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**Whole-School Policy on Supporting Students with Medical Conditions**

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**Staff Responsible:**

**Medical Lead Professional**

## **SECTION 1: PREFACE**

This policy reflects relevant statutory and non statutory advice within Supporting Students at School with Medical Conditions (2014)<sup>1</sup>.

### DEFINITIONS

Medical conditions encompass both physical and mental illnesses which may be diagnosed or under investigation.

Some children with medical conditions may be disabled and in this respect we recognise our duties under the Equality Act 2010 and are compliant.

### KEY PRINCIPLES

1. Children and young people at CCS with medical conditions are properly supported so they have full access to the curriculum and extra curricula opportunities.
2. To liaise with multi agency health professionals and parents/ carers to ensure that the needs of children with medical conditions are met

## **SECTION 2: AIMS**

Our primary aim is to ensure that all children with medical conditions, in terms of 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.

At CCS we work proactively with parents and carers to ensure that they are confident we are meeting their child's needs.

We recognise that supporting children with medical needs is a whole school responsibility and all staff should take into account the medical needs of students within their remit of care. This may not include administering of medicines as this is dependent on the level of training and is in most instances the responsibility of the Medical Lead Professional.

We recognise that the medical needs of children change and our procedures reflect these changing needs and facilitate an individual response to these needs.

<sup>1</sup> S100 of the Children and Families Act 2014 places a duty on governing bodies to make arrangements in school to support students with medical conditions

No child will be refused admission on the grounds of their medical condition, except in the case of infectious diseases. Our Medical Lead Professional works with parents to advise on meeting both the medical and educational needs of children with the intention of acting in the child's best interests.

### **SECTION 3: PROCEDURES**

At CCS we have a full time qualified nurse (Medical Lead Professional) as a member of our staff body. Upon notification of a medical condition the Medical Lead Professional will contact parents to discuss needs and formulate a care plan. As part of this process the Medical Lead will share this information with staff that need to be aware of it and will ensure that any relevant training for staff is in place.

At CCS we recognise that some children with medical needs may need time out of school to support their health. We liaise with health professionals and work proactively to facilitate as much access to the curriculum as possible. As part of this from time to time we may seek alternative provision, phased returns and reduced timetables. These decisions are taken in consultation with parents and in the light of advice from healthcare providers and are with the aim of supporting both medical and education needs for young people in our care.

#### **Individual care plans**

At CCS individual health care plans help to ensure that we effectively support students with medical conditions. They provide clarity about what needs to be done, when and by whom. Care plans are drawn up in consultation with parents and are circulated to all relevant staff. They are reviewed annually and where staff training needs are identified we take steps to ensure that this happens. Where possible we involve students in this process. If a child has special educational needs the care plan will reflect these additional needs, unless the child has an Education Health and Care Plan issued by the local authority.

Care plans have regard to the following:

- The medical condition- triggers, signs, symptoms and treatment
- Medication needs- dose, side effects and storage of
- Other treatments- equipment, access to food and drink if required, dietary requirements and environment issues, for example relevant access arrangements and counselling where appropriate
- Level of Support- we recognise that some children will be able to take responsibility for their own health needs which will be clearly stated and monitored by the Medical Lead Professional
- Named Medical Lead Professional and arrangements to deputise in their absence by a qualified first aider

### **Staff Training**

Training needs are identified by care plans and the needs of the school. Relevant training is provided for staff and regular opportunities for high quality first aid training are made available for all staff. We aim for at least a third of all staff on site to be qualified first aiders. We recognise that staff must not give medicines or undertake healthcare procedures without full training. A first aid certificate does not constitute appropriate training in supporting such medical conditions and medication needs.

### **The Child's Role**

At CCS we recognise that wherever possible children should be allowed to carry their own medicines and relevant devices. Children who can take their medicines themselves or manage procedures may require some supervision. If it is not appropriate for a child to self manage, relevant staff should help to administer medicines and manage procedures for them.

If a child refuses to take medicine, we will not force them to do so, but will follow the agreed procedure in the care plan and inform parents.

### **Managing medicines**

Medicines can be administered in school by the Medical Lead Professional when it is felt that medication could improve child's health and access to the curriculum. In the absence of the Medical lead professional medication cannot be administered, unless the medicine is prescribed and written consent is provided. All prescribed medication should be held within the medical room, not with the child with the exception of epi-pens, inhalers, and glucometers.

With the exceptions noted above all other medicines are stored safely in the medical room, and children are able to access them via a member of staff if needed.

### **Unacceptable practice.**

At CCS it is generally not acceptable practice to:

- Prevent children from easily accessing their inhalers and medications, and administering their medication when and where necessary.
- Assume every child with the same condition requires the same treatment.
- Ignore the views of the child, their parents or medical 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 care plan.

## Caroline Chisholm School Governing Body

### Caroline Chisholm School Aims and Objectives

- If a child becomes ill, send them to the medical room unaccompanied.
- Penalise children for their attendance record if their absence is related to medical conditions. It should be noted that we are required to ask for medical evidence should a child's attendance drop below 85%.
- Prevent children from eating, drinking or taking toilet breaks in order to manage their medical needs.
- Require parents to attend school to administer medication, or to give medical care.
- Prevent children from participating in any aspect of school life.

### **Liability and indemnity**

At CCS we have an appropriate level of insurance in place across the campus.

### **Complaints**

If any parents has any concerns regarding our handling of medical conditions please raise them in the first instance with the medical lead professional details of our complaints procedure to the governing body can be supplied upon request.

### **Roles and Responsibilities**

There is a named medical lead in school who is the qualified full time school nurse and is directly employed by CCS. In conjunction with the Assistant principal for Inclusion this Medical Lead is responsible for: ensuring all staff are suitably trained; ensuring awareness of medical needs across the campus; updating SIMS so that this information is readily available by all staff including supply staff; ensuring relevant risk assessments are in place for extra curricular visits and school activities; establishing, disseminating and monitoring individual health care plans.

In the absence of the Medical Lead Professional a qualified first aider will deputise to a level commensurate with their training and ability.

### **Confidentiality**

Confidentiality is paramount to our practice, medical information is securely stored and shared only with relevant staff.

### **Record keeping**

Written records are kept of all medicines administered to students, and accident books are kept within school recording any injuries, accidents or near misses.

**Emergency procedures**

In the case of an emergency the medical lead professional will attend the incident and act appropriately. In the absence of the Medical lead professional a qualified first aider will attend

Where a child has a care plan in place, this should clearly state what constitutes as an emergency and what to do.

If a child needs to be taken to hospital staff will stay with the child until a parent arrives or accompany them to hospital should it be necessary.

CCS have a defibrillator, in which over a third of staff members are trained to use, the ambulance service is aware of this.

Caroline Chisholm School Governing Body  
Caroline Chisholm School Aims and Objectives

**School**.....Caroline Chisholm School.

**A. Named staff/personnel with designated responsibility for Managing Medical Needs of Children**

Medical Lead Professional – Charlee Welford

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