



SUPPORTING CHILDREN WITH MEDICAL NEEDS POLICY

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Committee responsible for review:	Policy Committee

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

Introduction

This policy has been drawn up in accordance with the DfE guidance *Managing medicines in schools*.

Most pupils will, at some time, have a medical condition which may affect their participation in school activities. For many this will be short-term: perhaps finishing a course of medication. Other pupils have medical condition that, if not properly managed, could limit their access to education. Such pupils are regarded as having *medical needs*. *There are a high proportion of children with medical needs at Willow Dene*. Children with complex medical needs are able to attend school regularly and, with support from the school, can take part in all school activities. However, school staff take extra care in planning activities to make sure that these pupils, and others, are not put at risk.

Rationale

Willow Dene School is an inclusive community that aims to support and welcome pupils with medical conditions. We provide all pupils with all medical conditions the same opportunities as others at school. This will help to ensure they can:

- be healthy
- stay safe
- enjoy and achieve
- make a positive contribution
- achieve economic well-being

Willow Dene School ensures all staff understand their duty of care to children and young people in the event of an emergency and that staff are well supported and feel confident in knowing what to do in an emergency. We are aware that some medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood. We understand the importance of medication being taken as prescribed. We are committed to ensuring that staff understand the medical conditions that affect children that they are working with and the common medical conditions that affect children across the school. There is a significant commitment to ensuring that staff receive training on the impact medical conditions can have on pupils and how to manage these.

1. This school is an inclusive community that aims to support and welcome pupils with medical conditions

- Wherever possible children with medical conditions are encouraged to take control of their condition in the way which is most appropriate to them and their learning needs. When children are reliant on adults to have their medical needs met, relationships are trusting and the child feels secure.
- We aim to include all pupils with medical conditions in all school activities.
- Parents* of pupils with medical conditions feel secure in the care their children receive at Willow Dene.
- The medical conditions policy is understood and supported by the whole school and local health community.

2. This school's medical conditions policy has been drawn up in consultation with a wide range of local key stakeholders within both the school and health settings

Willow Dene has consulted on the development of this medical condition policy with a range of key stakeholders within both the school and health settings. The school recognises the importance of providing feedback to those involved in planning for and actively managing the medical needs of children in the school and is committed to working with all stakeholders to continue to develop this area in accordance with the changing needs of children at the school. This policy will be accessible to parents and staff (including those not directly employed by the school) in a range of ways including the school website.

3. All staff understand and are trained in what to do in an emergency for the most common serious medical conditions at this school

- Staff understand their duty of care to pupils in the event of an emergency. In an emergency situation school staff are required under common law duty of care to act like any reasonably prudent parent. This may include administering medication.
- There are clear procedures in place for all children in the event of an emergency. These measures include:
 - A whole school procedure in the event of paramedics being called to school which includes systems for the admin and premises teams and clear roles for all those involved
 - A nursing team on site at Swingate Lane who will move between sites on request and who will manage emergencies in the first instance
 - First Aiders on site
 - Clear protocols for emergencies for individual children which are stored with the school team, the nursing team, with emergency medicines and in pupil files
 - staff trained appropriately to manage emergency situations when offsite or in the absence of the school nursing team including annual training in the administration of emergency medicines

