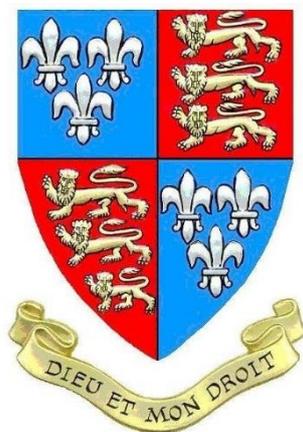


King Edward VI Grammar School



Supporting Pupils with Medical Conditions Policy

v.4

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Designation: Assistant Head
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Committee Chair: Dale Crombleholme
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"Encouraging Excellence, Nurturing Talent in Every Individual"

Statement of intent

The aim of this policy is to ensure that all pupils with medical conditions (physical and emotional mental health) receive appropriate support. This will allow them to play a full and active role in school life remain healthy, have full access to education (including school trips and physical education) and achieve their academic potential.

KEVIGS believes it is important that parents/carers of pupils with medical conditions feel confident that the school provides effective support for their child's medical condition, and that pupils feel safe in the school environment.

The role of the governing body

- Ensures that policies, plans, procedures and systems are properly and effectively implemented to support pupils with medical conditions, so that they can access and enjoy the same opportunities as any other child at the school.
- Ensures that no prospective pupil is denied admission to the school because arrangements for their medical condition have not been made.
- Ensures that pupils' health is not put at unnecessary risk. As a result, it 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.

The role of the Headmaster

- Ensures that all staff are aware of this policy and understand their role in its implementation.
- Ensures that a sufficient number of staff are trained and available to implement this policy and deliver against all individual healthcare (IHC) plans, including in emergency situations.
- Considers recruitment needs for the specific purpose of ensuring pupils with medical conditions are properly supported.
- Has overall responsibility for the development of IHC plans.
- Ensures that staff are appropriately insured.

The role of parents/carers

- Notify the school if their child has a medical condition.
- Provide the school with sufficient and up-to-date information about their child's medical needs.
- Are involved in the development and review of their child's IHC plan and carry out any agreed actions contained in the IHC plan.
- Ensure that they, or another nominated adult, are contactable at all times.

The role of pupils

- Are fully involved in discussions about their medical support needs.
- Contribute to the development of their IHC plan.

- Are sensitive to the needs of pupils with medical conditions.

The role of school staff

- Are aware of the students with medical conditions and take into account the needs of those pupils in their lessons.
- Know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

1. Admissions

- No child is denied admission to the school or prevented from taking up a school place because arrangements for their medical condition have not been made.
- A child may only be refused admission if it would be detrimental to the health of the child to admit them into the school setting.
- For a pupil starting at the school in September, arrangements are in place prior to their introduction and information will be obtained from their previous school.
- Where a pupil joins the school mid-term or a new diagnosis is received, arrangements are put in place as soon as possible.

2. Notification procedure

- Parents are asked to notify the school through the Learning Support Department that he/she has a medical condition that requires support in school.
- Staff will be informed of this medical condition by the Learning Support team and arrangements will then be put in place in school. This may include an Individual Health Care Plan (IHCP). See section 4.
- A flowchart of procedures is found at Appendix A.

3. Staff training and support

- Staff will be made aware of all students that have a medical need. This includes supply teachers who will be informed of all relevant medical conditions of pupils in the class they are providing cover for.
- If training is required in order to support the needs of any of these pupils, this will be decided and arranged by the Learning Support Team and where required a medical professional.
- Whole school awareness training is carried out each September for all staff, and is included in the induction programme of new staff members.

4. Individual healthcare (IHC) plans

- If an Individual Health Care Plan (IHCP) is required, parents/carers and the pupil will meet with the Head of Learning Support and if required healthcare professionals, to discuss and set up a plan. The school does not need to wait for a formal diagnosis before providing support to pupils.
- A blank IHCP is found at Appendix B. It includes information on the medical condition, symptoms and triggers, signs and treatment, emergency contact information.
- IHC plans are accessible on SIMS for staff, but confidentiality is preserved.
- IHC plans are reviewed on an annual basis, or when advised by a parent that their child's medical circumstances have changed.

