



This Policy was updated in October 2022.

The Policy will next be reviewed and updated annually.

Trustee with Responsibility: Jane Randle – Behaviour, Attitude and Personal Development.

Approval Level (T)

This policy combines 'Children with health needs who cannot attend school' and 'Supporting pupils with medical conditions'

Rationale:

Children with special medical needs have the same right to an education as other children. The prime responsibility for a child's health lies with the parent who is responsible for the child's medication and should supply the school with any relevant information. Occasionally, teachers and other school staff in charge of pupils may need to step in and take swift action, for example in an emergency. This duty also extends to teachers leading activities taking place off the school site.

Policy Implementation

- The overall responsibility for the successful implementation of this policy is the Director who will also be responsible for ensuring that staff are suitably trained. The Director will ensure cover arrangements in the case of staff absence.
- The Deputy Director and “Responsible Person” will be responsible for individual healthcare plans.
- All staff and relevant volunteers will be aware of any individual medical conditions. All new members of staff/ volunteers will be inducted into the arrangements and guidelines set out in this policy as appropriate.

Definitions of Medical Conditions:

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

Short-term affecting their participation in school activities because they are on a course of medication;

Long-term potentially limiting their access to education and requiring extra care and support (deemed special medical needs).

The Role of Staff

Some children with medical conditions may be disabled. Where this is the case The Trustees will comply with their duties under the Equality Act 2010. Some may also have Special Educational Needs and may have an Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision.

If a child is deemed to have a long-term medical condition, the school will ensure that arrangements are in place to support them. In doing so, where possible, staff will ensure that such children can access and enjoy the same opportunities at school as the other children. The school health professionals, Parents/Carers and other support services will work together to ensure that children with medical conditions receive a full education, unless this would not be in their best interests because of their health needs. In some cases, this will require flexibility and liaison with the Local Authority and health professionals. Consideration will also be given children who have long periods of absence due to medical needs can be reintegrated back into school.

Staff must not give prescription medicines or undertake health care procedures without appropriate training or consent from parents (as noted on Individual Health Care Plans). We recognise that a first-aid certificate does not constitute appropriate training in supporting children with medical conditions. Healthcare professionals will provide training and subsequent confirmation of the proficiency of staff in a medical procedure, or in providing medication.

Procedures to be followed for children with a Medical Condition

We will ensure that the correct procedures will be followed whenever we are notified that a pupil has a medical condition. The procedures will also be in place to cover: any transitional arrangements between schools; the process to be followed upon reintegration; or when pupil's needs change.

For children starting at The Treehouse School, arrangements will be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or children moving to The Treehouse mid-term, we will make every effort to ensure that arrangements are put in place as soon as possible.

We will ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life. We will ensure that arrangements give Parents/Carers and pupils confidence in the school's ability to provide effective support for medical conditions in school. The arrangements will show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care.

We will ensure that arrangements are clear and unambiguous about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and wherever possible, not prevent them from doing so.

Where a child has an Individual Health Care Plan, this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other pupils in the school should know what to do in general terms, such as informing a teacher immediately if they think help is needed. If a child (regardless of whether they have an Individual Health Care Plan) needs to be taken to hospital, staff should stay with the child until the Parent/Carer arrives, or accompany a child taken to hospital by ambulance.

Individual Health Care Plans

Individual Healthcare Plans will help to ensure that the school effectively supports pupils with medical conditions. They will provide clarity about what needs to be done, when and by whom. They will be written and reviewed by our 'Responsible Person' but it will be the responsibility of all members of staff supporting the individual child to ensure that the plan is followed. The class teacher will be responsible for the child's development and ensuring that they and their medical conditions are supported at school.

Individual Health Care Plans will be easily accessible to all who need to refer to them, while preserving confidentiality. Plans will capture the key information and actions that are required to support the child effectively. The level of detail within the plan will depend on the complexity of the child's condition and the degree of support needed. This is important because different children with the same health condition may require very different support. Where a child has SEN but does not have an EHC plan, their SEN should be mentioned in their Individual Health Care Plan.

Annex A shows a template for the Individual Health Care Plan and the information needed to be included. Individual Health Care Plans, (and their review), may be initiated, in consultation with the Parent/Carer, by a member of school staff or a healthcare professional involved in providing care to the child. The Individual Health Care Plan must be completed by the Lead Professional with support from Parents/Carers, and a relevant healthcare professional, e.g. school, specialist or children's community nurse, who can best advise on the particular needs of the child. Pupils should also be involved whenever

appropriate. The responsibility for ensuring it is finalised and implemented rests with the school. The school will ensure that Individual Health Care Plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed.

Some children may have an Emergency Health Care Plan prepared by their lead clinician that could be used to inform development of their Individual Health Care Plan. The Emergency Health Care Plan will not be the School's responsibility to write or review.

The Child's Role in managing their own Medical Needs

If it is deemed, after discussion with the Parents/Carers, that a child is competent to manage their own health needs and medicines, the school will encourage them to take responsibility for managing their own medicines and procedures. This will be reflected within Individual Health Care Plans.

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; these will be kept in a safe place to ensure that the safeguarding of other children is not compromised.

We do also recognise that children who can take their medicines themselves or manage procedures may require an appropriate level of supervision. If a child is not able to self-medicate then relevant staff should help to 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 instead follow the procedure agreed in the Individual Health Care Plan. Parents/Carers should be informed so that alternative options can be considered.

Managing Medicines

The following are the procedures to be followed for managing medicines and other health related conditions:

- Medicines should only be administered at the School when it would be detrimental to a child's health or school attendance not to do so.
- The school will administer non-prescription medicines to a child e.g. Calpol if a Parent/Carer wishes a child to have the non-prescription medicine administered during the School day. They will need to come to the School and complete a consent form.
- The School will 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. The exception to this is insulin which must still be in date but will generally be available inside an insulin pen or a pump, rather than in its original container.
- All medicines will be stored safely. Children should know where their medicines are at all times and be able to access them immediately.
- Medicines and devices such as asthma inhalers should be always readily available to children.
- During school trips, the first aid trained member of staff/member of staff in charge of first aid will carry all medical devices and medicines required.
- When no longer required, medicines should be returned to the Parent/Carer to arrange for safe disposal.

Managing Health-Related Issues

- Menstruation - The best remedial action would be either to send the child home after telephoning the parent/guardian or to remove the child from class to rest until the discomfort disappears. Appropriate arrangements will then be made.
- Head lice- Staff do not touch children and examine them for head lice. If it is suspected that a child has head lice, the parents will be informed and be asked to examine their children at home. When the school is informed of a case of headlice, all parents will be advised to check their children at home as soon as possible.
- Vomiting and diarrhoea- If a child vomits or has diarrhoea in school, they will be sent home immediately. Children with these conditions will not be accepted back into school until 48 hours after the last symptom has elapsed.
- Chicken pox and other diseases or rashes- If a child is suspected of having chicken pox etc, we will look at their arms or legs. If a child has any of these infections, they will need to stay off school for a prescribed period of time. The Director or school office will advise timescales. This is so that any pregnant members of the school community can guard against any infection.

Complaints

Should Parents/Carers or pupils be dissatisfied with the support provided for their child they should discuss their concerns directly with the School. If for whatever reason this does not resolve the issue, they may make a formal complaint via the complaints procedure outlined in the School's Complaints Policy.



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Annex A

Individual Health Care Plan

Child's Name		Date of Birth	
Class			
Address			
Medical Diagnosis or Condition			
Date		Review Date	

Name of Parent/ Carer 1			
Contact Numbers	Work:		
	Home:		
	Mobile:		
Relationship to Child			
Name of Parent/ Carer 2			
Contact Numbers	Work:		
	Home:		
	Mobile:		
Relationship to Child			

Clinic/ Hospital Name			
Contact Number			
GP Name			
Contact Number			

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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 child's educational, social and emotional needs,

Arrangements for school visits/trips

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Other information

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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

Staff training needed/undertaken – who, what, where and when

Plan developed with

signed

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