

Sir James Knott Nursery School



Supporting Children with Medical Conditions Policy

“Creating strong and lasting foundations for learning”

Certified as reviewed and approved by the Non Teaching and Learning Sub-Committee:	29th March 2017
Adoption by Full Governing Body:	14th June 2017
Designated member of staff's responsibility:	Mr Croft- Headteacher Mrs Battensby- School Office Manager
Next review date:	To be reviewed if any new guidance or legislation becomes available



Supporting Children with Medical Conditions Policy

It is our duty under the Children's and Families Act 2014 to formulate a policy for supporting children with a medical condition and our policy follows guidance from the Statutory Framework in the Early Years Foundation stage.

Statutorily we as governors will make arrangements to ensure that children with medical conditions are supported so that they have full access to all our facilities for education including school trips and physical activities.

Our aims are

- For all children , including those with a medical condition, to have the same access and opportunities to the full range of activities
- To work with other Health and Care professionals (such as Speech Therapists , GPs, Health Visitors , School Nurses)
- To give parents/ carers and children confidence in the support we will provide
- To consider both the physical health, mental health and social/ emotional wellbeing of the child
- To consider how a child who has had frequent absences will be reintegrated back into Nursery
- To focus on the child's individual needs and how their condition may have an impact on their Nursery life.
- To endeavour to understand how the condition may have an impact on ability to learn- to do this we will ensure staff are appropriately trained.

We will ensure –

- That no child will be denied admission simply because arrangements are not in place. However our Safeguarding duties state that a child will be denied entry if this means risk to his/her own health or that of other child's
- That our policy will be reviewed regularly (at least yearly) and be accessible to parents and staff (via the school website).

Policy implementation

The named person is responsible for this policy:- Mr J.Croft Headteacher

Mr J.Croft will be responsible for staff training

- All relevant staff will be made aware of the child's condition
- Where there is staff absence supply teachers will be briefed about the child's condition
- In line with usual school practice for visits a further individual risk assessment will be made in consultation with parents, taking into account any care plans. All children will be required to adhere to the school's behaviour policy
- Any accompanying adult, such as a volunteer on a trip, will be given details of the child's medical needs. Volunteers will be made to understand that their responsibilities will be similar to those of the school staff
- We will regularly monitor any Health Care plan the child may have.

Procedure to be followed

1. When we are notified that a child has a medical condition we will endeavour to put arrangements in place on entry.
2. For those with a new diagnosis or children coming newly to school during the year we will try to ensure arrangements are in place within two weeks of entry.
3. Where there is no formal diagnosis we will base our judgements on available evidence, following parental consultation and any medical reports received.

Individual Health Care plans

- A child with a medical condition will have an individual Health Care plan to meet their needs. This will state what needs to be done, by whom and when
- If the condition is long term, complex or fluctuating we will determine any necessary emergency intervention.

Please note that a Health Care plan may not be necessary in all cases. (Decision to be made by parents/ school and Health Care professionals)

- Our Health Care plan format will vary according to child need, be readily accessible but preserve confidentiality.
- Plans will vary in the level of detail according to the complexity of the child's need (children with the same condition may need different levels of support)
- If your child is designated SEN (special educational needs) but has no statement or Education, Health and Care plan (EHC) their needs will be covered in their Individual Health Care plan (IHC)
- School will complete your child's IHC in partnership with parents and Health Care professionals to help your child manage their condition and overcome potential barriers.

Please note any of the above Plans may be reviewed at staff or professional request after parental consultation.

It will be up to parents to decide whom they wish to write the plan

- IHC's will be linked to any existing statements or IHC's
- If your child is returning to Nursery after an absence we will consult with the LEA about any necessary support.

Information to be recorded on the plans

We will record the following information on our Health Care plans (an example of which is to be found at the end of this policy).

1. The medical condition, what triggers it, any signs, symptoms and treatments required
2. Child's resulting needs e.g. medication, (dosage, side effects, how to store etc)
3. Any other factors such as necessary facilities / equipment, use of rest periods or further additional support
4. At Sir James Knott Nursery School we consider that children of Nursery age will require adult supervision when having medication
5. We have a form which parents will be required to complete in order for any medication to be given
6. Risk assessments for trips and out of school activities will be made separately
7. Information about what to do in an emergency situation, who will be contacted and any contingency arrangements will be written down.

Roles and responsibilities

Supporting the child will be dependent upon partnerships between parents, our school staff, Health professionals and the LEA and is not the sole responsibility of one person. We will endeavour to outline what collaborative working will be needed.

The governing body

- Will arrange to support each child's needs and see that the policy is implemented
- Will ensure that sufficient staff have relevant training and that they are competent to help the child. They will be guided to any teaching support materials or knowledge which is available.

The Headteacher

- Will make arrangements for supporting each child's needs and ensuring the policy is implemented.
- Will ensure that all staff involved with the child understand their roles/ responsibilities (including volunteers on visits)
- Will have overall responsibility for developing individual Health Care plans
- Will arrange appropriate insurance
- Will contact the School Nurse service if the child's medical condition has not been brought to our attention beforehand.