5. Managing Medicines & Self-management

- King Edward's encourages pupils to manage their own health needs and take responsibility for self-managing their medicines and procedures. Pupils are therefore allowed to carry their own medicines for each day and relevant devices. However, should a parent wish for their child not to keep their medication on them in person, it can be kept at Student Reception.
- Disclaimer: If medication is left in school, it is the parent's responsibility to ensure that all medication kept in school is in date and replaced as necessary. Old medication needs to be collected from school.
- Disclaimer: Parents need to inform the school if there are any changes to the health needs of their child.
- Only essential, prescribed medicines will be administered during the school day and parental consent must be given for all pupil's under 16 years. Pain relief medicines are never administered without first checking when the previous dose was taken and the maximum dosage allowed.
- A record will be kept of any medication handed to a student (Appendix C) and parents contacted via email.
- If a child refuses to take medicine or carry out a necessary procedure, staff will not force them to do so. Instead, the procedure agreed in the pupil's IHC plan is followed. Following such an event, parents/carers are informed so that alternative options can be considered.
- One months' notice will be given to parents, via email that the medication in school will soon expire. Should we not hear anything from parents after they have expired, they will be returned to parents/carers for safe disposal.

6. Medical Illness and Attendance

- A student's medical condition may affect their attendance at school. Such absences are not to be treated in the same way as poor attendance or truancy.
- Following Lincolnshire County Council Reduced Timetables Guidance:
Pupils should be provided with sufficient and appropriately differentiated work to do for those hours they are not in school. Arrangements should be made to ensure that the work is marked, assessed and that constructive feedback is given to the pupil.
Where a pupil has an on-going medical condition, which necessitates missing more than 15 school days (or more than 30 sessions) as a result of the condition, consideration should be given to a referral to the Pilgrim Hospital School. Any application will need to be supported by robust medical evidence. (N.B PLEASE NOTE THIS IS 15 CONSECUTIVE ABSENCE BEFORE PILGRIM REFERRAL WILL BE ACCEPTED).
- If the attendance is affected by Emotionally-Based school refusal (EBSR) rather than a medical condition please see this KEVIGS Attendance Policy for further information.

6 Reduced Timetables

- KEVIGS will follow Lincolnshire County Council guidance on reduced timetables. This states that:
In very exceptional circumstances there may be a need for a temporary part-time timetable...for example, where a medical condition prevents a pupil from attending full-time education and a reduced or part-time timetable is considered as part of a re-integration package.
The reduced timetable should be for a limited period. The suggested maximum length of a reduced timetable is 8 weeks and should be reviewed regularly.

7 Emergency procedures

- Medical emergencies are dealt with under the school's emergency procedures.
- Pupils are informed in general terms of what to do in an emergency, such as telling a teacher.
- If a pupil needs to be taken to hospital, a member of staff remains with the child until their parents/carers arrive.

8 Day trips, residential visits and sporting activities

- Pupils with medical conditions are supported to participate in school trips, sporting activities and residential visits. Advice is sought from pupils and parents/carers.

- If/when required a risk assessment will be produced to enable pupils with medical conditions to participate.
- Should a medical event occur on a trip staff are requested to complete the necessary accident forms on return to school, as advised by the Health and Safety Committee.

9 Liability and indemnity

- The King Edward VI Academy Trust holds a Risk Protection Arrangement (RPA) with the DfE. There is unlimited employers, 3rd party public and professional indemnity. Membership Number: T9635329.

10 Defibrillators

- The school has a LifePak Physio Control automated external defibrillator (AED).
- The AED is stored on the wall outside the Exam's Office in the rear Lobby of the Lodge.
- All staff members and pupils are aware of the AED's location and what to do in an emergency. No training is needed to use the AED, as voice and/or visual prompts guide the rescuer through the entire process from when the device is first switched on or opened; however, staff members first aid qualified are trained in cardiopulmonary resuscitation (CPR), as this is an essential part of first-aid and AED use.

11 Complaints

- Parents/carers or pupils wishing to make a complaint concerning the support provided to pupils with medical conditions are required to speak to the school in the first instance.
- If they are not satisfied with the school's response, they may make a formal complaint via the school's complaints procedure.

12 Legislative framework

This policy has due regard to legislation including, but not limited to:

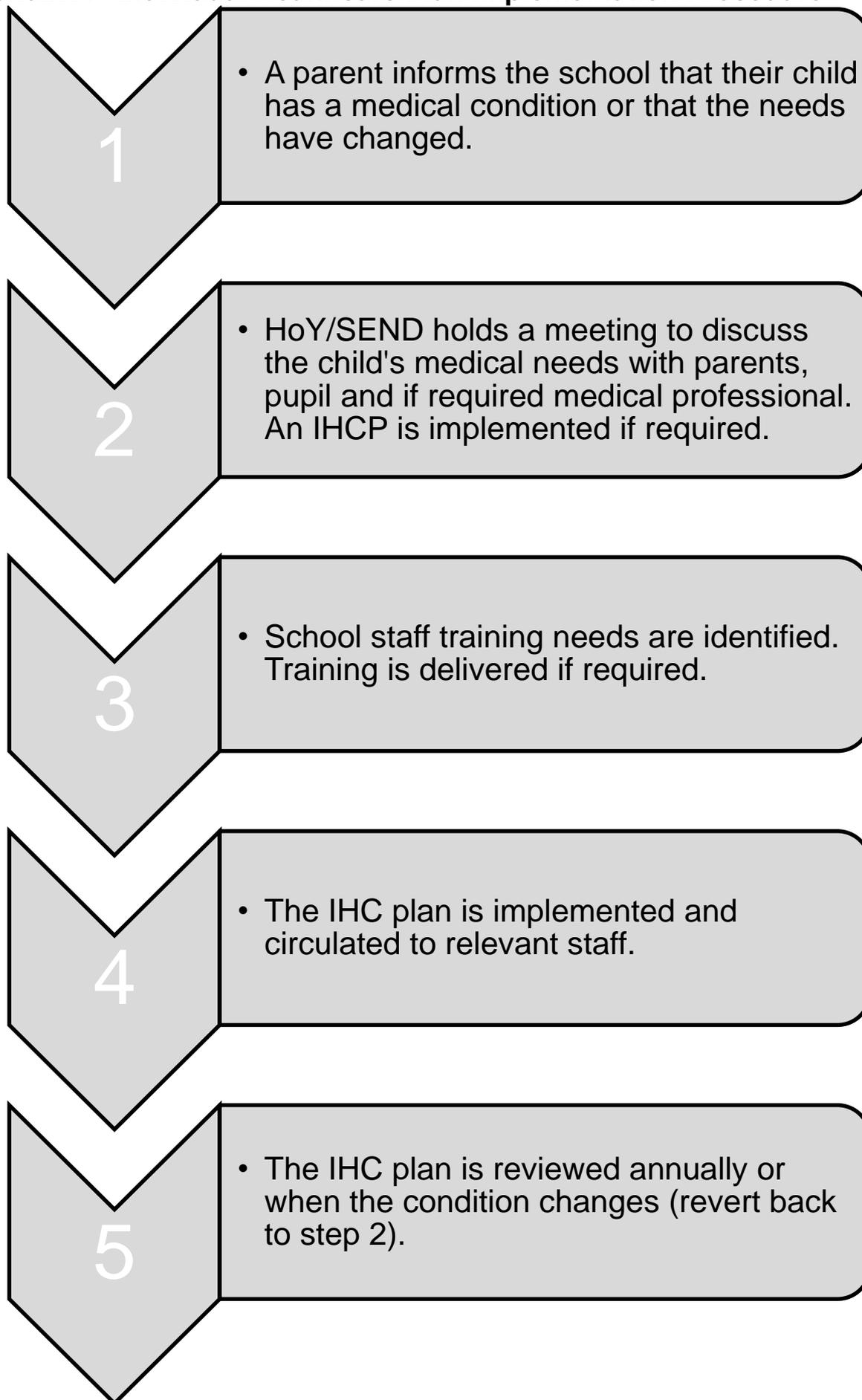
- The Children and Families Act 2014
- The Education Act 2002
- The Education Act 1996 (as amended)
- The Children Act 1989
- The NHS Act 2006
- The Equality Act 2010
- The Health and Safety at Work etc. Act 1974
- The Misuse of Drugs Act 1971
- The Medicines Act 1968
- The School Premises (England) Regulations 2012 (as amended)

- The Special Educational Needs and Disability Regulations 2014

This policy also has due regard to the following guidance:

- DfE (2015) 'Special educational needs and disability code of practice: 0-25 years'
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfEE (2000) 'First aid in schools'
- Ofsted (2015) 'The common inspection framework: education, skills and early years'

Appendix A - Individual Healthcare Plan Implementation Procedure



Appendix B – Individual Healthcare Plan

KING EDWARD VI GRAMMAR SCHOOL
LOUTH

HEALTH CARE PLAN

Child's Details:

Full name:

All Staff

Address:

Date of last training of staff:

Date of Birth:

Precautionary measures:

Concern

1

2

Contact Details:

Consent and agreement signed by parent.

Name of parent:

I agree to the staff taking responsibility and administering medication/treatment in the event of a reaction taking place.

Telephone number:

Mobile Number:

Name

Second contact name and number

Signature

.....

Date

Details of Child's GP:

Name:

NB. It is the parent's responsibility to ensure that all medication kept in school is in date and replaced as necessary.

Telephone number:

Medication:(please complete)

Name(s) of medication

Expiry details

Storage

Training:

