

Meeting the Needs of Students with Medical Conditions



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Policy Statement

In this school, students who are absent on medical grounds will be provided with as much access to education as their medical conditions allow. This allows them to maintain the momentum of their education and keep up with their studies.

Students with medical needs have the same rights of admission to school as other students. They should be supported so that they have full access to school life, including school trips and sports activities.

No child with a medical condition should be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made.

A student's health should not be put at unnecessary risk simply because they attend school. Other students should also not be placed at risk or a child accepted into school where it would be detrimental to them and others to do so.

Schools should have procedures for managing medicines that have to be taken during the school day, (either on school premises or on trips) such as medication for diabetes, asthma and epilepsy.

They should also have a written healthcare plan in place for each student with a medical condition.

The Aims of the Policy

The aims of this policy are to set out the role of the Principal, nominated governor, and wider school staff in:

- ensuring students who cannot attend school because of medical needs are provided with adequate access to education; and
- providing these students with appropriate support so their studies do not suffer.

Procedure

The Principal will:

- ensure that the educational needs of any student who is absent from school through illness, injury or a medical condition are assessed
- establish protocols for staff on maintaining meaningful contact with students who are absent from school, with their parents, medical professionals and any other external agencies, including keeping them informed of all school events and facilitating contact with peer groups where possible

- liaise with teaching staff to develop appropriate distance-learning programmes to meet the needs of the student concerned
- ensure that staff monitor the quality of provision and that completed work is marked and assessed
- ensure that staff organise a flexible timetable for students during the re-integration phase.
- put in place adequate policies, including on the use of medication
- ensure that students with medical conditions have appropriate individual healthcare plans in place, agreed with their parents and drawn up with health professionals who are involved in their care
- ensure that staff who volunteer to assist with medication or other healthcare needs have appropriate training
- be reasonably satisfied that any training has given staff sufficient understanding, competence, confidence and expertise
- support students' self-care abilities wherever possible
- ensure that adequate indemnity insurance is in place
- take appropriate action during any outbreak of a communicable disease.

The nominated governor will:

- undertake regular reviews of the procedures that apply to educating students who are unable to attend school due to illness, injury or medical needs
- submit regular reports to the full governing body on the quality and impact of the provision.

The school will ensure that:

- parents are encouraged at all times to be fully collaborative partners
- parents are kept informed about their child's educational programme and performance
- students are involved in making decisions and exercising choice and are, therefore, part of any consultation process
- education and health professionals and other agencies work closely together to provide the support that will ensure a student with medical needs receives an appropriate education
- suitable liaison and monitoring are in place to ensure there is continuity of provision if other educational services are involved in the delivery of the student's education
- suitable arrangements are put in place to enable students who are absent on medical grounds to access public examinations
- that all involved agencies collaborate in the development of a structured re-integration plan for students who have been away from school for long periods of time.
- arrangements give parents confidence in the school's ability to support their child's medical needs effectively

Teachers and other school staff should:

- take all reasonable steps to ensure that students with medical conditions are adequately supported
- be aware of, and comply with, the healthcare plans of individual students
- work collaboratively with the school nurse and other health professionals
- access appropriate training if they provide care or administer medication
- carry out their responsibilities with reasonable care and in line with their training

Putting arrangements in place

- School nurses or other qualified healthcare professionals are responsible for notifying the school when a child has been identified as having a medical condition and will require support in school.
- GPs, paediatricians or other appropriate healthcare professionals should notify the school nurse when a child has been identified as having a medical condition that will require support at school.
- Providers of health services should co-operate with schools that are supporting students with a medical condition.
- Once a school is notified that a student has a medical condition, appropriate support arrangements should be put in place. These should include transitional arrangements between schools or during re-integration if the student has had a long absence due to ill-health.
- Upon notification the Principal, or any member of staff to whom responsibility has been delegated, should co-ordinate a meeting to discuss the student's healthcare needs. This may be attended by the parents and relevant healthcare professionals. An **individual healthcare plan** should be agreed.
- The plan may well identify **training** that is required to ensure that staff are competent to meet the student's medical needs.
- For students starting at a new school, arrangements should be in place in time for the start of the relevant school term.
- Schools do not have to wait for a formal diagnosis before providing support to students but should be guided by the relevant healthcare professional.

Roles

The named person responsible for dealing with students who are unable to attend school because of medical needs is **Jenny Byrne, Vice Principal**.

