

Richmond Avenue Primary & Nursery School

APPENDIX to SECAT Policy

Supporting Pupils with Medical Conditions & Individual Health Care Plans

Reviewed by Academy Committee: March 2020





Supporting Pupils with Medical Needs

This school is an inclusive community that aims to support and welcome pupils with medical conditions.

- Richmond Avenue understands that it has a responsibility to make the school welcoming and supportive to pupils with medical conditions who currently attend and to those who may enrol in the future.
- Richmond Avenue aims to provide all children with all medical conditions the same opportunities as others at school.
- 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.
- Richmond Avenue aims to include all pupils with medical conditions in all school activities.
- Richmond Avenue ensures all staff understand their duty of care to children and young people in the event of an emergency.

Introduction:

An Individualised Health Care Plan (IHCP) is a type of nursing care plan that fulfils both administrative and clinical purposes. For the food allergic child, an IHCP also contains an emergency care plan for managing and treating an allergic reaction, should one occur while the child is at school.

IHCPs should be written by the school nurse in collaboration with the pupil, family, educators, and healthcare care providers. Every pupil with a confirmed diagnosis of food allergy and medical orders should have an IHCP.

An IHCP addresses what the school will do to establish and maintain a safe school environment for the food allergic child. For example, an IHCP will detail what measures the school team will take to reduce the risk of allergen exposure, recognise symptoms of an allergic reaction and promptly intervene with the appropriate treatment.

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. Partnership working between school staff, healthcare professionals, and parents and pupils is critical.

It is important to remember that not every child with the same condition(s) requires the same treatment and that the school ensures no barriers for the individual to participate in every day school life.

The designated IHCP supervisor is the school SENCO / School Nurse

Training:

Staff will undertake training as appropriate, from senior leaders or external professionals on the expectations of support for children with medical needs. This may include specific skills such as epipen/diabetes injections for individual children or general awareness of adaptations needed for children with additional needs.

Staff should not be administering specific medications, related to IHCP's, without appropriate training from healthcare professionals.

A first aid certificate does not constitute appropriate training for individual medical needs.



Whilst staff may be trained and aware of medical protocols, staff may be asked to provide support to pupils with medical needs although they cannot be required to do so.

Meeting Individual Needs:

Once written, IHCPs should provide clear information to all within the school setting on how to support the needs of the individual pupil. Plans should also provide clear steps in case of emergency and protocols to follow. (See Appendix I / Information on IHCPs heading).

Although teachers are not required under teachers' professional duties to administer medicines, they should be able to provide support to individuals and take into account the needs and adaptations that may be required for pupils they teach. This may include being allowed to drink, eat, take toilet breaks or other breaks when needed to allow them to manage their medical condition.

The Children and Families Act 2014 places a duty on the Governing Body and Senior Leadership Team to make arrangements for supporting pupils at school with medical conditions. Pupils with medical conditions cannot be denied admission or excluded from school on medical grounds alone unless accepting a child in school would be detrimental to the health of that child or others.

Some children with medical conditions may be disabled. Where this is the case governing bodies must comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEN) and may have a statement or IHCP. For children with SEN, this guidance should be read in conjunction with the Special Educational Needs and Disability Code of Practice: 0 to 25 years, 2014.

This policy will be reviewed regularly and will be readily accessible to parents/carers and staff through the school website. Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If the issue is not resolved, a formal complaint via the school's complaint procedure should be made. After other attempts at resolution have been exhausted, a formal complaint can be made to the Department for Education only if it comes under the scope of section 496/497 of the Education Act 1996.

Administering Medicines:

After discussion with parents, competent children should be encouraged to take responsibility for managing their own medicines and procedures. Wherever possible, children should be allowed to carry their own medicines and relevant devices or should be able to access their medicines for self-medication, quickly and easily. Children who can take their medicines themselves or manage procedures may require a level of supervision. If it is not appropriate for a child to self-manage, then relevant staff should administer medicines and manage procedures for them.

If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents should be informed.

