



STATUTORY POLICY. 2019-20

Introduction:

Scotforth St Paul's is an inclusive school community that welcomes and supports pupils with medical conditions.

The school aims to provide all pupils with any medical condition the same opportunities as others at school.

The school believes that pupils with medical needs should be enabled to have full attendance.

Pupils' medical needs may be broadly summarised as being of two types:

- (a) Short-term - affecting their participation in school activities and for which they are on a course of medication
- (b) Long-term - potentially limiting their access to education and requiring extra care and support (deemed special medical conditions)

POLICY STATEMENT

Rationale

LAs and schools have a responsibility for the health and safety of pupils in their care. The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of their employees and anyone else on the premises. In the case of pupils with special medical needs, the responsibility of the employer is to make sure that safety measures cover the needs of all the pupils at the school. This may mean making special arrangements for pupils who may be more at risk than their classmates. Individual procedures may be required. The employer is responsible for making sure that relevant staff know about and if necessary trained to provide any additional support these pupils may need.

The Children and Families Act 2014, from Sept 2014, places a duty on Governing Bodies of schools to make arrangements for supporting children with medical conditions.

Pupils with special medical needs have the same right of admission to school as any other children and cannot be refused admission or excluded from school on medical grounds alone.

However teachers and other school staff in charge of pupils have a common law duty to act in loco-parentis and may need to take swift action in case of an emergency. This duty also extends to teachers leading activities that may be taking place off the school site. This could extend to a need to administer medication.

The prime responsibility for a child's health lies with the parent* (*the term 'parent' implies any person or body with parental responsibility such as foster parent, carer, guardian or local authority) who is responsible for the child's medication, and should provide the school with all the relevant information.

Aims:

- This school aims to provide all children with all medical conditions the same opportunities as others at school. We will help to ensure they can:

- + be healthy
 - + stay safe
 - + enjoy and achieve
 - + make a positive contribution
 - + achieve economic well-being
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- Pupils with medical conditions are encouraged to take control of their condition. Pupils feel confident in the support they receive from the school to help them do this.
 - This school aims to include all pupils with medical conditions in all school activities.
 - Parents* of pupils with medical conditions feel secure in the care their children receive at this school.
 - This school ensures all staff understand their duty of care to children and young people in the event of an emergency.
 - All staff feel confident in knowing what to do in an emergency.
 - This school understands that certain medical conditions are serious and can be potentially life-threatening, particularly if ill managed or misunderstood.
 - This school understands the importance of medication and care being taken as directed by healthcare professionals and parents.*
 - This school is committed to identifying and reducing triggers that can make medical conditions worse, both at school and on off site visits.
 - All staff including temporary or supply staff understand the common medical conditions that affect children at this school. Staff receive training on the impact this can have on pupils.
 - The medical conditions policy is understood and supported by the whole school and local health community.
 - The school monitors and keeps appropriate records.
 - The named member of school staff responsible for this Medical Conditions Policy is: Mrs A. Aylott

Entitlement:

This school accepts that all employees have rights in relation to supporting pupils with medical needs as follows:

- Choose whether or not they are prepared to be involved
- Receive appropriate training
- Work to clear and consistent guidelines
- Have concerns about legal liability
- Bring to the attention of management any concern or matter relating to supporting pupils with medical needs

Responsibilities

Lancashire LA has a responsibility to:

- Ensure the health and safety of their employees and anyone else on the premises or taking part in school activities (this includes all pupils). This responsibility extends to those staff and others leading activities taking place off-site, such as visits, outings or field trips.
- Ensure health and safety policies and risk assessments are inclusive of the needs of pupils with medical conditions.
- Make sure the medical conditions policy is effectively monitored and evaluated and regularly updated.
- Provide indemnity for staff who volunteer to administer medication to pupils with medical conditions.

The Headteacher has a responsibility to:

- Ensure the school is inclusive and welcoming and that the medical conditions policy is in line with local and national guidance and policy frameworks.
- Liaise between interested parties including pupils, school staff, special educational needs coordinators, pastoral support/welfare officers, teaching assistants, school nurses, parents, governors, the school health service, the local authority transport service, and local emergency care services.
- Ensure the policy is put into action, with good communication of the policy to all.
- Ensure every aspect of the policy is maintained.
- Ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place using pupils' Healthcare Plans.
- Ensure pupil confidentiality.
- Assess the training and development needs of staff and arrange for them to be met
- Ensure all supply teachers and new staff know the medical conditions policy.
- Maintain the school medical conditions register.
- Monitor and review the policy at least once a year, with input from pupils, parents, staff, governors and external stakeholders.
- Update the policy at least once a year according to review recommendations and recent local and national guidance and legislation.

It is the responsibility of Parents* to:

- Tell the school if their child has a medical condition.
- Ensure the school has a complete and up-to-date Healthcare Plan for their child.
- Inform the school about the medication their child requires during school hours.

- Inform the school of any medication their child requires while taking part in visits, outings or field trips and other out-of-school activities.
- Tell the school about any changes to their child's medication, what they take, when, and how much.
- Inform the school of any changes to their child's condition.
- Ensure their child's medication and medical devices are labelled with their child's full name.
- Provide the school with appropriate spare medication, labelled with their child's name.
- Ensure that their child's medication is within expiry dates.
- Keep their child at home if they are not well enough to attend school.
- Ensure their child catches up on any school work they have missed.
- Ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional.
- Ensure their child has a written care/self-management plan from their doctor or specialist healthcare professional to help their child manage their condition.
- be proactive in training children to self-administer medication if this is practicable, and that members of staff will only be asked to be involved if there is no alternative
- (Where parents have asked the school to administer the medication for their child) to ask the pharmacist to supply any such medication to be dispensed in a separate container, containing only the quantity required for school use. The prescription and dosage regime **MUST** be printed clearly on the outside of the container. The name of the pharmacist should be visible. **NB: Any medications not presented properly will not be accepted by school staff.**
- Pupils must not bring in their own medication, this should be brought in by the parent.*

Staff

All staff understand, and are trained in what to do in an emergency for the most common serious medical conditions at this school.

- All staff are aware of the most common serious medical conditions at this school.
- Staff understand their duty of care to pupils in the event of an emergency. In an emergency situation staff are required under common law duty of care to act like any reasonably prudent parent. This may include administering medication.
- All staff who work with groups of pupils receive training and know what to do in an emergency for the pupils in their care with medical conditions.
- Training is refreshed for members of staff at least once a year.
- Action for staff to take in an emergency for the common serious conditions is displayed in the staff room.

- Asthma inhalers – schools may hold asthma inhalers for emergency use. This is entirely voluntary, and the Department of Health has published a protocol 13 which provides further information.
- The school will make sure that a trained member of staff is available to accompany a pupil with a medical condition on an off -site visit.
- All pupils with a medical condition have an Individual Health Care Plan (IHCP) which explains what they need in an emergency. The IHCP will accompany a pupil should they need to attend hospital. Parental permission will be sought and recorded in the IHCP for sharing the IHCP within emergency care settings.
- The school uses Individual Health Care Plans to inform the appropriate staff (including supply teachers and support staff) of pupils in their care who may need emergency help.

The Special Educational Needs coordinator has the responsibility to:

- Help update the school's medical conditions policy.
- Know which pupils have a medical condition and which have special educational needs because of their condition.
- Ensure teachers make the necessary arrangements if a pupil needs special consideration or access arrangements in exams or course work.

The School Governors have a responsibility to:

- "...make arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed and implemented."
- Ensure that a pupil with medical conditions is supported to enable the fullest participation possible in all aspects of school life.
- Ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support pupils with medical conditions
- Ensure that the arrangements they set up include details on how the school's policy will be implemented effectively, including a named person who has overall responsibility for policy implementation.
- Ensure that IHCP's are reviewed at least annually. This should happen earlier if evidence is presented that the pupil's needs have changed.
- Ensure that the school assesses and manages risks to the child's education, health and well-being and minimises disruption.
- Ensure when deciding what information is recorded on an IHCP, they include:
 - (a) The medical condition, its triggers, signs, symptoms and treatments.
 - (b) The pupil's resulting needs including medication.
 - (c) Specific support for the pupil's educational, social and emotional needs.