- Annual CPR training for staff who may administer emergency medications
 - Individual risk assessments for every child which highlight any foreseeable emergency situations and control measures
 - Debriefing meetings as necessary
 - Systems for supporting families when their children are taken to hospital
 - Systems to ensure that relevant documents including healthcare plans and personal passports are sent to hospital with a child as a matter of course
 - Emergency medicines stored safely and securely in classrooms where they are most easily accessible
 - Emergency use generic inhalers and epipens stored safely in the main offices and defibrillators in easily accessible locations at both sites
- If a pupil needs to be taken to hospital, a member of staff will always accompany them and will stay with them until a parent arrives. The school tries to ensure that the staff member will be one the pupil knows.
 - In some situations, where an ambulance is not deemed necessary and as the result of consultation between the nursing team, SLT and parents, alternative arrangements can be put in place in the best interests of the child. These may include taking the child home on school transport with a member of staff who knows them well or taking the child to the local hospital day clinic using the school minibus.
 - All staff at Willow Dene are aware of the most common medical conditions and needs at the school. Annual generic training is provided in September as a matter of course for large groups of staff in asthma, anaphylaxis, infection control and epilepsy and small groups of staff in enteral feeding and emergency medicines, safe storage and administration of medicines, suction and oxygen
 - More specialised training such as catheterization, NIV, stoma care, adrenal insufficiency management and oropharyngeal suction takes place with individuals or small groups and may be delivered by the local Oxleas team or specialist trainers.
 - Staff at Willow Dene are fully conversant with the medical needs of individuals in their class and how to manage these. Teams meet with nursing staff annually in September to discuss medical care plans and all training to meet individual need is based on these. Medical care plans are stored with the nursing team and in pupil files. All training is delivered locally by Oxleas clinical trainers or external specialist clinical trainers.
 - All training is recorded in the Medical Needs Training Plan and led by the agreed Medical Training Criteria, which are the responsibility of school admin staff working in collaboration with the school nursing team. Training is refreshed for all staff at least once a year. The school differentiates between new training and renewal training, providing more detail and opportunities for supervised practice when training is new. Renewal observations take place every 3 years.

4. The school has clear guidance on the administration of medication at school

Administration – emergency medication

- Staff have easy access to the emergency medication of all pupils with medical

conditions. Medicines are stored in lockable cupboards in classrooms and movement of stock is recorded via the use of a CD (Controlled Drugs) record in each classroom. The record is quality assured regularly by the nursing team.

- If parents and health specialists determine they are able to start taking responsibility for their condition children are encouraged to administer their own asthma pumps with appropriate levels of supervision.
- The emergency medication for all pupils is carried by staff during any off-site or residential visits.
- Children are comfortable and secure with the arrangements for familiar members of staff to assist in helping them take their emergency medication safely.

Administration – general

- All use of medication defined as a prescribed drug, is done under the supervision of appropriately trained and named members of staff at Willow Dene. The school understands the importance of medication being taken as prescribed. Staff are aware that there is no legal or contractual duty for any member of staff to administer medication or supervise a pupil taking medication unless they have been specifically contracted to do so. All members of staff administering medication have stated that they are willing to do so.
- Training is given to all staff members who agree to administer medication to pupils, where specific training is needed. The RPA (Risk Protection Agency) provides full indemnity. All school staff administering medication will do so with a second trained adult assisting.
- Parents at this school understand that if their child's medication changes or is discontinued, or the dose or administration method changes, that they should notify the school immediately and that medication cannot be given without the correct prescriptive label and secondary evidence.
- If a pupil refuses their medication, staff record this and follow procedures. Parents are informed as soon as possible.
- If a pupil at this school needs supervision or access to medication during home to school transport organised by the local authority, properly trained escorts are provided. All drivers and escorts have the same training as school staff, know what to do in a medical emergency and are aware of any pupils in their care who have specific needs. If they are expected to supervise or administer emergency medication they are properly trained and have access to the relevant Healthcare Plans and protocols.
- Staff attending off-site visits are aware of any pupils with medical conditions on the visit. They receive information and training as a matter of course at the beginning of the school year about the type of condition, what to do in an emergency and any other additional support necessary, including any additional medication or equipment needed. This is documented in individual risk assessments. Children always have competent members of staff accompanying them during offsite visits.
- If a trained member of staff, who is usually responsible for administering medication, is not available the school makes alternative arrangements to provide the service from within the staff holding the relevant competencies.

There are an adequate number of trained staff in each class to allow for staff absence to be covered.

Prescribed Medicines

- All prescribed medicines administered by school staff are transcribed by two nurses to the child's individual MAR chart which details what is prescribed and what is administered. This is completed each time the medicine is administered, by two trained members of staff.
- In order to be transcribed to a chart, there must be secondary evidence, the prescription label must be visible on the packaging and the medicine must be in date.
- Staff administering check both expiry date and the date the medicine must be used by (or discarded) as a matter of course each time it is given.