Staff

- Any member of staff may be asked to provide support (though they cannot be required to administer medication as it is not part of a teacher's contractual duties)
- Staff will receive training till they are considered competent by a Health professional to deal with the condition.

School Nurse

- The School Nurse must notify us when a child with a medical condition is identified as needing support
- He/ she may provide advice and liaison, especially for training
- They may support the implementation of the child's Health Care plan
- School will seek necessary advice from the Community Nursing teams, GP's and Paediatricians.

Child

- Some children may be able to say how their condition affects them and they should be listened to.

Parents

- As parents it is your responsibility to provide school with sufficient and up-to- date information about your child's condition. After a Health Care plan is drafted you should carry out any agreed actions. E.g. providing medicines, equipment etc A parent or other agreed adult must be contactable at all times.

LEAs

Under section 10 of the Children's Act 2004 the LEA has the duty to promote co-operation between schools, governors and Clinical commissioning groups to improve children's physical and mental health. We will work with the LEA for support, guidance, advice and suitable

training to ensure that the child can attend full time. If the child is away for 15 consecutive days or 15 cumulative days across the year we will seek advice from the LEA.

We will work with other Health service providers (e.g. School Nurses, Specialists, and Community Nurses) and participate in locally developed training.

Clinical commissioning groups

We will work with Clinical commissioning groups to ensure we meet the child's medical needs and to encourage the Health service to provide help and advice. The local Health and Wellbeing Board is a forum for all partners to strengthen their links.

Ofsted

The OFSTED inspection Framework places clear emphasis on meeting the needs of disabled or SEN children. Their reports will include information on how well the needs of children with chronic or long term illness are being met. They will consider the quality of teaching for such children and the progress these children have made.

Staff training and support

Training needs will be assessed in line with the School Development Plan (SDP). All members of staff providing support to a child will receive suitable training and be present at review meetings to discuss progress. We will consult with the relevant Health Care professionals to agree the type and level of training required and ensure that it is kept up to date.

- Prescription medicines or Health Care procedures will not be given by untrained staff. It will be our decision whether written instructions from parents or the paramedics are considered to be sufficient information
- Having a first aid certificate alone will not be considered sufficient training to enable a member of staff to support a child with a medical condition
- We will seek the School Nurse's advice to see if staff are considered competent to carry out medical procedures for the child.

The child's role in managing their own medical needs

At Sir James Knott Nursery School we consider that children will need adult supervision to manage their own medical procedures. If the child refuses medication or any other procedure they will not be forced to do so but we will inform parents.

Managing needs on school premises

Medicines will only be given at school if it is detrimental not to do so. (Please see our "Administering Medicines at School" policy). Parents are expected to give medication outside school hours where possible.

We must have written parental consent to give medication within school.

- No child will be given aspirin unless prescribed by a doctor

- We will only accept medicines which are- in date, labelled in the original container as dispensed by a chemist. (This does not apply to insulin which may be in the form of an epipen).

All medicines will be safely locked away in the school office and the child will know who holds the key. (Mrs Battensby) Note – asthma inhalers, blood glucose testing meters and epi-pens will always be available and not locked away.

- A record will be kept of any dosage of a controlled drug given and the amount still left in school. Staff are able to give a controlled drug if it has been prescribed for the child. We will record what has been given, how much, when it was given and by whom. Any noticed side effects will be recorded.
- Medicines no longer required will be returned to parents for safe disposal. Sharps Boxes will be used for needle disposal.

Record keeping

Our governors will ensure that written records of all administered medicines are kept in order to protect both staff and children.

Emergency procedures

We have a form to be filled out by parents which gives details about what should happen in an emergency both in school and on activities such as school trips. (Appendix 3)

Our Health Care plan (appendix 4) defines what an emergency is for the child, and explains what staff will do. If your child needs hospital treatment a member of staff will stay with the child till parents arrive or accompany the child to hospital in an ambulance if the situation merits it .We have a form to fill in (Appendix 3) so that staff can give correct information to ambulance staff.

Day trips, visits etc

The governing body is aware that all children with medical conditions should participate, according to their needs/ abilities in all school outings- provided reasonable adjustments have been made (if necessary). We will make these necessary adjustments unless evidence e.g. from a GP or Clinician states that attendance is not possible. The adjustments will be considered as part of a risk assessment and we will consult with parents and any relevant Health Care professional to make sure that the child can participate fully and safely.

Furthermore any information about the child's medical needs must be included on our educational visits form (EVF4) for visits.

Other issues school may consider

- Home to school transport – a child with a life threatening condition may have a transport Health Care plan – this will be the responsibility of the LEA
- Defibrillators
Sudden cardiac arrest is when the heart stops beating and can happen to people of any age without warning. Quick action when it happens can save a life. A defibrillator machine gives an electric shock to restart the heart. Modern machines are easy to use, inexpensive and safe. It may be part of a school's first aid equipment and those with a first aid certificate will be trained in its use.

