Oakleigh School
& The Early Years Centre

Supporting Children with Medical Conditions Policy

Incorporating:

- Health Policy
- Administration of Medicines Policy
- Drug Education & Misuse Procedures Policy
- Health Flowchart
- Medical forms given to parents (separate attachments)

Statement of intent

The governing board of Oakleigh school has a duty to ensure arrangements are in place to support pupils with medical conditions. The aim of this policy is to ensure that all pupils with medical conditions including physical, receive appropriate support to allow them to have full access to education, including educational visits and activities both on site and off site to enable them to reach their full potential.
This Policy is governed by the statutory guidance and non-statutory advice set out in the document 'Supporting Pupils at School with Medical Conditions' DFE 2015

The school believes it is important that parents of pupils with medical conditions feel confident that the school provides effective support for their children's medical conditions, and that pupils feel safe in the school environment. To ensure that the needs of our pupils with medical conditions are fully understood and effectively supported, we consult with health and social care professionals, pupils and their parents.

All pupils at Oakleigh School have SEND and an EHCP, pupils with a medical condition also have a Heath Care Plan (HCP) collating their health, social and SEND provision. For these pupils, the school's compliance with the DfE's 'Special educational needs and disability code of practice: 0 to 25 years' and the school's Special Educational Needs and Disabilities (SEND) Policy will ensure compliance with legal duties.

Pupils with medical conditions may be classed as disabled under the definition set out in the Equality Act 2010. The school has a duty to comply with the Act in all such cases.

Purposes

- Pupils at school with medical conditions will be properly supported so that they have full access to education, including educational visits and physical education.
- The Governing Body is legally responsible and accountable for ensuring that arrangements are in place in school to support pupils with medical conditions.
- The Governing Body will ensure that school leaders consult health and social care professionals, pupils and parents/carers to ensure that the needs of children with medical conditions are effectively supported.
- The needs of the children include educational impacts, and social and emotional implications associated with medical conditions.
- The Governing Body will ensure that it meets its duty under the Equality Act 2010.
- As our children have an Education Health and Care Plan (EHCP) or are in the process of receiving an EHCP, this policy operates in conjunction with the SEN Code of Practice.

Guidelines

- All relevant staff, including supply staff, are aware of children's conditions.
- Risk assessments for educational visits and other school activities include reference to children's medical needs.
- Individual healthcare plans are kept up to date by the NHS Special School Nursing Team.

- A school leader will consult with the relevant health and social care professionals, the pupil (where appropriate) and parent/carers as soon as notification is received that a child has a medical need. This may include the occupational therapist, physiotherapist and nursing services. Where a child is changing schools, the health and social care professionals linked to the previous setting will be consulted.
- Individual Health Care Plans (HCPs) will be easily accessible to all who need to refer to them, while preserving confidentiality. The level of detail within plans will depend on the complexity of the child's condition and the degree of support needed.
- The school nurse is responsible for ensuring the compiling of HCPs. Plans will be drawn up in partnership between the school, parents/carers, and a relevant healthcare professional, who can best advice on the particular needs of the child.
- HCPs will be reviewed at least annually (around the time of the child's Annual Review), or earlier if evidence is presented that the child's needs have changed. The plans will be 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 well-being and minimises disruption. The HCPs will be linked to or become part of each child's Statement or Education Health and Care Plan (EHCP).
- Any member of school staff providing support to a pupil with medical needs will have received suitable training.
- Staff must not give prescription medicines or undertake health care procedures without appropriate training (updated to reflect this on HCPs).
- If a child refuses to take medicine or carry out a necessary procedure, staff will not force them to do so, but follow the procedure agreed in the HCP. Parent/carers should be informed so that alternative options can be considered.
- On a day –to-day basis, staff administering medication will keep written records of all medicines given, and sign to confirm the details.
- Parent/carers will be informed if their child has been unwell at school, either by home-school book, phone call or in person as appropriate.
- We have members of staff in each class who are either trained in First Aid at Work or Paediatric First Aid trained.
- There are First Aid boxes in each class, and in strategic places around the school building. These are kept up to date by the school administrator
- Due to the complexities of some of our children's health, they have to attend a variety of health appointments and unfortunately these appointments can be during school time. Where possible, the school nurse liaises with local hospitals such as Barnet hospital to perhaps be more accommodating with times and ensure the appointment is outside of school hours or the first or last appointment of the day which then enables the child to attend half the school day. This may not always be possible but best efforts are usually made.
- In order to support our children and families, we hold several paediatrician clinics throughout the year at Oakleigh School and this reduces pupil absence. Not all of the children are seen by this paediatrician but it is beneficial for those who are.
- We have a few children that attend additional / private therapy during the day and as a school we are flexible in supporting the families with this. In this instance the children are marked as 'M'- medical appointment.