Homely Remedy

- Children who do not have paracetamol transcribed on their MAR chart can have paracetamol administered by school staff from the generic school supply under the guidance provided in the school's Homely Remedy Policy which was jointly written by Willow Dene and Oxleas and the content approved by Oxleas Medicines Management Committee.
- The Homely Remedy Policy also applies to over the counter medicines which GPs will not prescribe but which the medicines and healthcare products regulatory agency (MHRA) have classified as 'over the counter' because they are safe and appropriate to be used without prescription when recommended by a pharmacy.

5. This school has clear guidance on the storage of medication at school

Safe storage – emergency medication

- All pupils at this school with medical conditions have easy access to their emergency medication. This is stored securely and recorded as a CD when any stock movement takes place.
- All pupils carry their emergency medication with them during any off-site or residential visits. In school emergency medicines are stored in a secure but easily accessible location.
- All pupils carry their emergency medicines with them for Forest School sessions and swimming.
- Staff know exactly where emergency medications are at all times.

Safe storage – non-emergency medication

- All non-emergency medication is kept in a secure place, in a lockable cupboard in a cool dry place. This may be in the nursing room but is most often in classrooms.
- Medication is kept in lidded containers clearly labeled with the child's name and is stored alongside drug recording sheets (MAR charts).
- Staff ensure that medication is only accessible to those for whom it is prescribed.

Safe storage – general

- All controlled drugs are kept in a locked cupboard and only named staff have access, even if pupils normally administer the medication themselves.
- The expiry dates for all medication stored at school are checked routinely as part of administration routines. This is the same for 'use by' dates, which are recorded by staff when the bottle is opened according to the instruction on the bottle.
- The identified member of staff, along with the parents of pupils with medical conditions, ensures that all emergency and non-emergency medication brought into school is clearly labeled with the pupil's name, the name and dose of the medication and the frequency of dose. The school nursing team transcribes the medicine onto MAR charts which staff complete on administration.
- Medication is stored in accordance with instructions, paying particular note to temperature.
- Some medication for pupils at this school may need to be refrigerated. All refrigerated medication is stored in an airtight container and is clearly labeled. Refrigerators used for the storage of medication are secure and used only for medicines.
- All medication is sent home with pupils at the end of the school year where this is possible. Controlled drugs are not stored in summer holidays unless for the period of holiday playscheme.
- It is the parent's responsibility to ensure new and in date medication comes into school on the first day of the new academic year and that new supplies are sent to school in a timely way. School staff are responsible for informing parents in good time when supplies are running out.

Safe disposal

- Out-of-date medication is sent home to parents
- Sharps boxes are used for the disposal of needles and clinical waste as the result of administering peraldehyde. All sharps boxes in this school are stored in a locked cupboard unless alternative safe and secure arrangements are put in place on a case-by-case basis. The school has an inoculations policy
- If a sharps box is needed on an off-site or residential visit, a named member of staff is responsible for its safe storage and return to school.

6. The school has clear guidance about record-keeping

Enrolment forms

- New parents are asked if their child has any health conditions or health issues on a separate set of forms which are part of the new starter pack, which is filled out when they join the school. Subsequently, home visits or planned visits with the teacher, STA and school nursing team will allow fuller discussion and detail and these take place as a matter of course when a child has medical needs.

Existing pupils

- The nursing team update their records of health conditions, medicines and permissions for all children annually and as a matter of course.

Healthcare Plans

- This school uses a Healthcare Plan to record important details about individual children's medical needs at school, their triggers, signs, symptoms, medication and other treatments. Healthcare plans for children at Willow Dene are written by the school nurse. Further documentation can be attached to the Healthcare Plan if required.
- A Healthcare Plan, accompanied by an explanation of why and how it is used, is sent to all parents of pupils with a long-term medical condition. This is sent:
 - at the start of the school year
 - at enrolment
 - after alterations
- When a Healthcare Plan is first written, parents, a member of the children's nursing team and pupil with a medical condition, are asked to fill out the pupil's Healthcare Plan together. Parents then return these completed forms to the school.
- The school ensures that a relevant member of school staff is also present, if required to help draw up a Healthcare Plan for pupils with complex healthcare or educational needs.