Unacceptable practice

Staff should use their discretion and judge each case on its merits .However, at Sir James Knott Nursery School we will not –

- Prevent a child from easy access to inhalers or medication
- Assume that every child with the same condition needs the same treatment
- Ignore the child, his/ her parents or medical advice (though we may challenge it)
- REGULARLY send a child with a medical condition home or prevent them staying for normal activities (unless this is stated in their plan)
- Prevent a child from drinking, eating or using the toilet in order to manage their medical condition
- Require parents, or otherwise make them feel obliged, to administer medicines or supervise toileting
- Send a child who is ill, to any place in school without an accompanying adult.

Furthermore we will not penalise a child's attendance record if this is related to their medical condition (i.e. hospital appointments etc.) And finally – we will not prevent a child with a medical condition from participating in any aspect of school life.

Liability and indemnity

Governors will ensure that the appropriate level of insurance is in place and reflects the level of risk of staff who support children with medical conditions. Our insurance policy will provide cover relating to the administration of medicines. If the insurance company makes special requirements about staff training this will be complied with. Please note that in the event of a claim alleging negligence by a member of staff civil action are likely to be brought against the employer.

Complaints

If parents are dissatisfied with the support given to a child they should immediately discuss their concerns directly with the school. If satisfaction is not achieved after discussion then they should make a formal complaint following the school's official complaints procedure. A complaint to the Department for Education should only be made if all other attempts at reconciliation have failed. Ultimately parents may take independent legal advice and bring formal proceedings if they consider they have legitimate grounds.

Other safeguarding legislation

Please see appendices 1-7 which indicated the forms that we currently use in school to deal with any children who may have a medical condition.

APPENDIX 1

PARENT REQUEST FOR SCHOOL TO ADMINISTER MEDICATION

School cannot give your child medicine unless you complete and sign this form **and** the Headteacher has agreed that school staff can administer the medication.

Personal details

Name of pupil:
Contact telephone number:
Condition or illness:

Medication

Name/type of medication: (as described on the container)
Special storage requirements:
Date dispensed:
How long will your child take this medication?

Full directions for use

Dosage:
Frequency/timing:
Method:
Any particular problems with administration?
Side effects:

Parental declaration

I will ensure that the appropriate staff members are aware when medicine arrives at school. I will complete another form if any of the above information changes.

Signature:

Date:

Relationship to child:

APPENDIX 3

CONTACTING EMERGENCY SERVICES

(School to pre-load this form, as far as possible, with all relevant information.)

Request for an ambulance: dial 999, ask for ambulance and be ready with the following information:	
School's telephone number	
School location	
School postcode	
Give the exact location in the school/setting	
Give your name	
Give name of child/adult and a brief description of their symptoms	
Inform ambulance control of the best entrance and state where the crew will be met and taken to	
Date and time of call	

Speak clearly and slowly and be ready to repeat information if asked

Put a completed copy of this form by the telephone

APPENDIX 4

PUPIL'S HEALTHCARE PLAN

Name of school	Sir James Knott 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 numbers	work
	home
	mobile
Name	
Phone numbers	work
	home
	mobile

Clinic/hospital contact

Name	
Phone number	
GP	
Name	
Phone number	

Describe medical needs and give details of child's symptoms

Daily care requirements (eg before sport/at lunchtime)

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

Follow-up care

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

Form copied to

Parental agreement

I agree that the medical information contained in this form may be shared with individuals involved with the care and education of (insert child's name)

Signed Date / /
Parent or Guardian (or pupil if above age of legal capacity)

APPENDIX 5

HEADTEACHER/HEAD OF SETTING AGREEMENT TO ADMINISTER MEDICATION

Name of school	
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It is agreed that	(name of child)
will receive	(quantity and name of medicine)
every school day at	(times medicine to be administered eg lunchtime or afternoon break)

Name of child:	Will be given/supervised while he/she takes their medication by: (member of staff)
This arrangement will continue until	(either end date of course of medicine or until instructed by parents/carers)

Date:

Signed:

(Headteacher/named member of staff)

APPENDIX 6

REQUEST FOR CHILD TO CARRY HIS/HER OWN MEDICATION

This form must be completed by parents/carers.

If more than one medicine is to be given, a separate form should be completed for each one.

If staff have any concerns discuss this request with healthcare professionals

Name of school/setting	
Child's name	
Group/class/form	
Address	
Name of medicine	
Procedures to be taken in an emergency	

Contact information

Name	
Telephone numbers	home mobile work
Relationship to child	

I would like my son/daughter to keep his/her medicine on him/her for use as necessary.

Signed:..... Date

APPENDIX 7

STAFF TRAINING RECORD – ADMINISTRATION OF MEDICATION

Name of school/setting	
Name of staff member	
Type of training received	
Date training completed	
Name of training provider	
Profession and title of provider	

I confirm that the above named member of staff has received the training detailed, and is competent to carry out any necessary treatment. I recommend that the training is updated (state interval or date).

Trainer's signature:

Date:

I confirm that I have received the training detailed above

Staff signature:

Date:

Suggested review date:
