



# **St. Mary's College**

## Preparatory School

### **Pupils with Medical Conditions**

**Reviewed: February 2023**

This policy has been written in consultation with staff and governors of The Prep and with due regard to the school's mission statement:

**Our Mission is to provide an independent Catholic education for boys and girls of all faiths aged 0-18; to provide individual challenge towards holistic and balanced development, service and achievement for life and beyond; and to try to show our Faith by the way we live, showing care and consideration for each other, those around us and the environment.**

## POLICY FOR SUPPORTING PUPILS WITH MEDICAL CONDITIONS

### POLICY INFORMATION

**Named personnel with designated responsibility for supporting pupils with medical conditions: Mrs P Howat.**

**Policy review dates February 2024 (frequency of review: yearly)**

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## I INTRODUCTION

The Children and Families Act 2014 places a duty on schools to support children with medical conditions.

Where children have a disability, the requirements of the Equality Act 2010 will also apply. Where children have an identified special need, the SEN & Disability Code of Practice will also apply.

All children have a right to access the full curriculum, adapted to their medical needs and to receive the on-going support, medicines or care that they require at school to help them manage their condition and keep them well.

We recognise that medical conditions may impact social and emotional development as well as having educational implications.

Our school will build relationships with healthcare professionals and other agencies in order to support effectively pupils with medical condition

The governing body takes responsibility for the administration of medicines during school time in accordance with the government's policies and guidelines - see **Supporting pupils at school with medical conditions, December 2015** ("the Guidance").

## 2 ROLES AND RESPONSIBILITIES

The named person responsible for children with medical conditions is Mrs P Howat. In her absence Mr J Webster is the named person.

This person is responsible for:

- Informing relevant staff of medical conditions
- Arranging training for identified staff
- Ensuring that staff are aware of the need to communicate necessary information about medical conditions to supply staff and where appropriate, taking the lead in communicating this information
- Assisting with risk assessment for school visits and other activities outside of the normal

timetable

- Developing, monitoring and reviewing Individual Healthcare Plans
- Working together with parents, pupils, healthcare professionals and other agencies.

The Governing Body is responsible for:

- Determining the school's general policy and ensuring that arrangements are in place to support children with medical conditions.  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/645476/Adrenaline\\_auto\\_injectors\\_in\\_schools.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/645476/Adrenaline_auto_injectors_in_schools.pdf)

The governing body fully indemnifies all staff against claims for any alleged negligence, providing they are acting within their conditions of service and following governing body guidelines.

The indemnity covers situations where an incorrect dose is administered or where any other mistakes in the procedure are made. The governing body will meet any claims in these circumstances.

The Headteacher is responsible for

- Overseeing the management and provision of support for children with medical conditions
- Ensuring that sufficient trained numbers of staff are available to implement the policy and deliver individual healthcare plans, including to cover absence and staff turnover
- Ensuring that school staff are appropriately insured and are aware that they are insured.

Teachers and Support Staff are responsible for

- The day to day management of the medical conditions of children they work with, in line with training received and as set out in IHPS
- Working with the named person, ensure that risk assessments are carried out for school visits and other activities outside of the normal timetable
- Providing information about medical conditions to supply staff who will be covering their role where the need for supply staff is known in advance.

The school nurse is responsible for

- Notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible this should be done before the child starts at the school.
- Providing support for staff on implementing a child's individual healthcare plan and providing advice and liaison including with regard to training

### **3 RECORDS**

On admission of the pupil to the school, all parents will be required to provide information on the Pupil Information sheet giving full details of:

- medical conditions;
- allergies;
- regular medication;
- emergency contact numbers;
- special requirements (e.g. dietary).

At the beginning of each academic year all parents will be required to complete a new Pupil Information Sheet.

### **4. PROCEDURE WHEN NOTIFICATION IS RECEIVED THAT A PUPIL HAS A MEDICAL CONDITION**

The named person will liaise with relevant individuals, including as appropriate parents, the individual pupil, health professionals and other agencies to decide on the support to be provided to the child.

Where appropriate, an Individual Healthcare Plan will be drawn up.

Appendix A outlines the process for developing individual healthcare plans.