The nominated governor responsible for reviewing the procedures that have been put in place for the education of students with long-term illness, injury or other medical needs is **John Kaliofer**.

ACCESS TO EDUCATION FOR “LOOKED AFTER CHILDREN”

The designated teacher has a key role as the central point of contact within the school for both the child and any other agencies involved

- Named designated teacher (DT) to meet with students on a regular basis
- Designated teacher to attend PEPs and meet with the virtual tutor from the Education of Children in Care Service and the child’s carers
 - Academic progress is discussed with both the child and tutor with opinions sought from both.
 - Refer back to the previous PEP – ensure previous targets met and academic progress has been made
 - Academic targets set – actions required are agreed upon
 - Make decision re: appropriate past and future allocation of pupil premium funding
 - 1:1 or specialist tuition may be requested during this time - THIS IS PRIORITISED
 - Views and opinions of the overall welfare of the child is sought and is paramount to any decisions made
 - Target points/dates agreed upon- IMPLEMENTED BY DT
- Designated teacher to make home visits if/when necessary (e.g. during absence)
- Designated teacher to make referrals for additional services, if required
- Designated teacher to liaise with the appropriate staff in order to ensure
 - ✓ Calm transition between key stages
 - ✓ Appropriate curriculum choices made
 - ✓ Alternative curriculum discussed as arranged prior to transfer to KS4, if appropriate
 - ✓ Attendance issues discussed with Attendance Improvement Officer (AIO) prior to transfer
 - ✓ Career plan discussed and arrangements made for transition, if required
- Designated teacher to attend all LAC and Core Group meetings in order to ensure that the welfare needs of the child is being met
- To be aware of the emotional and social needs of the child and have an holistic overview of the child, so that additional support can be put in place, if required

Unacceptable practices

Supporting Students at School with Medical Conditions: Statutory Guidance for Governing Bodies of Maintained Schools and Proprietors of Academies in England lists examples of unacceptable practice. These include:

- preventing students from easily accessing their inhalers and medication or failing to administer their medication when and where necessary
- assuming students with the same condition require the same treatment
- ignoring the views of students or their parents
- sending students with medical conditions home frequently or preventing them from staying for normal school activities, including lunch

- sending students to the school office or medical room unaccompanied, or with an unsuitable person, in the case of illness or emergencies
- penalising students for their attendance record if their absences are related to their medical condition (such as hospital appointments)
- preventing students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- requiring parents to attend school to provide medical support to their child, including giving medication or helping with toileting issues
- preventing, or creating unnecessary barriers to, students participating in any aspect of school life, including school trips.

Communicable Diseases

A communicable disease is defined as one that can be passed from person to person, such as **influenza** or measles. An outbreak of such a disease can cause considerable sickness levels amongst staff and students.

Employees and parents should be informed of the standard incubatory periods for common communicable diseases. Students who show the symptoms should be advised on the **exclusion period from school**. The minimum recommended period of exclusion may vary from one area to another.

The school should also ensure that all staff and parents are made aware of an incidence of a communicable disease.

To reduce the risk of an outbreak, students, teachers and other staff should be encouraged to keep up to date with the recommended immunisations against diseases such as:

- measles
- mumps
- rubella
- chickenpox.

People who work around open food while suffering from certain diseases (mainly from bacteria and viruses) can contaminate food and spread infection. If a member of the school meal service develops the symptoms of any communicable disease or infection, they should inform their line manager and be excluded from food handling until free from symptoms and fit to return to work.

Reporting diseases and medical conditions

A number of specified infectious diseases must be notified under the Public Health (Infectious Diseases) Act 1988 and the Public Health (Control of Diseases) Act 1984.

Doctors in England and Wales have a statutory duty to notify a “proper officer” of the local authority of suspected cases of certain infectious diseases, including:

- food poisoning
- leptospirosis
- measles
- **meningitis**

- meningococcal septicaemia (without meningitis)
- mumps
- paratyphoid fever
- rubella
- scarlet fever
- smallpox
- tetanus
- tuberculosis
- viral hepatitis A, B, C
- whooping cough
- yellow fever.

If a doctor sends notification that an employee is suffering from a reportable work-related disease, a report must be made to the Health and Safety Executive (HSE) under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013. This is done by completing and submitting an online form.

A full list of reportable conditions is provided on the HSE's **RIDDOR website**.

Managing and Administering Medication

Supporting Students at School with Medical Conditions: Statutory Guidance for Governing Bodies of Maintained Schools and Proprietors of Academies in England states the following.