School Healthcare Plan register

- The nursing team holds a centralised register of pupils with medical needs. There is also a record held by the school team on Bromcom.
- The school nurse follows up with the parents any further details on a pupil's Healthcare Plan required or if permission for administration of medication is unclear or incomplete.
- Parents are supported to update their child's Healthcare Plan if their child has a medical emergency or if there have been changes to their symptoms (getting better or worse), or their medication and treatments change.
- Every pupil with a Healthcare Plan at this school has their plan discussed and reviewed at least once a year.
- Parents are provided with a copy of the pupil's current agreed Healthcare Plan.
- Healthcare Plans are kept in a secure central location at school in the nursing office. Apart from the central copy, office and class teams securely hold copies of pupils' Healthcare Plans in pupil files. These copies are updated at the same time as the central copy. The school ensures that all staff protect pupil confidentiality.
- The school nursing team seeks permission from parents to allow the Healthcare Plan to be sent ahead to emergency care staff, should an emergency happen during school hours or at a school activity outside the normal school day. This permission is included on the Healthcare Plan.

Use of Healthcare Plans

Healthcare Plans are used by this school to:

- Inform the appropriate staff about the individual needs of a pupil with a medical

condition in their care.

- Identify common or important individual triggers for pupils with medical conditions at school that bring on symptoms and can cause emergencies. The school uses this information to help reduce the impact of common triggers.
- Ensure this school's local emergency care services have a timely and accurate summary of a pupil's current medical management and healthcare in the event of an emergency.
- Ensure there is shared understanding between the team around the child of medical management and healthcare.

Consent to administer medicines

- If a pupil requires regular prescribed or non-prescribed medication at school, parents are asked to provide consent on their child's Healthcare Plan giving the pupil or staff permission to administer medication on a regular/daily basis, if required. Short courses of medication are recorded on MAR charts and in medical notes.
- All parents of pupils with a medical condition who may require medication in an emergency are asked to provide consent on the Healthcare Plan for staff to administer medication.
- If a pupil requires regular/daily help in administering their medication then the school outlines the school's agreement to administer this medication on the pupil's Healthcare Plan. The school and parents keep a copy of this agreement.
- Where relevant parents of pupils with medical conditions are asked at the start of the school year on the Healthcare Plan if they and their child's healthcare professional believe the child is able to manage, carry and administer their own medication.

Residential visits

- Parents are sent a residential visit form to be completed and returned to school shortly before their child leaves for an overnight or extended day visit. This form requests up-to-date information about the pupil's current condition and their overall health. This provides essential and up-to-date information to relevant staff and school supervisors to help the pupil manage their condition while they are away. This includes information about medication and feeds not normally taken during school hours.
- All residential visit forms are taken by the relevant staff member on visits and for all out-of-school hours activities where medication is required. These are accompanied by a copy of the pupil's Healthcare Plan, emergency protocols, and other details.
- All parents of pupils with a medical condition attending a school trip or overnight visit are asked for consent which gives staff permission to administer medication at night or in the morning if required.
- All medicines to be administered during a residential visit are transcribed by children's nursing onto MAR charts where administration is recorded by those administering.

Other record keeping

- The school keeps an accurate record of each occasion an individual pupil is given or supervised taking medication. Details of the administering staff members, pupil, dose, date and time are recorded. These records are on MAR charts which are routinely monitored by the nursing team and which are stored securely with the medicines. MAR charts are taken on offsite visits.
- Class staff monitor and record seizures in seizure diaries which are used to inform parents and other professionals.
- Class staff monitor and record any other significant medical events.
- Class staff contact the nursing team for further advice when there is cause for concern.
- This school holds training for:
Groups or individuals who practice medical competencies
This may relate to groups or individual children
- Due to the complexity of medical needs within the school, all planned training which is related to individuals is recorded on the school Medical Training Plan. Training against the medical training plan is recorded by the school and the nursing team
- The medical training plan is supported by the Medical Training Criteria which states the school criteria for staff medical training. This is distributed annually to teams alongside the Medical Training Plan
- Training may be provided by the school nursing team or community nursing team or by external experts
- For children who have school meals who need any variance on medical grounds, their parent completes a medical diet form which is shared with the caterers and a copy stored by the school office, before the food is provided. This includes texture modified diets.