### **5. INDIVIDUAL HEALTHCARE PLANS (IHCPs)**

- . An IHCP will be written for pupils with a medical condition that is long term and complex.
- . It will clarify what needs to be done, when and by whom and include information about the child's condition, special requirements, medicines required, what constitutes an emergency and action to be taken in the case of an emergency
- . Where a child has SEN but does not have a statement or EHC plan, their special educational needs will be mentioned in their IHP. IHCPs will be reviewed annually, or earlier if evidence is provided that a child's needs have changed

NB. Any teacher or support staff member may be asked to provide support to a child with a medical condition, including administering medicines. However, no member of staff can be required to provide this support.

IHCPs will be reviewed annually or earlier if evidence is provided that a child's needs have changed

## **6. ADMINISTRATION OF THE MEDICATION**

The Prep expects that normally parents will administer medication to their children.

Any requests for medicine to be administered must come from a parent in writing on the Prep's Request to Administer Medication Form and each request will be considered on an individual basis.

The Form will include:

- name of parent and contact number;
- name of child and class;
- name of medicine;
- name of doctor who prescribed it, and contact details;
- how much to give;
- how it should be kept and stored;
- how it is to be administered;
- when to be given; and
- any other instructions.

The Form will end with the following consent statement:

*The above information is accurate to the best of my knowledge at the time of writing and I give consent to the school to administer the medication in accordance with the school policy. I will inform the school in writing of any changes to the above information'. It will be signed and dated by a parent or someone with parental control.*

A separate form must be completed for each medicine to be administered.

Parents will be expected to notify any requests for the administration of medicines at the earliest opportunity and to discuss with the Headmaster what can be done in the Prep, before the Headmaster makes a decision -see the Guidance.

The Headmaster (or person authorised by the Headmaster) will decide whether any medication will be administered in the Prep, and by whom. In appropriate cases the Headmaster and parents, in consultation with anyone else the Headmaster deems necessary, will draw up a healthcare plan.

The medication must be in a container as prescribed by the doctor and dispensed by a chemist with the child's name and instructions for administration printed clearly on the label

The Prep will not continue to store surplus or out-of-date medicines. Parents will be asked to collect the containers for delivery back to the chemist, held by the Prep at the end of each term. If parents do not collect all medicines, the Prep will take them to a local pharmacy for safe disposal.

The Prep will not deal with any requests to renew the supply of the medication. This is entirely a matter for the parents.

If the pupil is required and able to administer his/her own medicine (e.g.: inhaler for asthma) the parents will check that the pupil fully understands what has to be done, and if appropriate the office First Aiders will supervise the administration.

Normally medication will be kept in the Prep medical room unless other arrangements are made with the parent. Any controlled drugs will be kept in a lockable cupboard, which should contain nothing else. Only those people authorised to issue the drug should have access to the keys of the cupboard.

Normally the administration of medication will only be done in the Prep at the following times:

- immediately before Prep;
- breaks and lunch time; and
- exceptionally, immediately after the end of the Prep day or when the pupil urgently needs it.

The Prep will not allow in any circumstances the administration of non-prescription medicines in Prep. This includes cough sweets and lozenges, and painkillers (apart from Paracetamol for girls and boys, with permission from parents).

Medication will normally be administered by specially trained staff, save where the pupil's GP advises otherwise (e.g. diabetes or asthma).

All staff are expected to maintain professional standards of care, but Teachers have no contractual or legal duty to administer medication. The governing body employs Support Staff whose contracts require them to administer medication, in particular all receptionists are qualified First Aiders.

However, certain specified Teaching Staff have been trained in First Aid (e.g. PE and games staff) who volunteer their services, will be given training to administer first aid and/or medication to pupils.

## **7. INTIMATE OR INVASIVE TREATMENT**

The Prep will not normally allow these to take place in Prep, but in exceptional circumstances the Headmaster is authorised to agree to it. Two adults must be present when these take place, at least one of whom must be of the same gender as the pupil.

See the Intimate Care policy.

## **8. TREATMENT FOR INJURIES OR ILLNESS**

Despite the best precautions or attention given to health and safety accidents do happen and children become ill. First Aid can save lives and prevent minor injuries becoming major ones. The Prep's First Aid policy seeks to provide a framework to ensure that any persons injured

whilst at the Prep or off premises on Prep visits or other Prep activities, whether they are staff, pupils or visitors, receives the quickest, most effective care and attention.

There are a number of members of staff who are trained and qualified as First Aiders, who are capable of giving first aid if, for example, your child is injured during sport. First aid boxes are placed in all the areas of the Prep where an accident is considered possible or likely (such as the Sports Hall). First aid boxes will be taken when groups of pupils go out of the Prep on organised trips or to participate in sporting events.

## **9. RECORDS**

The school form 'Administration of Medication Record' must be completed in every instance that medication is administered. The record will be kept in the Prep office.

The form will record:

- name of the pupil;
- date and time of the administration;
- who supervised the administration;
- which medication;
- how much was given; and
- a note of any side-effects.

Mrs P Howat in the Prep office will ensure that the medical record form is filled in and checked regularly.

## **10. TRAINING**

The governing body is committed to providing appropriate training for staff that are contractually obliged to, or volunteer to participate in the administration of medicines.

## **11. ACTION IN EMERGENCIES**

A copy of this information will be displayed in the school office

Request an ambulance – dial 999 and be ready with the information below. Speak slowly and clearly and be ready to repeat information if asked.

1. The school's telephone number:

2. Your name

3. Your location: St. Mary's College Preparatory School, Blundellsands Rd West, Blundellsands  
Liverpool L23 6TF



4. Provide the exact location of the patient within the school
5. Provide the name of the child and a brief description of their symptoms
6. Inform ambulance control of the best entrance to use and state that the crew will be met and taken to the patient
  - . Ask office staff to contact premises to open relevant gates for entry
  - . Contact the parents to inform them of the situation
  - . A member of staff should stay with the pupil until the parent/carer arrives. If a parent/ carer does not arrive before the pupil is transported to hospital, a member of staff should accompany the child in the ambulance.

## **12. LONG TERM MEDICAL NEEDS**

The governing body and Headmaster will do all they reasonably can to assist pupils with long-term needs. Each case will be determined after discussion with the parents, and in most cases the family doctor. The governing body also reserves the right to discuss the matter with the school's medical adviser.

## **13. ACTIVITIES BEYOND THE USUAL CURRICULUM**

Reasonable adjustments will be made to enable pupils with medical needs to participate fully and safely in day trips, residential visits, sporting activities and other activities beyond the usual curriculum

When carrying out risk assessments, parents/carers, pupils and healthcare professionals will be consulted where appropriate

## **14. UNACCEPTABLE PRACTICE**

The following items are not generally acceptable practice with regard to children with medical conditions, although the school will use discretion to respond to each individual case in the most appropriate manner.

- . preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary
- . assuming that every child with the same condition requires the same treatment
- . ignore the views of the child or their parents; or ignore medical evidence or opinion, (although this may be challenged)
- . sending 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
- . if the child becomes ill, sending them to the school office or medical room unaccompanied or with someone unsuitable
- . penalising children for their attendance record if their absences are related to their medical condition e.g. hospital appointments
- . preventing pupils from drinking, eating or taking toilet or other breaks whenever they

- need to in order to manage their medical condition effectively
- requiring parents, or otherwise making 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 preventing children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child

## **15 COMPLAINTS**

An individual wishing to make a complaint about actions regarding the school's actions in supporting a child with medical conditions should discuss this with the school in the first instance

If the issue is not resolved, then a formal complaint may be made, following the **complaints procedure as set out in the College Complaints Procedure.**

## **16. EQUALITY IMPACT STATEMENT**

We will do all we can to ensure that this policy does not discriminate, directly or indirectly. We shall do this through regular monitoring and evaluation of our policies. On review we shall assess and consult relevant stakeholders on the likely impact of our policies on the promotion of all aspects of equality, as laid down in the Equality Act 2010. This will include, but not necessarily be limited to: race; gender; sexual orientation; disability; ethnicity; religion; cultural beliefs and pregnancy/maternity. We will use an appropriate Equality Impact Assessment to monitor the impact of all our policies and the policy may be amended as a result of this assessment.

## **17. MONITORING AND REVIEW**

The Headmaster will be responsible for monitoring the implementation of the policy, and reporting annually to a prescribed committee of the governing body.

This policy will be reviewed by the governing body every year, or earlier if considered necessary.

Reviewed: April 2021

Next review: April 2022

## 18. APPENDIX: PROCESS FOR DEVELOPING INDIVIDUAL HEALTHCARE PLANS



