

# **Moss Side Primary School Policy**

## **Supporting pupils at school with medical needs**



The governors of Moss Side have a duty to ensure that arrangements are in place to support children with medical conditions, so that such children can access and enjoy the same opportunities at school as any other child. The focus should be on the needs of each individual child and how their medical condition impacts on their school life. Parents must be confident in our school's ability to manage any medical condition so that it does not have a detrimental impact on their child's ability to learn or their confidence. It is therefore important that staff are properly trained to provide the support that pupils need. This is the responsibility of the headteacher, who has overall responsibility for the implementation of this policy.

### **Procedures to be followed when a child is admitted with or develops a medical condition**

- For a child starting at Moss Side, arrangements to support that child's condition should be in place from day one (or within two weeks in the case of a mid-term move). This is dependent on a well organised liaison with parents, pre-school providers and health care professionals.
- With the agreement of all the relevant parties a decision will be made regarding the need for an individual Health Care Plan (IHCP).
- If an IHCP is needed a lead member should be appointed (normally a health care professional) to produce the plan in partnership between schools and parents.
- If staff training is identified as necessary, this should be commissioned from the appropriate health care professional.
- The resulting IHCP is then put into place and circulated to all relevant staff.
- The IHCP is then reviewed annually or if the condition changes.

### **Individual Health Care Plan**

The plan should aim to capture the key information and actions required to support the child effectively. The level of detail will be dependent on the complexity of the child's condition and the degree of support needed.

If a child has SEN but does not have an EHCP, their special educational needs should be mentioned in the IHCP. The plan should be developed with the child's best interest in mind, ensuring that the risks to the child's education, health and social wellbeing are observed and managed in a way that minimises disruption.

### **The plan should include:-**

- The medical condition, triggers, signs, symptoms and treatments.
- The pupils resulting needs including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink (where this issued to manage the condition) dietary requirements and environmental issues.
- Specific support for the pupil's educational, social and emotional needs (e.g. extra time for exams).
- The level of support needed including emergencies.
- Who will provide this support, their training needs and cover arrangements for when they are unavailable.
- Who in school needs to be aware of this child's condition and the support required.

- 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 (preferable wherever possible).
- Arrangements or procedures required for school trips or other school activities outside of the normal timetable, to ensure the child can fully participate.
- Where confidentiality issues are raised by the parent/child, the named individuals to be trusted with this information.
- What to do in an emergency, including who to contact and contingency arrangements.
- Training needs for staff on the administration of prescription medicines or healthcare procedures.

### Managing medicines on school premises

- Medicines should only be administered at school when it would be detrimental to the child's health or school attendance not to do so.
- No child should be given medicines in school without their parents' consent.
- School should only accept prescribed medicines that are in date, labelled and provided in their original containers (insulin being an exception to this).
- All medicines should be stored safely; children should know where their medicines are and how to access them.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should not be locked away.
- A record should be kept of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects should be noted.
- Any unwanted medicines should be returned to parents.
- Sharps boxes should always be used for the disposal of needles and other sharps.

NB. See *Administration of medicines policy* for further guidance.

### Defibrillators and cardiac arrests

A defibrillator is available in school in the case of cardiac arrest. Staff have been trained in its use. Mrs Cranmer is responsible for its maintenance.

### First aid training

A list of all staff with up to date training may be found in the first aid boxes. This includes members of staff with paediatric first aid training. Any member of staff should deal with first aid if required to do so but should seek assistance from staff with higher levels of training/experience when required.

### Continuing Education if absence is unavoidable

Sometimes absence is unavoidable due to a medical need but pupils may be fit to continue their education (such as recovering from a leg break). In these cases, work will be provided through liaison with parents. If a stay in hospital is necessary, school will liaise with the appropriate education unit at the hospital.

### Complaints

Any complaints should follow the school feedback policy.