7. This school ensures that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities

Physical environment

- The school is committed to providing a physical environment that is accessible to pupils with medical conditions. The school's commitment to an accessible physical environment includes out-of-school visits and this is taken into consideration as a routine part of planning for any off site visit.

Social interactions

- This school ensures the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured social activities, including during breaks and extended school activities including holiday play scheme
- All staff at this school are aware of the potential social problems that pupils with medical conditions may experience. Staff use this knowledge to try to prevent and deal with problems in accordance with the school's anti-bullying and behaviour policies. The school actively works with the other schools within the Academy Trust to raise awareness across Compass schools.

Exercise and physical activity

- This school understands the importance of all pupils taking part in sports, games and physical activities including commitment to the MOVE program and has a Physical Activity Policy in place.
- The school ensures that children are never forced to take part in an activity if they feel unwell. Teachers and sports coaches are aware of pupils in their care who have been advised to avoid or to take special precautions with particular activities.
- This school ensures all PE teachers, classroom teachers and school sports coaches are aware of the potential triggers for pupils' medical conditions when exercising and how to minimize these triggers. The school Learning Journeys Assessment system routinely assesses children in relation to their physiological need and as such staff are continually aware of the effects of these.
- The school ensures all pupils have the appropriate medication or food with them during physical activity and that pupils take them when needed.

Education and learning

- This school ensures that pupils with medical conditions can participate fully in all aspects of the curriculum and ensures that appropriate adjustments and extra support are provided.
- If a pupil is missing a lot of time at school, they have limited concentration or they are frequently tired, the school understands that this may be due to their medical condition and will work with parents and the school nursing team to improve the situation where possible. This may involve supporting rapid access to services that can help. As a matter of course staff liaise with medical professionals and may accompany families to appointments both on and off school site. The school hosts several on-site clinics in liaison with the school nursing team.
- When families are in crisis because of a child's medical condition, when children are acutely unwell or when children are hospitalised for extended periods of time, the school will put into place measures to ensure that children and families are well supported by the school and that close communication is maintained.

Off Site visits

- Individual risk assessments are carried out by the school and updated at least annually. These document global risks and control measures associated with each child. Individual risk assessments are taken on every off-site visit.

8. Children with health needs who cannot attend school

- It is rare for children to be absent from school because of health needs which are part of their condition. The school aims to accommodate all children who are well enough to be at home, in school and as quickly as possible after hospital discharge. School staff can be trained in any competency that parents practice at home.
- When children are at home because they are more unwell than their daily condition, school staff stay in contact with the family for regular updates and dialogue.

- When children are at home because of a recent discharge from hospital and a wait for either equipment or training to be put in place, but are well enough to engage with learning, school staff will visit at home as a matter of course and provide activities for the child. Google classroom, equipment loans and specialist equipment are also shared with home according to the needs of the child and how well they are.
- When children are in hospital, school staff will check and abide by visiting and infection control policy if they intend to visit the child.
- When children are in hospital and their condition means they are too unwell to engage with learning, school staff stay in contact with the family for regular updates and visit as a matter of course.
- When children are in hospital, for long admissions and they are well enough to join hospital school programs, the school will liaise with the hospital school. The school will provide passports, PLPs (Learning Targets), annual review reports, with the permission of the parents. Learning Targets have a section detailing what the child can work on at home and how parents can support this as a matter of course.
- When children are in hospital for long admissions and they are well enough to engage with familiar adults but may not be well enough to engage with the hospital school, school staff will visit as a matter of course to work with the child and leave engaging activities which are reviewed regularly.
- When children are absent from school because of health needs for any period of time, class teachers are expected to continue with class based assessments and PLPs.
- The School Health Support Advisor is available to support any family who has a child in hospital or at home because of health needs.

9. Each member of the school and health community knows their roles and responsibilities in maintaining an effective medical conditions policy

- This school works in partnership with all interested and relevant parties including the school's governing body, all school staff, parents, employers, community healthcare professionals and pupils to ensure the policy is planned, implemented and maintained successfully.
- The following roles and responsibilities are used for the medical conditions policy at this school. These roles are understood and communicated regularly.