- Where clinically possible, medicines should be prescribed in dose frequencies that enable them to be taken outside school hours; medicines should only be administered at school when it would be detrimental to the student's health or school attendance not to do so.
- Except in exceptional circumstances, no student under 16 should be given prescription or non-prescription medicines without parents' written consent.
- Schools should only accept prescribed medicines that are in date, labelled, provided in the original container (as dispensed by a pharmacist) and include instructions for administration, dosage and storage. An exception to this is insulin, which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container.
- All medicines should be stored safely. Students should know where their medicines are at all times and be able to access them immediately. Where relevant, they should know who holds the key to the storage facility.
- Schools should store controlled drugs that have been prescribed for a student securely in a non-portable container, to which only named staff have access. A student who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so. Monitoring may be necessary, though (for example, to ensure that the drug is not passed to another student).
- When no longer required, medicines should be returned to parents for safe disposal.

Parents can assist if they wish, by either:

- visiting the school to administer the medication
- arranging for the student to go home, eg during break times, to receive medication.

However, it is unacceptable to require parents, or to otherwise make them feel obliged, to attend school to administer medication. No parent should have to give up working because the school is failing to support their child's medical needs.

Staff who agree to aid the administration of medication should be properly informed, **trained and supported**.

Written records should be kept of all medicines administered.

Principals should exercise caution before accepting responsibility for administering medicines where:

- the timing and nature of the administration is of vital importance, and there could be serious consequences if a dose is not taken
- advanced technical or medical knowledge or expertise is required
- intimate contact is necessary.

Injections

Normally a nurse or a doctor should administer injections. However, in an emergency, or where it is needed to manage a condition such as diabetes, a member of staff may need to administer the injection to a student.

A school should only undertake this responsibility if authorisation has been given by the parent or carer and guidance provided by a medical practitioner. If a member of staff agrees to administer injections, they:

- should be trained by an appropriate health professional
- must have demonstrated competence in the procedure.

Ideally, sufficient numbers of staff should volunteer to administer injections to cover for possible absences.

Sharps boxes should be provided for the disposal of used needles.

Analgesics

Schools should have a policy in place on the administration of pain relief, or analgesics, to students. All staff should follow this policy.

Any administration should be assigned to a responsible member of staff and analgesics should be stored securely. Any pain relief administered should be recorded and parents informed of the action taken.

The Department for Education's guidance *Managing Medicines in Schools and Early Years Settings* states that, except in exceptional circumstances, staff should not give non-prescribed medicines, such as analgesics, to students without prior written permission from parents. If a student suffers from frequent or acute pain, the parents should be encouraged to refer the matter to their GP.

According to *Supporting Students at School with Medical Conditions: Statutory Guidance for Governing Bodies of Maintained Schools and Proprietors of Academies in England*, a student under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Medication for pain relief should never be administered without first checking:

- maximum dosages
- when the previous dose was taken.

Inhalers and adrenaline auto-injectors

Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline auto-injector pens should be always readily available to students and should not be locked away. This is particularly important when students are outside of school premises, such as on school trips.

Immediate access to reliever inhalers is essential for the emergency treatment of asthma, a common disease of the respiratory system in which the airways constrict and become inflamed. The symptoms include:

- wheezing
- shortness of breath
- chest tightness
- coughing.

The law is currently under review, with the intention being to allow schools to hold asthma inhalers for emergency use. The Department of Health will accompany a change of legislation with fresh guidance for schools.

Adrenaline auto-injectors (also commonly referred to as “EpiPens”) are devices that can inject a set amount of adrenaline into the body. They are used in the event of a severe allergic anaphylactic reaction caused by particular foods, insect bites or medicines. Such reactions can be fatal and require immediate first aid, including the application of adrenaline.

Some students with allergies need to carry their auto-injector with them at all times. This should be included in their **individual healthcare plan** and school staff should be trained in awareness of anaphylaxis and administration methods.

Medical Emergencies

A student's **individual healthcare plan** should:

- define what constitutes a medical emergency; and
- set out what action should be taken.

For example, the plan for a student with diabetes may include details of the care to be delivered during a hypoglycaemic attack; the plan for a student with asthma may include details of care during an asthma attack.

Parents should always be informed of any medical emergency. The school should keep a record of emergency contact details for all staff and students. For students with medical conditions, it may be wise for the school to hold contact details for the student's GP and/or hospital consultant.