Health Policy

Aim
Oakleigh is both an educational and a caring environment. For teaching and learning to be of the highest quality we need children and staff to be as fit and healthy as possible.

Rationale
When children are ill in the school it presents problems for several reasons. We do not have facilities for them to be looked after except in a busy classroom or a very small medical room and this is not fair on a child who is feeling unwell. Viral and bacterial infections spread very quickly through schools and many of our children are extremely vulnerable and particularly at risk. Staff work closely with the children and are also vulnerable to infection and staff absence due to sickness means that the quality of education may be affected. Parents/Carers/Staff and Escorts need to work together to ensure that everyone is aware of each individual child's **regular** state of health.

Guidelines
Parent / Carer Responsibilities

1. Parents/Carers must ensure that school has up-to-date details including the names and telephone numbers of family members or persons to be contacted in an emergency and the GP. A proforma will be checked annually at your child's annual review, so as to be updated. If any details change throughout the year, please let the School Administrator know immediately.

2. Ensuring that they, or another nominated adult, are contactable at all times.

3. Please DO NOT send your child into school if s/he is unwell.

   If your child has a high temperature, s/he should remain at home for at least 24 hours after symptoms have ceased to ensure a full recovery.

   If your child has diarrhoea, or is vomiting, s/he should remain at home for at least 48 hours after symptoms have ceased to ensure a full recovery.

   If your child's temperature is normal but the child is still clearly unwell s/he should remain at home for at least 24 hours after the symptoms have ceased.

4. If your child is on a course of antibiotics and unwell, s/he should remain at home for 48 hours or until recovered.

   If your child is on antibiotics, and/or other medication but has no obvious 'symptoms', school should be informed regarding the medication and for what purpose it is being taken. Parents should make themselves available to be contacted during this time.

   If you need to send in medicine for your child, please ensure it is sent into school in the original container, labelled with the Pharmacist's instructions and the child's name and a clear expiry date. The medicine needs to be accompanied by a consent form and a copy of the prescription. These are available from the nursing team. Please hand the medication to the escort / LSA who will take it directly to the nursing team.

   Please let the school know if your child has had medication, including Calpol/Buccal Midazolam at home before being sent in.

5. If your child has a severe epileptic seizure or medical treatment prior to coming to school, please be sure that s/he will be able to cope in a busy classroom without one to one support before you send her/him in.

6. A day at home is often beneficial after a hospital admission for illness, but not after rests or check-ups.

7. If your child has headlice, please do not send them into school until they have been treated.

8. Notify the school if their child has a newly identified medical condition or there is a change in their medical condition. Providing the school with sufficient and up-to-date information about your child's medical needs.

9. If your child's medical condition changes, or after any admission to hospital, please speak to the school nurse before your child returns to school. You may then be asked to come to a return to school meeting, usually with the school nurse, a member of the Leadership Team, and one of the class staff, to make plans for your child's return to school.

School staff will be responsible for:

1. School will send home a proforma, annually, to be updated by parents/carers regarding emergency contacts and GP's names and telephone numbers.

2. Staff will receive sufficient training and achieve the required level of competency before taking responsibility for supporting pupils with medical conditions

3. Staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help. Class staff can radio Leadership on channel 1 or nurses on channel 6 for support. Each class has an emergency cord in case of an emergency. There is also 1 member of staff trained in First aid in each class.

4. If a child is off school for an extended period of time due to a medical reason, blended learning will be offered to the family from the class teacher.

5. If a child is hospitalised class teacher/ leadership lead to liaise with the hospital school staff to discuss / share important documents to enable the child to receive education whilst they are off.

6. If a child has a high temperature, diarrhoea, or vomiting at school, the school nurse will be informed and the parents/carers contacted. It is likely that we will ask you to collect your child.

7. The school nurse will give the appropriate medication according to the instructions given.

8. If a child has an epileptic fit, the school nurse and staff will follow the 'emergency action plan' for each individual. Parents/carers will always be notified if their child has an epileptic seizure.

9. If a child needs to go to hospital, an ambulance will be called. A member of staff will accompany the child to hospital and stay there until the parents/carers arrive. Parents/carers will be contacted immediately after the ambulance is called, and will be asked to make their way to the hospital as quickly as possible.

10. If a child has headlice, the parents/carers of the child will be informed immediately so as an appropriate course of action can be taken as soon as possible. All other parents of the class of children will be informed that there is a case of headlice.

