

GORDON'S SCHOOL

SUPPORTING STUDENTS AT SCHOOL WITH MEDICAL CONDITIONS POLICY

The core principle that guides everything we do is **Putting Students First**.

1. Introduction

Our aim is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential. Students with long-term and complex medical conditions may require on-going support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances.

2. Notifying school when a child has a medical condition

Parents and/or guardians should provide the school with sufficient and up-to-date information about their child's medical needs. This is done initially via the 'Medical consent and questionnaire' that is completed on joining the school. Subsequent changes to a child's medical needs should be raised directly with the School Medical Centre or by using the 'Medical Information Update Form' on the School's website.

For children starting at Gordon's, any appropriate health care arrangements should be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or children moving to Gordon's mid-term, every effort will be made to ensure that arrangements are put in place within two weeks.

In cases where a student's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on the available evidence. This would normally involve some form of medical evidence and consultation with parents.

3. Individual Health Care Plans (IHCPs)

Individual Health Care Plans (IHCP) help to ensure that students with medical conditions are supported. They provide clarity about what needs to be done, when and by whom. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. IHCPs are likely to be helpful in the majority of other cases, especially where medical conditions are long-term and complex. However, not all children will require one.

IHCPs will be initiated, in consultation with the parent, by a member of the School Medical Centre or another healthcare professional involved in providing care to the child. Plans will often involve a relevant healthcare professional, e.g. specialist or children's community nurse, who can best advise on the particular needs of the child. Students will also be involved whenever appropriate. The aim should be to capture the steps which a school should take to help the child manage their condition and overcome any potential barriers to getting the most from their education.

IHCPs are circulated to the relevant members of staff 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. IHCP's will be reviewed annually or earlier if evidence is presented that the child's needs have changed.

The type of information contained in an IHCP may include the following;

- The medical condition, its triggers, signs, symptoms and treatments;
- the student'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;

- specific support for the student'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;
- 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;
- who in the school needs to be aware of the child's condition and the support required;
- 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;
- where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition; and
- what to do in an emergency, including whom to contact, and contingency arrangements.

4. Disabled students, students with SEN and pupils with a social, emotional or mental health care need

Students with a SEN or a disability should either have an Educational Health Care Plan (EHCP) or Individual Welfare Plan (IWP). Please refer to the Gordon's School SEN policy. Students with a social, emotional or mental health care need should have an SEMH plan.

5. Short-term, extended and/or frequent absences

Where a student's Medical Condition has caused short-term, extended and/or frequent absences the parent is required to inform the Deputy Head Pastoral, in writing, of the circumstances. Written confirmation from the relevant Healthcare professional may also be required. From there it is intended that a suitable plan is agreed for catching up on work that is missed, communication between school, home and/or an alternative provider of education (such as hospital education or home tutor) and details relating to reintegration to school.

Open and regular communication between the parent and School is required to keep all parties up to date and put the school in a position to support the student and their family in the best way possible.

6. Staff training and support

Members of staff who have significant involvement with a child with complex medical needs will receive suitable training, either from the School Nurses, other health care professionals or other training providers.

Training needs are identified during the development or review of Individual Health Care Plans. Some staff may already have some knowledge of the specific support needed by a child with a medical condition and so extensive training may not be required.

The School Nurses will normally lead on identifying and agreeing with the school the type and level of training required, and how this can be obtained. Training should be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual healthcare plans. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

Staff must not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect any IHCPs). Please see 'Gordon's School Policy for the Administration and Handling of Medicines'.

The School Nurses provide whole school awareness training so that all staff are aware of certain widely occurring medical conditions such as Asthma and Diabetes and rare but essential management of emergencies such as sudden cardiac arrest and anaphylaxis. The setting for these awareness training sessions is typically INSET day. Induction arrangements for new staff are also included. The relevant healthcare professional will advise on training that will help ensure that a medical condition affecting

student in the school is understood fully. This includes preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.

7. The Child's role in managing their own medical needs

Students with long-term medical conditions and who are deemed competent may be encouraged to take responsibility for managing their own medicines and procedures. This should be reflected within the students Individual Health Care Plan. Students who are managing their own medicines will also be required to complete a self-medication risk assessment form, co-signed by a School Nurse.

Wherever possible, and where it is safe to do so, all students will be allowed to administer their own emergency medicines and carry relevant devices or should be able to access their medicines and devices for self-medication quickly and easily. Students who do take their medicines themselves or manage procedures may require an appropriate level of supervision. If it is not appropriate for a student to self-manage, then relevant staff will help to administer medicines and manage procedures for them.

If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the IHCP. Parents should be informed so that alternative options can be considered.

8. Managing medicines on school premises

Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside of school hours. Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so.

For detailed information please see 'Gordon's School Policy for the Administration and Handling of Medicines'.

9. Working with others

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. Effective support will depend on working cooperatively with other agencies. Partnership working between school staff, healthcare professionals (and where appropriate social care professionals), local authorities, and parents and students themselves is critical.

10. Records and record keeping

Computerised nursing records are maintained and stored securely in the Medical Centre. Individual student health records detailing the administration of medicines, consultations, in and out of school appointments and medical correspondence are entered on a secure database accessible only by the Medical Centre staff. Other trained Staff administering medications in the Houses will use either the secure database 'Patient Tracker', the secure Prescription Spreadsheets or the Controlled Drug Administration book as appropriate.

11. Day Trips, residential visits and sporting activities

The school actively supports students with medical conditions or disability to participate in school trips and visits, or in sporting activities. Teachers and other Trip Leaders should be aware of how a student's medical condition will impact on their participation, but there should be enough flexibility for all children to participate according to their own abilities and with any reasonable adjustments, unless evidence from a clinician such as a GP states that this is not possible.

The Medical Centre is responsible for the collation of relevant Medical Information for students attending trips. The Trip Leader is responsible for collecting the trip pack directly from the Medical Centre where any concerns or specific issues can be addressed. Where possible a first aider should accompany all trips.

For residential and overseas trips there is a 'Guidance for Trips' pack available from the Medical Centre which should be kept by the designated first aider on the trip. The pack contains a medicines administration protocol and record sheet, a self-administration risk assessment form and pupil injury

forms. The first aider will be responsible for storage, recording and administration of prescribed and non-prescribed medication. Record of Controlled Drugs received is made on a dedicated Controlled Drug log.

Teachers supervising sporting activities should be aware of relevant medical conditions and emergency procedures. Student's essential medical information is available in report format on SIMS and SOCS. Students who need to take precautionary measures before or during exercise should be allowed immediate access to their medication, e.g. asthma inhalers, at all times.

12. Green and Yellow card system

Students with a known medical need may be issued with a 'green card' at the discretion of the School medical centre. This card allows Students to leave the classroom and go to the School office unchallenged, provided the Student is well enough to do so.

Students with a known toileting problem will be issued with a 'yellow card' at the discretion of the School medical centre. This card allows Students to leave the classroom unchallenged should the need arise.

The names of Students issued with green or yellow cards will be circulated daily to School staff on the 3pm bulletin.

13. Unacceptable Practice

Although school staff should use their discretion and judge each case on its merit with reference to the child's Individual Health Care Plan, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume 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);
- 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 Health Care Plans;
- if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments;
- prevent students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
 - 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.
 - prevent children from participating or create unnecessary barriers to children participating in any aspect of school life, including school trips.

Julie Unsworth
Lead School Nurse

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