If a student needs to go to hospital, school staff should stay with them until the parent arrives, or accompany them if they are taken by ambulance.

Medical Facilities

Under the Education (Independent School Standards) (England) Regulations 2010 (as amended), suitable accommodation must be provided to cater for the medical and therapy needs of students. This includes accommodation for:

- the medical examination and treatment of students
- the short-term care of sick and injured students.

The accommodation must include a washing facility and be near to a toilet. It may be used for other purposes as well, but must not be used for teaching.

Where a school has students with complex needs, additional medical accommodation must be provided to cater for those needs.

A medical room should allow ill or injured students to be looked after appropriately and for therapy to be offered to those with special educational needs or disabilities, if needed.

Insurance Arrangements

School policy should set out the details of the school's insurance arrangements. These should cover staff providing support to students with medical conditions, including the **administration of medication**.

Working Together

It is important to work together to meet the needs of students with medical conditions. This includes collaboration between:

- school staff (including the Principal)
- the school nurse
- GPs
- other healthcare professionals and agencies involved in the student's care
- other education services, such as home tuition services.

Training

Any member of school staff providing support to a student with medical needs should receive suitable training. This includes staff who administer medication.

The school nurse should normally lead on identifying, agreeing with the school and putting in place the type and level of training required. School nurses may provide some aspects of training, or training can be sourced from local NHS services. The school nurse should liaise with those providing training and ensure that training remains up-to-date.

A first-aid certificate does not constitute appropriate training in supporting students with medical conditions.

Competence

Training should be sufficient to ensure that staff are competent and have confidence in their ability to support students with medical conditions, and to fulfil the requirements set out in **individual healthcare plans**. They will need to understand the specific medical conditions they are being asked to deal with, their implications and the preventative measures.

The school nurse or another suitably qualified healthcare professional should confirm that staff are proficient before they provide support to a specific student.

Whole-school awareness training

As well as individual staff training, schools should arrange whole-school awareness and induction training so that all staff are aware of policy on supporting students with medical conditions.

List of Relevant Legislation

- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013
- Education (Independent School Standards) (England) (Amendment) Regulations 2012
- Education (Independent Schools Standards) (England) Regulations 2010
- Management of Health and Safety at Work Regulations 1999
- Children and Families Act 2014
- Equality Act 2010
- Special Educational Needs and Disability Act 2001
- Public Health (Infectious Diseases) Act 1988
- Public Health (Control of Diseases) Act 1984
- Occupiers' Liability Acts 1957 and 1984
- Health and Safety at Work, etc Act 1974

Further Information Publications

- Ensuring a Good Education for Children who Cannot Attend School Because of Health Needs: Statutory Guidance for Local Authorities, Department for Education (DfE)
- Managing Medicines in Schools and Early Years Settings, Department for Education (DfE)
- Planning for a Human Influenza Pandemic, **Department for Education**
- School Trips and Outdoor Learning Activities: Tackling the Health and Safety Myths, HSE
- Supporting Students at School with Medical Conditions: Statutory Guidance for Governing Bodies of Maintained Schools and Proprietors of Academies in England, Department for Education (DfE)

Organisations

- Child and Adolescent Mental Health Services (CAMHS)

Web: <http://www.camhscares.nhs.uk/>

Child and Adolescent Mental Health Services (CAMHS) promote the mental health and psychological wellbeing of children and young people, and provide high quality, multidisciplinary mental health services to all children and young people with mental health problems and disorders to ensure effective assessment, treatment and support, for them and their families.

- Department for Education (DfE)

Web: www.gov.uk/dfes

The Department for Education is responsible for education and children's services.

- Meningitis Research Foundation

Web: www.meningitis.org/

The Meningitis Research Foundation funds research to prevent meningitis and septicaemia, and to improve survival rates and outcomes. It promotes education and awareness to reduce death and disability, and give support to people affected. Our vision is a world free from meningitis and septicaemia.

- Meningitis Trust

Web: www.meningitis-trust.org/

The Meningitis Trust's vision is to work towards a world that is free from meningitis and where those affected by the disease receive quality care and support.

- Public Health England

Web: www.gov.uk/government/organisations/public-health-england

PHE is an executive agency of the Department of Health. It provides information and resources to support public health practitioners based in local authorities and works to reduce health inequalities across the population.

- Royal Society for the Prevention of Accidents (RoSPA)

Web: www.rospa.com

RoSPA is a registered charity that provides information, advice, resources and training in order to promote safety and prevent accidents in all areas of life.