They will be written to:

- Ensure that the appropriate level of insurance is in place and appropriately reflect the level of risk.
- Ensure that written records are kept of all medication administered to children.
- Ensure that their arrangements are clear and unambiguous about the need to support actively pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

Individual doctors and specialist healthcare professionals caring for pupils, who attend this school, have a responsibility to:

- Complete the pupil's Healthcare Plans provided by parents.
- Where possible, and without compromising the best interests of the child, try to prescribe medication that can be taken outside of school hours.
- Offer every child or young person (and their parents) a written care/self-management plan to ensure children and young people know how to self-manage their condition.
- Ensure the child or young person knows how to take their medication effectively.
- Ensure children and young people have regular reviews of their condition and their medication.
- Provide the school with information and advice regarding individual children and young people with medical conditions (with the consent of the pupil and their parents).

The named school nurse (currently from Virgin Care) has a responsibility to:

- Help provide regular training for school staff in managing the most common medical conditions at school.
- Provide information about where the school can access other specialist training.

The pupils have a responsibility to:

- Treat other pupils with and without a medical condition equally.
- Tell their parents, teacher or nearest staff member when they are not feeling well.
- Let a member of staff know if another pupil is feeling unwell.
- Treat all medication with respect.
- Know how to gain access to their medication in an emergency.
- If mature and old enough, know how to take their own medication under supervision.
- Ensure a member of staff is called in an emergency situation.

STORAGE AND ADMINISTRATION OF MEDICATION AT SCHOOL

Medication will only be administered by school staff in the case of long-term prescriptions as set out below.

- Short term medication, such as antibiotics, lotions, etc. should be administered by the parent/ guardian 3 times daily – morning, after school and at bed-time.

- If antibiotics have to be administered 4 times a day, school will administer one dose within school hours
- Children should not bring any form of medication into school; all medication must be brought/collected by an adult.
- Arrangements can be made for parents to administer non-prescription medicines personally at lunch-time, if absolutely necessary.

NB: Staff are not able to give any non-prescribed medicine to a child, unless in exceptional circumstances.

Storage and Administration of Long Term Medication

- All medicines (for long-term medical needs only) that are to be administered by school staff, are to be delivered to the School Office; arrangements for storage will be made.
- Medicines should always be provided in the original container as dispensed by the pharmacist and should include the prescriber's instructions.
- Although staff will make every effort to ensure that children do receive the required medication, **the School is not able to take ultimate responsibility for ensuring that it is taken and parents need to sign a disclaimer to that effect.**
- It is good practice to support and encourage children, who are able, to take responsibility to manage their own medicines from a relatively early age. If children can take their medicine themselves, staff will supervise.
- A member of staff will administer medication and is required to complete, sign and obtain counter signatory to the appropriate paperwork.
- If a child refuses to take medicine, staff should not force them to do so, but should note this in the records and inform the parents, contacting them immediately if necessary.

Safe storage – non-emergency medication

- All non-emergency medication is kept in a secure place, in a lockable cupboard in a cool dry place.
- Staff ensures that medication is only accessible to those for whom it is prescribed.

Safe storage – general

- There is an identified member of staff who ensures the correct storage of medication at school.
- All controlled drugs are kept in a locked cupboard and only named staff have access.
- All medication is supplied and stored, wherever possible, in its original containers.
- Medication is stored in accordance with instructions, paying particular note to temperature.
- Some medication for pupils may need to be refrigerated. All refrigerated medication is stored in an airtight container and is clearly labelled. Refrigerators used for the storage of medication are in a secure area, inaccessible to unsupervised pupils or lockable as appropriate.
- It is the parent's responsibility to ensure new and in date medication comes into school as required.

Safe disposal

- Parents are responsible for the collection and disposal of out-of-date medication.