11. If a child becomes unwell towards the end of the day and the school feel that it would not be in the child's best interest to travel home on the bus, the parents/carers will be called to ask if there is an alternative.

12. As a school every attempt will be made to stop cross infection. (The staff health policy is available within school for all to see)

13. If a pupil needs to be taken to hospital, a member of staff will remain with the pupil until their parents arrive.

The school nurse will be responsible for:

- Notifying the school at the earliest opportunity when a pupil has been identified as having a medical condition which requires support in school.
- Supporting staff to implement HCPs and providing advice and training.

- Liaising with lead clinicians locally on appropriate support for pupils with medical conditions.
- The school nurse will identify suitable training opportunities, on a termly basis, that ensure all medical conditions affecting pupils in the school are fully understood, and that staff can recognise difficulties and act quickly in emergency situations.
- **Keeping a record of the children's medication and administration while at school.**

The headteacher will be responsible for:

- The overall implementation of this policy.
- Ensuring that this policy is effectively implemented with stakeholders.
- Ensuring that all staff are aware of this policy and understand their role in its implementation.
- Ensuring that a sufficient number of staff are trained and available to implement this policy and deliver against all HCPs, including in emergency situations.
- Considering recruitment needs for the specific purpose of ensuring pupils with medical conditions are properly supported.
- Having overall responsibility for the development of HCPs.
- Ensuring that staff are appropriately insured and aware of the insurance arrangements.

The governing board will be responsible for:

1. Fulfilling its statutory duties under legislation.
2. Ensuring that arrangements are in place to support pupils with medical conditions.
3. Ensuring that pupils with medical conditions can access and enjoy the same opportunities at school as any other child
4. Working with the LA, health professionals, commissioners and support services to ensure that pupils with medical conditions receive a full education.
5. Ensuring that the focus is on the needs of each pupil and what support is required to support their individual needs.
6. Instilling confidence in parents and pupils in the school's ability to provide effective support.
7. Ensuring that all members of staff are properly trained to provide the necessary support and are able to access information and other teaching support materials as needed.
8. Ensuring that no prospective pupils are denied admission to the school because arrangements for their medical conditions have not been made.
9. Ensuring that pupils' health is not put at unnecessary risk. As a result, the board holds the right to not accept a pupil into school at times where it would be detrimental to the health of that pupil or others to do so, such as where the child has an infectious disease.
10. Ensuring that policies, plans, procedures and systems are properly and effectively implemented.
11. Ensuring that the school's policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support pupils and sets out the procedures to be followed whenever a school is notified that a pupil has a medical condition.
12. Ensuring that the school's policy covers the role of individual healthcare plans, and who is responsible for their development, in supporting pupils at school with medical conditions.
13. Ensuring that plans are reviewed at least annually, or earlier if evidence is presented that the child's needs have changed.

Escort Responsibilities

The escorts will familiarise themselves with this policy and advise parents as appropriate. If a child has a high temperature, sickness or diarrhoea in school the transport will be advised not to pick the child up for the next day that their child has been free of symptoms and should be picked up again. The transport will not resume until the parents/carers inform transport that their child is well. The escort will discuss the child's health with the LSA collecting the child or school nurse on arrival to school where there is a difference of opinion about the child's health between the parents/carers and escort.

Escorts are responsible for checking children's Buccal Midazolam, they must ensure the Buccal is: in date, in the correct box with the label on and seals intact. For the children's safety, they cannot travel or be in school if their Buccal Midazolam does not meet the criteria above. Escorts must hand over the Buccal to the LSA when the child is being collected and check again at the end of the day that it is in the child's bag.

Administration of Medicines Policy

Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so. Guidance on the administration of medicines to pupils is set out in the 'Supporting pupils at school with medical conditions' (September 2014), under the section 'Managing medicines on school premises'. Prescription medicines may be administered to children, at the specific request of the parent or guardian and in accordance with the procedures laid down in the Guidance, signed consent must be available with a prescription sticker on the medication. All medicines provided should be in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. There is an exception to this guidance, Insulin- it is acceptable for the school to store insulin in a pump or a pen, not in the original container. Medicines will be administered by the school nurse, qualified healthcare assistants on site or trained staff on site. Medicines will be stored in a locked medical cabinet in the medical room not accessible to children and in accordance with the guidance. All controlled medication will be stored in the medical cabinets in the child's classroom; this enables the controlled drug to be easily accessible in an emergency.

'Supporting pupils at school with medical conditions' states 'reasonable adjustments' should be made to ensure pupils participate fully and safely on school trips. The school have appropriate forms that need to be completed by staff and the nursing team prior to school trips. These can be found in the nursing office. All medication must be labelled with name, date, time and how it is to be administered.

Where relevant, each pupil has an up to date Health Care Plan (HCP), agreed between the parents/carers and the school nurse. This is reviewed at least annually, or more frequently if needs / medication changes. One child's HCP is reviewed directly by the Royal Free Hospital Diabetes team at least annually, or more frequently if needs medication changes and sent directly to school with any changes or updates. All staff who work with the pupil are aware of the details of the HCP.

'Supporting pupils at school with medical conditions' suggests that local authorities may benefit from transport healthcare plans for pupils with life-threatening conditions. Children with medical conditions will travel with a health care plan, ensuring escorts have access, as appropriate, covering areas including diabetes, asthma, epilepsy which may require rectal diazepam or buccal midazolam, suctioning, allergic reactions which requires an adrenaline pen, and complex or unusual or rare medical conditions

Drug Education & Misuse Procedures Policy

Introduction

In formulating this policy the staff and governors are aware that:

i. for many children at Oakleigh School 'drugs' include prescribed medications that are necessary for the maintenance of health. Elements of the Science & PSHE curriculum as well as daily contact with a nurse administering medication will teach them about the role of drugs as medicines for those children it may be relevant for.

ii. different children are at different levels of risk from drug abuse and that some will not be able to exercise choice about being subjected to harmful substances e.g. smoky environments. For these children their adult carers need to be aware of the dangers and discomforts that could be caused. All carers are asked to inform the school of any special dietary requirements, including their child's intolerance of additives found in food and soft drinks. Their wishes will be complied with.

iii. due to the nature of their learning difficulties, our children are less likely to come into contact with dangerous and illegal substances used by some of their mainstream peers. However, they may need to develop awareness of possible dangers in their environment, particularly from injecting harmful substances. Elements of the Science & PSHE curriculum will teach them that tobacco, alcohol and other drugs can have harmful effects for those children it may be relevant for.

Aims

The aims of drug education at Oakleigh are as follows:

- to teach children about the role of drugs as medicines
- to raise awareness that these drugs are only safe in prescribed doses, and when administered by a familiar adult.

- to raise awareness of the harmful effect of ingesting any unknown substances or drugs including tobacco and alcohol.
- to equip children to recognise healthy lifestyles

Drug Related Incidents
Some of our children are already monitored with regard to unusual behaviours and whether this has resulted from a change in medication. Such matters are usually discussed with the headteacher and the nurse who will liaise with parents/carers, general practitioners and consultants to overcome such effects.

Many children carry drugs to school with them on a daily basis and these are handed over to staff on arrival. Staff need to always be aware that drugs have been handed over and locked away, and not left in a child's bag on a peg where they could be found by other children.

Other possible drug-related incidents include:
- a child in possession of substances or tablets etc that may cause him/her harm. These may have been found in school, on the school grounds e.g. syringes, cigarette butts, empty cans etc
- a child disclosing information related to drug incidents
- any other incidents that staff consider to be related to drugs

In all cases concerns must be reported immediately to the headteacher and/or nurse. Any safeguarding issues will be dealt with as above. Information will be uploaded to our online safeguarding portal, CPOMS and relevant staff such as leadership leads will be alerted to the incident. Appropriate channels will be to be followed.

Health and Safety
The school policy on the administration of drugs aims to prevent misuse of prescribed medication. The site manager inspects the premises on a daily basis for substances, litter etc that may be harmful to our children. He reports incidents of concern to the Headteacher and the police if necessary.

Because of the high levels of supervision in operation at all times in school and the fact that all of our children are either transported home or collected by their parents/carers, there is little risk of them coming into contact with anyone who is likely to subject them to the pressure of accepting drugs during school hours.

First Aid/Emergency procedures
Each class has one or more First Aiders, who are available to deal with emergencies. First Aiders will also be called upon in emergencies, using the school emergency alarms.

Warning signs and Disclosures

Staff need to be aware that warning signs of drug abuse can include the following:
- decline in performance in school work
- unusual outbursts of temper, marked swings of mood and restlessness
- sores or rashes, especially round the mouth
- lack of appetite
- dilated pupils
- child has been witnessed ingesting a harmful or toxic substance
- unexplained breathing difficulties
- loss of consciousness
- confusion or intoxication

Child disclosures or any of the above signs must be reported to the Headteacher, Deputy Headteacher, Assistant Headteacher or school nurse immediately.

Procedures for drug related incidents

1. Child misuse of medication

Wherever it is known or suspected that a child has taken medication belonging to them or another person, without adult supervision, the matter must be reported immediately to the

headteacher and school nurse and/or other safeguarding lead. Parents/Carers will be informed and suitable medical advice taken. Accident forms will be completed and where hospitalisation occurs, the Borough Health and Safety Officer will be informed.

2. Possession of controlled drugs and substances

The headteacher and nurse should be informed immediately so that appropriate action and treatment can be taken for the child.

The parent/carer will be informed, as well as the Educational Welfare Officer and Social Services. Following their advice, the police may be contacted.

Contacting Emergency Services

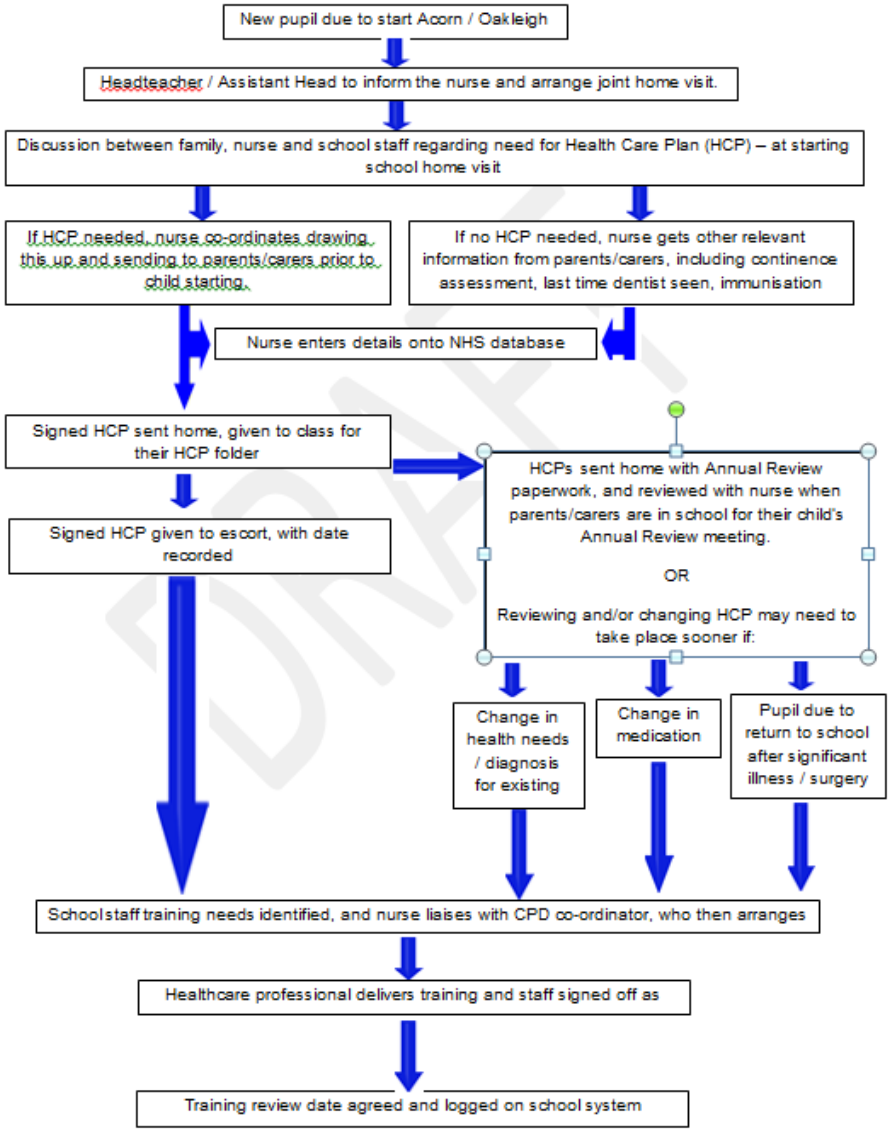
To be stored by the phone in the school office

Request an ambulance – dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly, and be ready to repeat information if asked.

1. The telephone number: school phone number.
2. Your name.
3. Your location as follows: full address of school.
4. The postcode: school postcode.
5. The exact location of the individual within the school.
6. The name of the individual and a brief description of their symptoms. Have the child's HCP available or Office to provide key details of age, diagnosis etc.
7. The best entrance to use and where the crew will be met and taken to the individual.

Health Flowchart – Acorn and Oakleigh



References:

Supporting pupils at school with medical conditions, DfE, September 2015
The Children and Families Act 2014
SEND Code of Practice 2015
Guidance on Managing Healthcare Needs in Schools and Settings, Barnet LA, 2010
Oakleigh School Attendance Policy (Children)