

FAKENHAM JUNIOR SCHOOL POLICY FOR SUPPORTING PUPILS WITH MEDICAL CONDITIONS

Children with medical conditions are entitled to a full education and have the same rights of admission to school as other children. This means that no child with a medical condition will be denied admission because arrangements for their medical condition have not been made. However the school does not have to accept a child in school when it would be detrimental to the health of that child or others to do so e.g. in the case of an infectious disease.

Medical conditions are of two kinds:-

Minor conditions when a child is well enough to attend school but still needs treatment e.g. antibiotics. Parents/carers should bring medicines in their original container with the child's name, the dosage and frequency clearly marked. These should be handed in at the Office and a form giving consent for the school to administer the medicine should be signed. The Headteacher will designate a member of staff who will administer medicines and if necessary an alternative member for school journeys and residential trips. All administration of medicines will be recorded.

Major conditions which are continuing and may involve emergencies e.g. asthma, epilepsy, diabetes, anaphylaxis. These will call for an individual care plan. The plan should be agreed with the child's parents/carers, following the advice of the relevant health professional (consultant, GP, nurse, school medical service). Each plan will include:-

- identification of the roles and responsibilities of everyone involved in the plan.
- What training is needed and who will provide it (usually a relevant professional or a parent/carer). The Headteacher will ensure that sufficient members of staff are trained and that a record of training is kept.
- Details of the child's condition, symptoms, triggers, signs, treatment and facilities or equipment needed
- Details of the medication, dosage, method and frequency of administration, whether administered by staff or self administered with or without supervision.
- Information on what counts as an emergency and action is to be taken and by whom, including arrangements for off-site activities.
- Details of any restrictions on the child's ability to take part in PE.

The plan will be drawn up as soon as the school is notified that a child has a medical condition. All members of staff will be informed of the condition and actions to be taken. This information will be included in induction briefings for new staff and briefings for supply teachers.

Once the plan is drawn up it should be agreed and signed by the parents/carers who should give written permission for staff to administer medication.

NB Staff cannot be compelled to administer medication and may be reluctant to carry out some procedures e.g. catheterisation, administration of rectal sedatives. If there is not an appropriate willing member of staff the school will consult with parents/carers, the Local Authority, and appropriate medical authorities before the care plan is finalised.

Children should be encouraged to take responsibility for their own health care whenever possible. Equipment such as inhalers, spacers and adrenalin pens should always be immediately available to children and not locked away.

Individual care plans should be reviewed annually or more frequently if a child's needs change. The Headteacher will report to governors on care plans, bearing in mind the need for confidentiality.

This policy should be read in conjunction with the Asthma Policy, the Policy on Intimate Care and the Norfolk County Council guidance on Supporting Pupils with Medical Conditions.