Administration – emergency medication

- All pupils at this school with medical conditions have easy access to their emergency medication. (e.g. asthma inhalers are kept with the child)

Administration – general

- All use of medication defined as a controlled drug, even if the pupil can administer the medication themselves, is done under the supervision of a named member of staff at this school.
- The school understands the importance of medication being taken as prescribed.
- All staff are aware that there is no legal or contractual duty for any member of staff to administer medication or supervise a pupil taking medication unless they have been specifically contracted to do so.
- Many other members of staff are happy to take on the voluntary role of administering medication. For medication where no specific training is necessary, any member of staff may administer prescribed medication to pupils under the age of 16, but only with the written consent of the pupil's parent.
- Training is given to all staff members who agree to administer medication to pupils, where specific training is needed. The local authority provides full indemnity.
- All school staff have been informed through training that they are required, under common law duty of care, to act like any reasonably prudent parent in an emergency situation. This may include taking action such as administering medication.
- In some circumstances medication is only administered by an adult of the same gender as the pupil, and preferably witnessed by a second adult.
- Parents at this school understand that if their child's medication changes or is discontinued, or the dose or administration method changes, that they should notify the school immediately.
- If a pupil at this school refuses their medication, staff record this and follow procedures. Parents are informed as soon as possible.
- All staff attending off-site visits are aware of any pupils with medical conditions on the visit. They receive information about the type of condition, what to do in an emergency and any other additional support necessary, including any additional medication or equipment needed.
- If a pupil misuses medication, either their own or another pupil's, their parents are informed as soon as possible. These pupils are subject to the school's usual disciplinary procedures.

The 'Parental Agreement for School to Administer Medicine' MUST be completed.

Healthcare Plans

This school uses a Healthcare Plan to record important details about individual children's (usually long-term) medical needs at school, their triggers, signs, symptoms, medication and other treatments. Further documentation can be attached to the Healthcare Plan if required, see Scotforth St Paul's Healthcare Plan Template.

Parents are asked if their child has any health conditions or health issues on the enrolment form, which is filled out at the start of each school year. Parents of new

pupils starting at other times during the year are also asked to provide this information on enrolment forms.

A Healthcare Plan, accompanied by an explanation of why and how it is used, is sent to all parents of pupils with a long-term medical condition. This is sent at enrolment or when a diagnosis is first communicated to the school.

- If a pupil has a short-term medical condition that requires medication during school hours, a medication form plus explanation is sent to the pupil's parents to complete.
- The parents, healthcare professional and pupil with a medical condition are asked to fill out the pupil's Healthcare Plan together. Parents then return these completed forms to the school.
- The school ensures that a relevant member of school staff is also present, if required to help draw up a Healthcare Plan for pupils with complex healthcare or educational needs.

School Healthcare Plan Register

- Healthcare Plans are used to create a centralised register of pupils with medical needs. An identified member of staff has responsibility for the register at this school.
- The responsible member of staff follows up with the parents any further details on a pupil's Healthcare Plan required or if permission for administration of medication is unclear or incomplete.

Ongoing communication and review of Healthcare Plans

- Parents are regularly reminded to update their child's Healthcare Plan if their child has a medical emergency or if there have been changes to their symptoms (getting better or worse), or their medication and treatments change.
- Staff use opportunities such as teacher–parent interviews and home–school diaries to check that information held by the school on a pupil's condition is accurate and up to date.
- Every pupil with a Healthcare Plan at this school has their plan discussed and reviewed at least once a year.

Storage and access to Healthcare Plans

- Parents are provided with a copy of the pupil's current agreed Healthcare Plan.
- Healthcare Plans are kept in a secure central location at school.
- Apart from the central copy, specified members of staff (agreed by the pupil and parents) securely hold copies of pupils' Healthcare Plans. These copies are updated at the same time as the central copy.
- All members of staff who work with groups of pupils have access to the Healthcare Plans of pupils in their care.
- When a member of staff is new to a pupil group, for example due to staff absence, the school makes sure that they are made aware of (and have access to) the Healthcare Plans of pupils in their care.
- The school ensures that all staff protect pupil confidentiality.
- This school seeks permission from the pupil and parents before sharing any medical information with any other party, such as when a pupil takes part in an off-site activity.