Information on IHCP's:

When creating plans, the school nurse will take the following into consideration:



- the medical condition, its triggers, signs, symptoms and treatments
- the pupil's resulting needs, including medication (its side-effects and its storage) and other treatments, dose, time, facilities, equipment, testing, dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons
- specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- the level of support needed, (some children will be able to take responsibility for their own health needs), including in emergencies. If a child is self-managing their own medication, this should be clearly stated with appropriate arrangements for monitoring
- who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional
- who in the school needs to be aware of the child's condition and the support required
- written permission from parents and the head teacher at your school for medication to be administered by a member of staff, or self-administered by individual pupils during school hours
- Where the medication is to be safely stored
- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate eg risk assessments
- where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition
- what to do in an emergency, including whom to contact, and contingency arrangements

Collaboration with all Stakeholders:

It is essential that all stakeholders, including the child concerned, are involved in creating and supporting / monitoring IHCPs to ensure that the needs of pupils with medical needs are successfully met. Review meetings will take place annually (or sooner, in the case of medical requirements changing) with all stakeholders and medical professionals invited to attend. (See Appendix I)

Trips, Sporting activities and residential visits:

Teachers and staff leading events should be aware of the needs of individual children so that adaptations, where necessary, can be made so that all pupils can still participate. Schools should ensure that all pupils can be included in trips, visits and events unless information from a GP or consultant states otherwise.

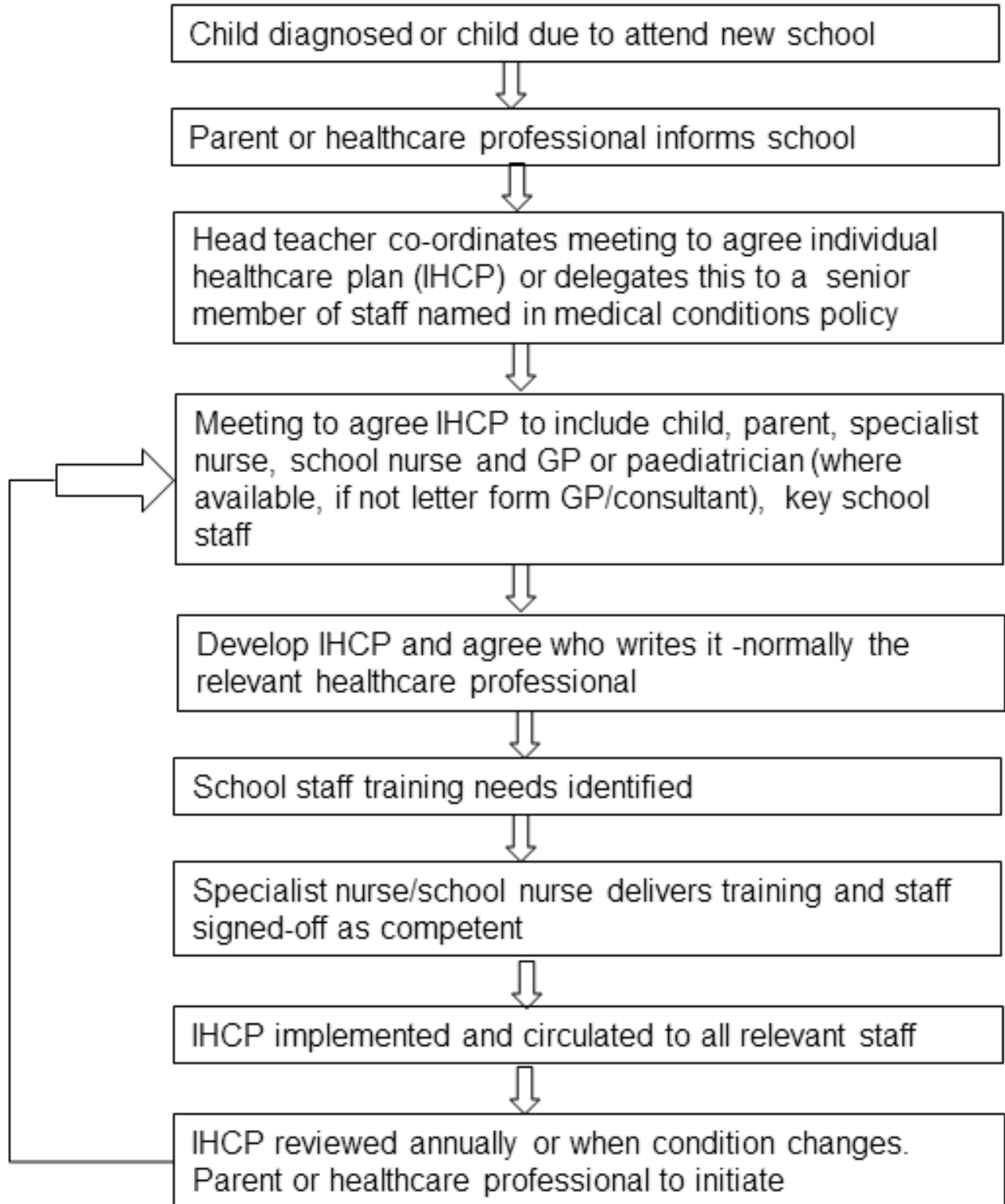


This policy/procedure reflects legislation, any relevant statutory and non-statutory guidance and best practice. The responsibility for setting policy and procedure resides with the Governing Body/Trust and as such the body is satisfied that the content of the policy/procedure suits current requirements.



