

Head of Year:

Responsible for Short Term and Non- Chronic medical needs: (appendix 3 Risk Assessment)

Heads of Year will complete short term risk assessments that make reasonable adjustments for pupils in school to cope with temporary short term medical issues (eg broken arm/broken leg)

The Head of Year reserves the right to use the Damascus suite to facilitate supervised study for some/all of the time the pupil is in school with the risk assessment. If this is the case, the Head of Year will arrange for subject specific work to be sent for the pupil either physically or by google classroom.

The Head of Year may refer to the SENCO if the pupil condition starts to become longer term.

The Head of Year will monitor the attendance of pupils with short term and non-chronic medical needs.

The Office Staff

Prescription and non-prescription medicines can 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' written consent (appendix 1 white form)

Please note that the school will not give daily (once daily medication) as this is best placed at home or give medications for convenience that do qualify in the above two bullet points.

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 only give the medication at the **time specified** by the parent. School will not have a 24hr medication log and are therefore unable to administer the medication unless at specified time.

The school will only accept prescribed medicines that are:

- In-date
- Labelled where appropriate.
- Provided in the original container.
- For a definite time frame.
- Only for three days if painkillers. (a new form will be required after this and may be referred to the SENCO)

All medicines will be stored safely. Pupils will be informed about where their medicines are stored.

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 to arrange for safe disposal when no longer required or destroyed if beyond the period stated on the medication consent form.

The Attendance Officer:

Will make the following alerts:

SENCO for new long term/chronic conditions copying in medical administrator.

Head of Year for short term conditions to complete risk assessment.

Head of Year to follow up with well being calls in the case of long-term absence due to ill health.

Toilet Passes

These are only issued by Heads of Year, SLT and the SENCO. The issuer informs all staff members via email and asks the medical administrator to add this information to the medical needs spreadsheet.

Toilet passes can be removed if misused/shared with other pupils or no longer deemed medically necessary.

Parent/carers will be asked to supply medical evidence for toilet passes to be issued to pupils.

Nurse Referral Forms

These can be used by key staff members to make referrals (appendix 4)

Equal opportunities

Our 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 and any relevant healthcare professionals will be consulted.

Emergency procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHPs 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 arrives or accompany the pupil to hospital by ambulance.

Pupils who are taken to hospital from school wither by parents or ambulance will be documented on the My Health and Safety portal (Staffordshire County Council)

Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the SENCO. 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 IHPs.
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

Teaching and support staff will receive annual training in asthma, diabetes, epilepsy and allergies. This will be organised by the Assistant Principal and records of this training kept.

Complaints

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

Monitoring arrangements

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

Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Health and safety
- Safeguarding
- Special educational needs policy
- Attendance Policy
- Behaviour Policy

Appendix1 Student Medication Consent Form (White Form)

Students Name:.....

D.O.B:.....

Year and Form Group:.....

Name and Strength of Medication:.....

How Much to be Given (I.E Dose to be given):.....

When to be Given: (I.E What time/How many times):.....

Reason for Medication:.....

Short term Use only from Date :.....TO..... (Medication will be destroyed after this date)

Please note that painkilling medication can only be accepted for three days. If this is required beyond three days, a new form will need to be completed and this may be referred to the SENCO for review.

Number of Tablets/ML Given to the School:.....

Medication needs to be in its original packaging eg. blister packs/box/container/bottle with the students name on as dispensed by the Pharmacy where appropriate.

Parent/Guardian Contact Number:.....

Name of GP and Practice:.....

GP's Contact Number:.....

I agree that the above information is correct to the best of my knowledge and accurate at the time of filling out this form. I agree to make the school aware of any changes to the dose/frequency of medication or if the medication is no longer required. I give my permission to the school staff to administer the medication.

Parents/Guardians Signature:..... Date:.....

For Office Use Only:

Medication accepted on behalf of Bishop Walsh

Office..... Print Name:..... Date:../../.....