Use of Healthcare Plans

- Healthcare Plans are used by the school to:
- Inform the appropriate staff and supply teachers about the individual needs of a pupil with a medical condition in their care.
- Remind pupils with medical conditions to take their medication when they need to and, if appropriate, remind them to keep their emergency medication with them at all times.
- Identify common or important individual triggers for pupils with medical conditions at school that bring on symptoms and can cause emergencies. The school uses this information to help reduce the impact of common triggers.
- Ensure this school's local emergency care services have a timely and accurate summary of a pupil's current medical management and healthcare in the event of an emergency.
- Remind parents of pupils with medical conditions to ensure that any medication kept at school for their child is within its expiry dates. This includes spare medication.

Residential visits

- Parents are sent a residential visit form to be completed and returned to school shortly before their child leaves for an overnight or extended day visit. This form requests up-to-date information about the pupil's current condition and their overall health. This provides essential and up-to-date information to relevant staff and school supervisors to help the pupil manage their condition while they are away. This includes information about medication not normally taken during school hours.
- All residential visit forms are taken by the relevant staff member on visits and for all out-of-school hours activities where medication is required. These are accompanied by a copy of the pupil's Healthcare Plan.
- All parents of pupils with a medical condition attending a school trip or overnight visit are asked for consent, giving staff permission to administer medication at night or in the morning if required.
- The residential visit form also details what medication and what dosage the pupil is currently taking at different times of the day. It helps to provide up-to-date information to relevant staff and supervisors to help the pupil manage their condition while they are away.

Other record keeping

- The school keeps an accurate record of each occasion an individual pupil is given or supervised taking medication. Details of the supervising staff member, pupil, dose, date and time are recorded. If a pupil refuses to have medication administered, this is also recorded and parents are informed as soon as possible.
- The school holds training on common medical conditions as required. A log of the medical condition training is kept by the school, and reviewed every 12 months, to ensure all new staff receive training.
- All school staff who volunteer to administer medication are provided with training by a healthcare professional if required. The school keeps a register of staff who have had the relevant training.

Other information:

Defibrillators – sudden cardiac arrest is when the heart stops beating and can happen to people of any age and without warning. If this does happen, quick action (in the form of early CPR and defibrillation) can help save lives. A defibrillator is a machine used to give an electric shock to restart a patient's heart when they are in cardiac arrest. Modern defibrillators are easy

to use, inexpensive and safe. This school has purchased a defibrillator as part of our first-aid equipment and notified the local NHS ambulance service of its location. Staff members appointed as first-aiders are trained in the use of CPR and may wish to promote these techniques more widely in the school, amongst both teachers and pupils alike.

This Policy will be reviewed each year.

Review Due Date: December 2020

See below for Legislation and Guidance, Procedures for Administration of Medicine, and Appendices

Legislation and guidance

Introduction

- + Local authorities, schools and governing bodies are responsible for the health and safety of pupils in their care.
- + Areas of legislation that directly affect a medical conditions policy are described in more detail in Managing Medicines in Schools and Early Years Settings. The main pieces of legislation are the Disability Discrimination Act 1995 (DDA), amended by the Special Educational Needs and Disability Act 2001 (SENDA) and the Special Educational Needs and Disability Act 2005.

These acts make it unlawful for service providers, including schools, to discriminate against disabled people. Other relevant legislation includes the Education Act 1996, the Care Standards Act 2000, the Health and Safety at Work Act 1974, the Management of Health and Safety at Work Regulations 1999 and the Medicines Act 1968. This section outlines the main points from the relevant legislation and guidance that schools should consider when writing a medical conditions policy.

Managing Medicines in Schools and Early Years Settings (2004, updated 2015)

This provides guidance from the DfES (now DCFS) and DH on managing medicines in schools and early years settings. The document includes the following chapters:

- + developing medicines policies
- + roles and responsibilities
- + dealing with medicines safely
- + drawing up a Healthcare Plan
- + relevant forms.

Medical Conditions at School: A Policy Resource Pack is designed to work alongside Managing Medicines in Schools and Early Years Settings.

Disability Discrimination Act 1995 (DDA) and the Special Educational Needs and Disability Acts (2001 and 2005)

- + Many pupils with medical conditions are protected by the DDA and SENDA, even if they don't think of themselves as 'disabled'.
- + The Commission for Equality and Human Rights (CEHR) (previously the Disability Rights Commission) publishes a code of practice for schools, which sets out the duties under the DDA and gives practical guidance on reasonable adjustments and accessibility. The CEHR offers information about who is protected by the DDA, schools' responsibilities and other specific issues.

