



Loughton School

Supporting Children with Medical Conditions Policy

September 2022

1. Introduction

Children with ongoing medical conditions may be more vulnerable and may require extra support. Loughton School is committed to providing support as required.

2. Key Principles

- Pupils at school with medical conditions will be properly supported, so that they have full access to education, including school trips and physical education.
- The school ensure that arrangements are in place to support pupils at school with medical conditions.
- The school will consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.

3. Equal opportunities

The school will ensure that arrangements are in place to support pupils with medical conditions. In doing so, they should ensure that such children can access and enjoy the same opportunities at school as any other child.

- a. In the first instance, the medical learning support assistant (LSA) or the class teacher will ensure this takes place. If neither are available, then a member of the pastoral team will deal with it. Senior Leadership Team (SLT) will also be notified.
- b. The person who dealt with the situation in the first instance will then pass the information on to those who need to know to ensure continuity. The information will also be posted on CPOMS. (class teacher, HLTA's, support staff directly linked to the child, medical LSA, year leader, pastoral team, SLT & pupil administration manager all need to be aware).

In making arrangements for children, the school will take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. Some will be more obvious than others. The school will therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life.

The school will ensure that the arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions in school. The arrangements will show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care. We will ensure that staff are properly trained to provide the support that pupils need.

The school will ensure that the arrangements we put in place are sufficient to meet our statutory responsibilities and will ensure that policies, plans, procedures and systems are properly and effectively implemented.

The school will ensure that this policy for supporting pupils with medical conditions is reviewed regularly and is readily accessible to parents and school staff. (every 4 years)

4. Responsibilities

- a. The headteacher, (in liaison with the medical LSA) is responsible for ensuring that sufficient staff are suitably trained, in liaison with the deputy headteacher (who is responsible for Continued Professional Development - CPD).
- b. The medical LSA or pupil administration manager will ensure all relevant staff are made aware of the child's condition and any action that may be required. This will be sent through an email and placed on CPOMS.
- c. The headteacher, via the deputy headteacher will ensure there are cover arrangements in case of staff absence or staff turnover to ensure someone is always available
- d. The year leaders or deputy year leaders are responsible for briefing supply teachers. This information will be kept in a folder behind the class teacher's cupboard door.
- e. The year managers, in co-ordination with the deputy headteacher and medical LSA, are responsible for risk assessments for school visits, holidays, and other school activities outside of the normal timetable
- f. The assistant headteacher (Pastoral Lead) and Medical LSA are responsible for the monitoring of individual healthcare plans. These must be signed off by the headteacher.

5. Whenever a school is notified that a pupil has a medical condition:

- a. The pupil administration manager will contact all who need to know the information via email. This information will also need to be logged on CPOMS. (Class teacher, anyone who covers the class on a regular basis i.e HLTAs, support staff directly linked to the child, medical LSA, year leader, pastoral team and SLT all need to be aware).
- b. If need be, this will then be passed to the whole staff via email.

- c. The same system will be followed for reintegration or when pupils' needs change, or for any transitional arrangements between schools.
- d. The deputy headteacher (CPD Lead) will ensure that there are suitable arrangements for any staff training or support.
- e. For children starting new to the school, arrangements will in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or children moving to a new school mid-term, every effort should be made to ensure that arrangements are put in place within two weeks.

This policy links with the Inclusion Policy, which covers the role of individual healthcare plans, and who is responsible for their development, in supporting pupils at school with medical conditions (headteacher).

The school ensures that the IMHCP plans are reviewed at least annually, or earlier if evidence is presented that the child's needs have changed. They are developed with the child's best interests in mind and ensure that we assess and manage risks to the child's education, health and social wellbeing, and minimises disruption.

When deciding what information should be recorded on individual healthcare plans, the school considers the following:

- a) the medical condition, its triggers, signs, symptoms and treatments;
- b) the pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons;
- c) specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions;
- d) the level of support needed (some children will be able to take responsibility for their own health needs) including in emergencies. If a child is self-managing their medication, this should be clearly stated with appropriate

Arrangements for monitoring;

- a) who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable;
- b) who in the school needs to be aware of the child's condition and the support required;
- c) arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours;
- d) separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments;
- e) where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition;
- f) what to do in an emergency, including whom to contact, and contingency arrangements.
- g) some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

9. Further Responsibilities

The Governing body will make arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed and implemented.

The Governing body will ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. They will also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

Staff will be supported in carrying out their role to support pupils with medical conditions by supervision from the Senior Leadership Team and the Medical LSA. This will be reviewed at Performance Management during the year, and if any problems arise. This will be how training needs are assessed; the training will be commissioned by the headteacher and deputy headteacher (CPD Lead) and provided by the relevant experts in the fields.

Any member of school staff providing support to a pupil with medical needs should have received suitable training and updates.

School will ensure that there are sufficient staff trained to ensure there is always cover for a child's medical needs.

Staff must not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect any individual healthcare plans). Also see Managing Medicines in School Policy.

Any child requiring intimate care should expect that care to be provided by a member of staff that they know. Temporary staff or new staff should not be providing intimate care.

Any staff providing intimate care must have an Enhanced DBS check with barred list check.

Records of intimate care will be kept, including care provided and who provided the care. It should be signed and dated.

Children who are competent to manage their own health needs and medicines may do so on the approval of parents, headteacher and medical LSA.

Managing Medicines in School Policy must be followed in all cases.

Written records are kept of all medicines administered or self-administered by children.

Medication held by the school for individual children is checked weekly by staff for use by date and quantity available.

Medication can be dangerous if given to the wrong person or in overdose quantities. Medication should be stored safely within the school unless it is safe for a child to carry round with them (i.e. inhaler)

In an emergency situation, a member of the Senior Management Team must act as Emergency Controller. They should follow the school emergency plan, liaising with emergency services and parents as required.

We will actively support pupils with medical conditions to allow them to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

Although school staff should use their discretion and judge each case on its merits with reference to the child's individual healthcare plan, it is not generally acceptable practice to:

- a. prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- b. assume that every child with the same condition requires the same treatment;
- c. ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged);
- d. send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- e. if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- f. penalise children for their attendance record if their absences are related to their medical condition, eg hospital appointments;
- g. prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- h. require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs;
- i. prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, eg by requiring parents to accompany the child.

The school has an appropriate level of insurance in place and this appropriately reflects the level of risk. The school's insurance arrangements which cover staff providing support to pupils with medical conditions. Insurance policies are accessible to staff providing such support in the Finance Office.

Complaints concerning the support provided to pupils with medical conditions should be made following the School's Complaints Procedures.

Information will be kept securely in line with GDPR requirements.