Appendix 2: Individual healthcare plan (Yellow Form)

Name of school/setting				
Child's name				
Group/class/form				
Date of birth				
Child's address				
Medical diagnosis or condition				
Date				
Review date				
Family Contact Information				
Name				
Phone no. (work)				
(home)				
(mobile)				
Name				
Relationship to child				
Phone no. (work)				
(home)				
(mobile)				
Clinic/Hospital Contact				
Name				
Phone no.				
G.P.				
Name				
Phone no.				

Who is responsible for providing support in school	
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Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

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Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Where appropriate the medication will be stored in:

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to



Appendix 3 -Bishop Walsh Catholic School

Assessor : (name)

Description of Task/Activity/Area/Premises etc.

Staff/Pupil – Adjustments for return to school – (name)

Who might be harmed and how?	What are you already doing? List the control measures already in place	What is the risk rating – H, M, L? See section 5	What further action, if any, is necessary, if so what action is to be taken by whom and by when?	Action Completed State the date completed and sign.	What is the risk rating now – H, M, L? See Section below



Tick (✓) if any of the identified hazards relate to any of the following specific themes:

Hazardous Substance	Manual Handling	Display Screen Equip	Fire	Work Equip / Machinery	Stress	Individual Person such as Young Person New/ Expectant Mother or Service User

If any are ticked a specific risk assessment form must be completed separately. For example a COSHH form must be completed if a hazardous substance is used.

Risk Rating

The risk rating is used to prioritise the action required. Deal with those hazards that are high risk first.

Risk Rating	Description	Action Priority
High	Where harm is certain or near certain to occur and/or major injury or ill-health could result	Urgent action
Medium	Where harm is possible to occur and/or serious injury could result e.g. off work for over 3 days	Medium priority
Low	Where harm is unlikely or seldom to occur and/or minor injury could result e.g. cuts, bruises, strain	No action or low priority action

Signature of Assessor(s):

Print Name:

Date Assessed:

Review Date:

Communication and Review

This risk assessment should be communicated to all employees and relevant persons who may come into contact with the hazards being assessed. The assessment must be reviewed following a significant change, accident or violent incident



Appendix 4 – Nurse Referral School Health Advisory Service

BCHNT.northeastsnteam@nhs.net

REFERRAL TO SCHOOL HEALTH ADVISORY SERVICE

Child's Name				Sex	
D.O.B.		Ethnicity			
Address					
Home/Mobile Tel.					
G.P.		GP address			
School		Pupil unique ID			
Please indicate if this child is:	Home educated	Asylum seeker	Traveller	Migrant	
Social-Worker Details	Child Protection Plan	Child In Need	Early Help	Child in Care	

Please tick if relevant

Reason for Referral:

School/ GP/ health professional actions already taken:

Name of any other school staff already involved with child/young person:

Examples of reasons for referral:

Primary school age children	Secondary children/young people
Weight issues	Young person's request
Growth	Toileting concerns (not enuresis/bed wetting)
Unmet health needs	New medical needs

Any toileting concerns (not including enuresis /bed wetting) New medical needs Health related absence. Children who are subject to a safeguarding plan who have health needs	Growth Weight issues Health related absence Children who are subject to a safeguarding plan who have health needs
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Have you referred to any other agencies if so:

Name and contact details of agency referred to and date referral made:

Name of professional (if known):

For concerns regarding child development or motor skills you can refer directly to the community paediatrician by accessing the referral form:
<http://www.bhamcommunity.nhs.uk/about-us/services-and-corporate-departments/children-and-families/referral-forms/>

We need to ensure that consent has been obtained by the person making this referral. This can be from the parent of children being referred, or from the young person, if they are competent to consent for themselves.

Have you gained:

Parental consent? Delete as appropriate Yes No

Young person's consent Delete as appropriate Yes No

Referrer details

Name

Address

Contact number including Fax number

Email address

Date of referral

Office use only:

Date received	
Date of response to referrer	
Date allocated	
Date actioned	
Date of feedback to referrer	