Appendix I –

Model procedure for creating IHCP





CARE PLAN TEMPLATE:

Individual Healthcare Plan for: _____

Pupils Name:	
Date of Birth:	
Address:	
School Setting:	
Emergency Contact Name:	
Emergency Contact number:	
Medical Condition/ Diagnosis:	
Name of medication, dose, side effects, when to be taken, method of administration, who administers –	
Daily care requirements	
Who will provide the support needed and cover arrangements if they are unavailable? Support to be given by LSA/ teacher/ SENCO Cover to be provided from other classes if needed.	
Staff training needed/ already undertaken:	
What to do in an emergency, what action to take and who to contact:	
Name of parent/carer 1:	
Contact number:	
Relationship to child:	
Name of parent/carer 2:	
Contact number:	
Relationship to child:	
Equipment / Facilities / Accommodation Needs:	
Consent for staff:	



I give permission for school staff to support my child with their additional medical needs and requirements as stated in this document and in line with school policy.		
Signed (parent):	Signed (SENCO)	Signed (SLT)
Date:	Date:	Date:
Date of this plan:	Date of Review:	



INTIMATE CARE PLAN TEMPLATE:

Richmond Avenue Primary & Nursery School

Intimate Care Plan for _____

Name of child:	
Name of person(s) to change the child:	
Name of person(s) to change the child if main adults unavailable:	
Where changing will take place:	
What resources and equipment will be used:	
Who will provide the resources and equipment that will be used:	
Training requirements for staff:	
Disposal of products in:	
Infection control measures:	
Special arrangements for trips/ outings:	
When will the plan be reviewed:	
Review comments:	

If the child is unduly distressed, a member of staff will contact the parent/carer.

**If the above named member of staff is not available due to illness or staff training, then another person, familiar to the child will attend to the child's needs.*

SLT approval:

Date:



Intimate Care Plan Agreement

The parent:

- I agree to ensure that the child is changed at the latest possible time before being brought to school.
- I will provide the school with spare nappies or pull ups and changes of clothing that can be kept in school.
- I understand and agree the procedures that will be followed when my child is changed at school – including the use of any cleanser or wipes.
- I agree to inform the school should the child have any marks/rash.
- I agree to a 'minimum change' policy i.e. the school will not undertake to change the child more frequently than if s/he were at home.
- I agree to review arrangements should this be necessary

Signed: (parent/carer)

The school:

- We agree to change the child during a single session should the child soil themselves or become uncomfortably wet.
- We agree to monitor the number of times the child is changed in order to identify progress made.
- We agree to report to the parent / carer should the child be distressed, or if marks/rashes are seen.
- We agree to review arrangements should this be necessary.

Signed: (school member of staff)

Name: (school member of staff)

Date:.....



Dear Parent / Carer,

Care Plans

On the 25th May 2018, the current data protection laws were replaced by the new, updated General Data Protection Regulations (GDPR). These are designed to ensure greater protection of personal data and stakeholder information.

To ensure that the school is fully compliant with the new regulations, we are writing to ask for explicit consent to have your child's care plan on display in the classrooms and medical rooms. Please sign and return the slip below to give us your response. A copy of your child's most recent care plan is attached.

These plans, as you aware, contain personal information including dates of births, specific medical needs as well as parental contact details. This is not something we would normally have on display but, as it is needed on the care plan, we would like your consent to continue to have these plans readily available to staff to ensure your child's health needs can be fully met and supported at all times.

If you change your mind at any time and would not like the care plan for your child on display, please let us know by emailing chr@richmond-pri.southend.sch.uk, calling the school on 01702 292197, or just popping in to the school office.

If you have any other questions, please get in touch.

Yours sincerely,

Mr Mattingly
Deputy Head / DPL
Richmond Avenue Primary & Nursery School

GDPR – Care Plan Consent

Please tick the relevant box(es) below and return this form to school.

I am happy for my child's care plan to be on display in classrooms

I am happy for my child's care plan to be on display in medical rooms

I am **NOT** happy for my child's care plan to be on display

Child's name:

Parent / Carer's signature: _____

Date: _____