Schools' responsibilities include:

- + not to treat any pupil less favourably in any school activities without material and sustainable justification
- + to make reasonable adjustments that cover all activities – this must take into consideration factors such as financial constraints, health and safety requirements and the interests of other pupils. Examples of reasonable adjustments can be found in the DfES resource: Implementing the DDA in Schools and Early Years Settings
- + to promote disability equality in line with the guidance provided by the DCSF and CEHR through the Disability Equality Scheme.

*DfES publications are available through the DCSF.

The Education Act 1996

Section 312 of the Education Act covers children with special educational needs, the provisions that need to be made and the requirements local health services need to make to help a local authority carry out its duties.

The Care Standards Act 2000

This act covers residential special schools and responsibilities for schools in handling medicines.

Health and Safety at Work Act 1974

This act places duties on employers for the health and safety of their employees and anyone else on their premises. This covers the head teacher and teachers, non-teaching staff, pupils and visitors.

Management of Health and Safety at Work Regulations 1999

These regulations require employers to carry out risk assessments, manage the risks identified and to communicate these risks and measures taken to employees.

Medicines Act 1968

This act specifies the way that medicines are prescribed, supplied and administered.

Additional guidance

Other guidance resources that link to a medical conditions policy include:

- + Healthy Schools Programme – a medical conditions policy can provide evidence to help schools achieve their healthy school accreditation
- + Every Child Matters: Change for Children (2004). The 2006 Education Act ensures that all schools adhere to the five aims of the Every Child Matters agenda
- + National Service Framework for Children and Young People and Maternity Services (2004) – provides standards for healthcare professionals working with children and young people including school health teams
- + Health and Safety of Pupils on Educational Visits: A Good Practice Guide (2001) – provides guidance to schools when planning educational and residential visits
- + Misuse of Drugs Act 1971 – legislation on the storage and administration of controlled medication and drugs
- + Home to School Travel for Pupils Requiring Special Arrangements (2004) – provides guidance on the safety for pupils when traveling on local authority provided transport.

Procedures for the Administration of Medication

- Parents should arrange delivery of all medicines to be taken or administered in school, to the school office;
- Medicines must be clearly labelled with the child's name;
- Parents will be asked to complete and sign a form specifying preparations, storage arrangements, dosage and circumstances under which it should be given;
- Medication will be stored securely out of the reach of children
- One member of staff should administer the medication, witnessed by another member of staff and then both should sign to say medicine has been given at what time and what dose;
- For medication in which training is required to administer it, only trained members of staff should be responsible for administering the medicine;
- Parents of children who suffer from Asthma must complete an 'Asthma Inhalers in School' form.
- Self-administration of certain prescribed medication such as inhalers for asthma and insulin for diabetes is actively encouraged even in younger children.
- Staff will consider carefully their response to requests to assist with the giving of medication or supervision of self-medication and that they will consider each request separately.
- The school will liaise with the School Nurse for advice about a pupil's special medical needs, and will seek support from the relevant practitioners where necessary, and in the interests of the pupil.
- Scotforth St Paul's Primary & Nursery School cannot be held responsible for side effects that occur when medication is taken correctly.
- Any medicines brought into school by the staff e.g. headache tablets; inhalers for personal use will be kept securely in appropriate storage and kept out of the reach of the pupils. Staff medicine is the responsibility of all staff concerned and not the school.

Appendix to Medical Policy re: Absence

Continuing Provision for Pupils with Medical Needs

When we become aware that a pupil will become absent from school for more than **15** school days because of their medical needs, the school will notify the Pupil Attendance Support Team (PAST) as soon as possible. This will assist the Local Authority with continuity of educational provision.

The school will provide the PAST with such information as is required to make a referral to an appropriate education provider. Parental consent will be obtained before information regarding the pupil is passed to the PAST.

In case of long-term or recurrent absence an attendance support plan and /or Personal Education Plan (PEP) will be put in place for the pupil. This will be written in conjunction with the Local Authority, the parents and the pupil.

Monitoring and Recording of Absence

All pupils who are unable to attend school for more than 15 school days due to medical needs will be regularly monitored and reviewed. Ongoing medical advice will be taken into account at all times.

Absence will be recorded on the register as illness (e.g. code I) **only** when appropriate medical advice has been received. When a pupil commences education with an alternative education provider the absence will be recorded as educated off site (e.g. code B).

This is in accordance with the Local Authority attendance policy.

Pupils with Long-Term or Recurring Absence

Some pupils will be away from school long-term or with recurrent bouts of illness. In these cases the school will liaise with the Local Authority to ensure that alternative education provision is put in place as soon as possible. The school will have the responsibility for ensuring that the education provider has all the information regarding work programmes and curriculum plans. It is acknowledged that continuity of education is important for these pupils. For pupils whose learning progress is being severely affected by long term absence the Special Educational Needs/Disability Coordinator (SEN/DCO) will be advised and consideration will be given as to whether a Statutory Assessment of Special Educational Needs should commence.

Reintegration

For pupils who have been absent from school it may be necessary to have a staged reintegration plan. The reintegration will be monitored and reviewed regularly with all parties to ensure success

Contact between School/Pupil

Scotforth St Paul's C of E Primary and Nursery School is committed to ensuring that, even if a pupil is absent for medical reasons they should retain contact with the school.

This document has been written with advice from the Department for Education & Skills, Asthma UK, the local education authority, local healthcare professionals, the school health service, parents/carers, the governing body and pupils. This school recognises that asthma is a widespread, serious but controllable condition affecting many pupils at the school. The school positively welcomes all pupils with asthma. This school encourages pupils with asthma to achieve their potential in all aspects of school life by having a clear policy that is understood by school staff, their employers, the local education authority and pupils. Supply teachers and new staff are also made aware of the policy. All staff who come into contact with pupils with asthma are provided with training on asthma from the school nurse who has had asthma training.

Asthma medicines

- Immediate access to reliever medicines is essential. Pupils with asthma are encouraged to carry their reliever inhaler as soon as the parent/carer, doctor or asthma nurse agrees they are mature enough. The reliever inhalers of younger children are kept in the classroom.
- Parents/carers are asked to ensure that the school is provided with a labelled spare reliever inhaler. The class teacher will hold this separately in case the pupil's own inhaler runs out, or is lost or forgotten. All inhalers must be labelled with the child's name by the parent/carer.
- School staff are not required to administer asthma medicines to pupils (except in an emergency), however many of the staff at this school are happy to do this.

Record keeping

- At the beginning of each school year or when a child joins the school, parents/carers are asked if their child has any medical conditions including asthma on their enrolment form.
- All parents/carers of children with asthma are consequently sent an Asthma UK *School Asthma Card** to give to their child's doctor or asthma nurse to complete. Parents/carers are asked to return them to the school.
- From this information the school keeps its asthma register, which is available to all school staff. *School Asthma Cards** are then sent to parents/carers of children with asthma on an annual basis to update.
- Parents/carers are also asked to update or exchange the card for a new one if their child's medicines, or how much they take, changes during the year.

Exercise and activity – PE and games

- Taking part in sports, games and activities is an essential part of school life for all pupils. All teachers know which children in their class have asthma and all PE teachers at the school are aware of which pupils have asthma from the school's asthma register.
- Pupils with asthma are encouraged to participate fully in all PE lessons.
- If a pupil needs to use their inhaler during a lesson they will be encouraged to do so.
- Classroom teachers follow the same principles as described above for games and activities involving physical activity.

Out-of-hours sport

- There has been a large emphasis in recent years on increasing the number of children and young people involved in exercise and sport in and outside of school. The health benefits of exercise are well documented and this is also true for children and young people with asthma. It is therefore important that the school involve pupils with asthma as much as possible in after school clubs.
- PE teachers, classroom teachers and out-of hours school sport coaches are aware of the potential triggers for pupils with asthma when exercising, tips to minimise these triggers and what to do in the event of an asthma attack.

When a pupil is falling behind in lessons

- If a pupil is missing a lot of time at school or is always tired because their asthma is disturbing their sleep at night, the class teacher will initially talk to the parents/carers to work out how to prevent their child from falling behind. If appropriate, the teacher will then talk to the school nurse and special education needs coordinator about the pupil's needs.
- The school recognises that it is possible for pupils with asthma to have special education needs due to their asthma.

Asthma attacks

- All staff who come into contact with pupils with asthma know what to do in the event of an asthma attack.
- In the event of an asthma attack the school follows the procedure outlined by Asthma UK in its *School Asthma Pack*.

Template 1: Letter to Parents/Carers re Asthma Card

Scotforth St Paul's Primary and Nursery School
Scotforth Road
Lancaster
LA1 4SE
Tel: 01524 65379
Head Teacher: Mrs A. Aylott
e-mail: head@scotforth-st-pauls.lancs.sch.uk
website: www.scotforth-st-pauls.lancs.sch.uk



Dear Parent/Carer

Re: The School Asthma Card

Thank you for informing us of your child's asthma on his/her registration form/ recently. As part of accepted good practice and with advice from the Department for Education & Skills, Asthma UK and the school's governing bodies, our school has recently established a new School Asthma Policy for use by all staff.

As part of this new policy, we are asking all parents and carers of children with asthma to help us by completing school asthma card for their child/children. Please take this card to your child's doctor/asthma nurse to fill in at your child's next appointment, and return it to the school as soon as possible.

The completed card will store helpful details about your child's current medicines, triggers, individual symptoms and emergency contact numbers. The card will help school staff to better understand your child's individual condition.

Please make sure the card is regularly checked and updated by your child's doctor or asthma nurse and the school is kept informed about changes to your child's medicines, including how much they take and when.

If you have any queries about this card, please do not hesitate to contact me.
I look forward to receiving your child's completed school asthma card.

Thank you for your help.

Yours sincerely,

Mrs A. Aylott



Template 2: Asthma Inhaler Consent Form-

Details of Pupil:

Surname:

Forename:

Date of Birth:

Class:

Male/Female

Address:

Medication: type/name of inhaler:

Dosage:

My child does*/does not need* to use a spacer device with the inhaler. (Parent to provide one if needed.)

Do you wish your child?

a)To leave their inhaler with the class teacher*

b)To keep their inhaler with them at all times*

*Please delete as appropriate

If your child has an asthma attack, and does not have their own inhaler available, do you give permission for your child to use another identical inhaler? Yes/No

We will inform you if your child refuses to take his/her medicine.

Contact details:

Name: (please print)

Relationship to Pupil:

Address:

Contact telephone number*:

I understand that I must deliver the inhaler personally (clearly marked with my child's name) to the school office staff, who will pass it on to the class teacher. I accept that this is a service which school is not obliged to undertake.

Parent/Carer Signature:

Date:

Accepted by staff (please print name):

Signature.....Date.....

***Parents agree to keep school informed of any changes to contact details, especially mobile phone numbers.**

Copies to pupil's file & class

Template Parental Agreement for Setting to Administer Prescribed Medicine

The school/setting will not give your child medicine unless you complete and sign this form for all medicine.

Date for review to be initiated by	
Name of school/setting	Scotforth St Paul's C of E Primary and Nursery School
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	The school office staff

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____

Date _____

Template: Record of Medicine Administered to an Individual Child

Name of school/setting	Scotforth St Paul's C of E Primary and Nursery School
Name of child	
Date medicine provided by parent	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Staff signature _____

Signature of parent _____

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Record of medicine administered to an individual child (Continued)

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Template: Individual Healthcare Plan

Name of school/setting	Scotforth St Paul's C of E Primary and Nursery School
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

Family Contact Information

Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

Clinic/Hospital Contact

Name	
Phone no.	

G.P.

Name	
Phone no.	

Who is responsible for providing support in school	
--	--

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc.

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

Template: Model Letter Inviting Parents to Contribute to Individual Healthcare Plan Development

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely

Template : Staff Training Record – Administration of Medicines

Name of school/setting	Scotforth St Paul's C of E Primary and Nursery School
Name	
Type of training received	
Date of training completed	
Training provided by	
Profession and title	

I confirm that [name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated [name of member of staff].

Trainer's signature

Date

I confirm that I have received the training detailed above.

Staff signature

Date