Employer

This school has a responsibility to:

- Ensure the health and safety of their employees and anyone else on the premises or taking part in school activities (this includes all pupils). This responsibility extends to those staff and others leading activities taking place off-site, such as visits, outings or field trips
- Ensure health and safety policies and risk assessments are inclusive of the needs of pupils with medical conditions
- Make sure the medical conditions policy is effectively monitored and evaluated

and regularly updated

- Provide indemnity for staff who administer medication to pupils with medical conditions.

Head Teacher

This school's Head Teacher has a responsibility to:

- Maintain an exemplary standard of collaborative working with the school nursing team
- Ensure the school is inclusive and welcoming and that the medical conditions policy is in line with local and national guidance and policy frameworks
- Liaise between interested parties including pupils, school staff, special educational needs coordinators, pastoral support/welfare officers, teaching assistants, school nurses, parents, governors, the school health service, the local authority transport service, and local emergency care services
- Ensure the policy is put into action, with good communication of the policy to all
- Ensure every aspect of the policy is maintained
- Ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place using pupils' Healthcare Plans
- Ensure pupil confidentiality
- Assess the training and development needs of staff and arrange for them to be met
- Ensure all supply teachers and new staff know the medical conditions policy
- Monitor and review the policy at least once a year, with input from pupils, parents, staff and external stakeholders
- Update the policy at least once a year according to review recommendations and recent local and national guidance and legislation
- Report back to all key stakeholders about implementation of the medical conditions policy.

All school staff

All staff at this school have a responsibility to:

- Be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency
- Understand the school's medical conditions policy
- Know which pupils in their care have a medical condition and be familiar with the content of the pupil's Healthcare Plan
- Enable all pupils to have immediate access to their emergency medication
- Maintain effective communication with parents including informing them if their child has been unwell at school
- Ensure pupils who carry their medication with them have it 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
- Understand common medical conditions and the impact they can have on

pupils

- Ensure no pupil with medical conditions is excluded from activities they wish to take part in
- Ensure pupils have the appropriate medication or food with them during any exercise and are allowed to take it when needed.

Teaching staff

Teachers at this school have a responsibility to:

- Maintain communication with families when children have been unwell
- Be aware that medical conditions can affect a pupil's readiness for learning
- Regularly record children's physiological need and medical events
- Refer concerns to the school nursing team in a timely way

School nursing team

The school nurse at this school has a responsibility to:

- Coordinate the completion of healthcare plans
- Liaise with other professionals as necessary
- Carry out routine nursing duties
- Maintain an exemplary standard of collaborative working with the school
- Manage on site emergencies or concerns
- Be available to offer advice and support
- Coordinate response to emergencies which happen on site
- Oversee safe administration of medicines including transcription
- Monitor records
- Help update the school's medical conditions policy, and Medical Training Plan
- Help provide regular training for school staff in managing the most common medical conditions at school
- Provide training for groups or individuals of staff
- Order, store and maintain medical equipment including enteral feeding and syringes
- Provide information about where the school can access other specialist training.

First aiders

First aiders at this school have a responsibility to:

- Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards with the school
- When necessary ensure that an ambulance or other professional medical help is called.

Local doctors and specialist healthcare professionals

Individual doctors and specialist healthcare professionals caring for pupils who attend this school, have a responsibility to:

- Complete the pupil's Healthcare Plans provided by parents

- Where possible, and without compromising the best interests of the child, try to prescribe medication that can be taken outside of school hours
- Offer every child or young person (and their parents), where this is relevant a written care/self-management plan to ensure children and young people know how to self manage their condition
- Ensure the child or young person knows how to take their medication effectively
- Ensure children and young people have regular reviews of their condition and their medication
- Provide the school with information and advice regarding individual children and young people with medical conditions (with the consent of the pupil and their parents)
- Understand and provide input in to the school's medical conditions policy.

Parents*

The parents of a child at this school have a responsibility to:

- Tell the school if their child has a medical condition
- Ensure the school has a complete and up-to-date Healthcare Plan for their child
- Inform the school about the medication their child requires during school hours
- Inform the school of any medication their child requires while taking part in visits, outings or field trips and other out-of-school activities
- Tell the school about any changes to their child's medication, what they take, when, and how much
- Inform the school of any changes to their child's condition
- Ensure their child's medication and medical devices are labeled with their child's full name
- Update the school regarding information from appointments
- Ensure that their child's medication is within expiry dates
- Keep their child at home if they are not well enough to attend school
- Ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional

10. The medical conditions policy is regularly reviewed evaluated and updated. Updates are produced every year

- This school's medical condition policy is reviewed, evaluated and updated every year in line with the school's policy review timeline.
- New Department for Children, Families and Schools and Department of Health guidance is actively sought and fed into the review.
- In evaluating the policy, this school seeks feedback on the effectiveness and acceptability of the medical conditions policy with a wide-range of key stakeholders within the school and health settings.

Legislation and guidance

Introduction

- Local authorities, schools and governing bodies are responsible for the health

and safety of pupils in their care.

- Areas of legislation that directly affect a medical conditions policy are described in more detail in *Managing Medicines in Schools and Early Years Settings*. The main pieces of legislation are the Disability Discrimination Act 1995 (DDA), amended by the Special Educational Needs and Disability Act 2001 (SENDA) and the Special Educational Needs and Disability Act 2005. These acts make it unlawful for service providers, including schools, to discriminate against disabled people. Other relevant legislation includes the Education Act 1996, the Care Standards Act 2000, the Health and Safety at Work Act 1974, the Management of Health and Safety at Work Regulations 1999 and the Medicines Act 1968.
- This section outlines the main points from the relevant legislation and guidance that schools should consider when writing a medical conditions policy.

Managing Medicines in Schools and Early Years Settings (2004)

This provides guidance from the DfES (now DCFS) and DH on managing medicines in schools and early years settings. The document includes the following chapters:

- Developing medicines policies
- Roles and responsibilities
- Dealing with medicines safely
- Drawing up a Healthcare Plan
- Relevant forms.

Medical Conditions at School: A Policy Resource Pack is designed to work alongside *Managing Medicines in Schools and Early Years Settings*.

Disability Discrimination Act 1995 (DDA) and the Special Educational Needs and Disability Acts (2001 and 2005)

- Many pupils with medical conditions are protected by the DDA and SENDA, even if they don't think of themselves as 'disabled'.
- The Commission for Equality and Human Rights (CEHR) (previously the Disability Rights Commission) publishes a code of practice for schools, which sets out the duties under the DDA and gives practical guidance on reasonable adjustments and accessibility. The CEHR offers information about who is protected by the DDA, schools' responsibilities and other specific issues.

Schools' responsibilities include:

- Not to treat any pupil less favourably in any school activities without material and sustainable justification
- To make reasonable adjustments that cover all activities – this must take into consideration factors such as financial constraints, health and safety requirements and the interests of other pupils. Examples of reasonable adjustments can be found in the DfES resource: *Implementing the DDA in Schools and Early Years Settings**
- To promote disability equality in line with the guidance provided by the DCSEF and CEHR through the Disability Equality Scheme.
- *DfES publications are available through the DCSEF.

The Education Act 1996

Section 312 of the Education Act covers children with special educational needs, the provisions that need to be made and the requirements local health services need to make to help a local authority carry out its duties.

The Care Standards Act 2000

This act covers residential special schools and responsibilities for schools in handling medicines.

Health and Safety at Work Act 1974

This act places duties on employers for the health and safety of their employees and anyone else on their premises. This covers the head teacher and teachers, non-teaching staff, pupils and visitors.

Management of Health and Safety at Work Regulations 1999

These regulations require employers to carry out risk assessments, manage the risks identified and to communicate these risks and measures taken to employees.

Medicines Act 1968

This act specifies the way that medicines are prescribed, supplied and administered.

Additional guidance

Other guidance resources that link to a medical conditions policy include:


- The school Medical Training Plan
- The School Medical training Criteria
- The school Inocuations Policy
- The school Homely Remedies
- The school Physical Activity Policy
- Guidelines for School Visits and School Journeys
- Healthy Schools Programme – a medical conditions policy can provide evidence to help schools achieve their healthy school accreditation
- Every Child Matters: Change for Children (2004). The 2006 Education Act ensures that all schools adhere to the five aims of the Every Child Matters agenda
- National Service Framework for Children and Young People and Maternity Services (2004) – provides standards for healthcare professionals working with children and young people including school health teams
- Health and Safety of Pupils on Educational Visits: A Good Practice Guide (2001) – provides guidance to schools when planning educational and residential visits
- Misuse of Drugs Act 1971 – legislation on the storage and administration of controlled medication and drugs
- Home to School Travel for Pupils Requiring Special Arrangements (2004) – provides guidance on the safety for pupils when traveling on local authority provided transport
- Including Me: Managing Complex Health Needs in School and Early Years Settings (2005).

Willow Dene School Insurance:

Department for Education Risk Protection Arrangement (RPA)		
Employers Liability	Willow Dene School	from: 1st September 2022 to: 31st August 2023
Third Party Public Liability	Willow Dene School	from: 1st September 2022 to: 31st August 2023
Professional Indemnity	Willow Dene School	from: 1st September 2022 to: 31st August 2023
Property Damage	Willow Dene School	from: 1st September 2022 to: 31st August 2023



Willow Dene
Supporting Children with Medical
Needs Policy appendix in response
to Covid 19

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PARTNERSHIP OF SCHOOLS

This policy has been amended to reflect changes in school procedures that have been required as a result of Covid-19. Whilst the aims and objects of our Supporting Children with Medical Needs policy remain, this document serves to provide clarity of procedures during this period.

Information sharing

Bubble staff will be familiar with and competent in management of all medical conditions related to children within their group

Training

- Staff will be trained to respond safely in the eventuality of a child or adult exhibiting symptoms of Covid-19.
- Staff will be inducted in the procedures for providing and recording first aid or medicine administration.
- Annual training will continue as per school requirements during the period of the Covid-19 pandemic
- Staff will be appropriately placed to ensure any child with a known medical condition is in a bubble with an appropriately trained staff member
- Trained back up staff will be available to cover staff absence if required

First Aid

- Each bubble will have access to an emergency first aid kit that they take with them if they move anywhere else within the school.
- Appropriate disposal bags will be provided for any bodily fluid
- Minor first aid will be provided by an identified first aider within the bubble
- First aid provided will be logged on the first aid recording sheets
- Central first aid staff are on call to support with more serious first aid incidents or where a second opinion may be required
- A non-touch thermometer will be used by the central first aider to check temperature as required
- If a child is bleeding and needs to be moved to another place a second adult will walk ahead to open doors to ensure contaminated gloves do not touch door handles

Use of PPE

- PPE must be used when providing first aid as per usual
- Disposable gloves must be used when dealing with an open wound and any bodily fluids
- If first aid requires close contact with a child's face the member of staff must use a face mask. If the child is coughing or sneezing a face shield or goggles will also be required

Emergency Hospital

- If a pupil needs to be taken to hospital in an emergency staff need to act under the guidance of the paramedics or hospital staff who will advise about how the accompanying adult should comply with hospital guidance. Where parents are not present it is crucial that we keep them informed.

Reporting to parents

- Head injuries must be reported to parents. This will be done by a phone call and a letter home.
- All injuries will be reported verbally to the parent as soon as possible.

Administration of medication at school

Administration – emergency medication

- All pupils at this school with medical conditions must have easy access to their emergency medication. Medication must be kept securely within the classroom where the 'bubble' is located and if necessary according to child protocols, taken with the child if they are in either the playground or hall.
- Where possible children are encouraged to administer their own asthma pumps with appropriate levels of supervision.
- MAR charts will be kept with the medication for recording of administration.

Response to a child displaying suspected Covid symptoms

- Instantly isolate the child from the group
- Escort the child to the Covid-19 isolation space. This is the outside spaces for classes where possible. Where this is not possible, the rest of the class will relocate, allowing the child to remain in a familiar environment
- Ensure you use a protective mask and gloves