



Policy for the Support of Pupils with Medical and Mental Health Needs

Audience:	School and academy staff, particularly Headteachers and administrative staff Local Governing Bodies
Reviewed:	November 2024
Other related policies / procedures	First Aid Risk Assessments SEND Code of Practice Attendance Policy Asthma Policy Allergies and Anaphylaxis Policy Administering Medication Policy Children Protection and Safeguarding Policy
Owner	
Policy / procedure model	MAT policy: all Crofty schools use this policy Aligned: Policy to be adapted to school where indicated School policy: specific to needs of the school

The School recognises that it has a responsibility to support pupils with medical and mental health needs.

Medical Needs

The school follows the Department for Education's guidance on managing medicines in schools and early years settings:-

(https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/484418/supporting-pupils-at-school-with-medical-conditions.pdf)

Responsible Person

Alexandra Carr is responsible for ensuring that the arrangements below are effectively implemented and maintained.

Medicine in School

Medicines will only be administered at school when it would be detrimental to a student's health not to do so. The school will store and dispense medication to students as long as:-

- It is prescription medication which has been prescribed by a medical practitioner with written instructions for its use; or
- It is non-prescription medication which has been supplied by the parent/guardian with written instructions for its use; and
- Written parental consent has been given.

The school does not keep or dispense any other medication [other than salbutamol for use with the emergency asthma kit (see below)].

Medication brought into school must be clearly labelled with the student's name, dosage, method of administration and be in-date.

Medication will be available to identified students at all times of the school day.

Self-Management of Medication

In certain circumstances the school will allow students to manage their own medication. In each case this will be discussed with the parent/guardian and appropriate health professionals - and an assessment of risk will be completed.

The assessment of risk will include an evaluation of the risk to the student and others through inappropriate use of the medication, loss of the medication or failure to take the medication

Emergency Asthma Kits

This school's procedures for managing the use of the emergency asthma kit is based on Department of Health guidance:-

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/350640/guidance_on_use_of_emergency_inhalers_in_schools_September_2014_3.pdf

Staff authorised to dispense this medication have read the above guidance and have been given instruction in the recognition of the symptoms of an asthma attack and the appropriate procedures to follow.

The emergency inhaler contains Salbutamol and will only be available to students who have been

- diagnosed with asthma and prescribed an inhaler OR
- prescribed an inhaler as reliever medication.

In addition, parental consent must be obtained for use of the emergency inhaler.

The school keeps a register of students who have been diagnosed with asthma or prescribed a reliever inhaler.

The emergency asthma kit will be stored and managed in the same way as any other prescription medication following the procedures above.

For further information please see the school Asthma policy.

Storage of Medicine

Medicines will be securely stored in the School Office (staffroom refrigerator if refrigeration required).

All medicines must be signed in in the Medicines Log.

Any medicine given out or administered must be recorded in the Medicines Log.

Medicines can only be given out by first aiders.

Facilities for Medical Procedures

A room has been provided for medications and medical treatments to be administered [school office or staffroom].

Training

The responsible person will ensure that sufficient staff are suitably trained in the administration of medication and support of students with medical needs.

The responsible person will keep a record of all medical needs training.

Sharing of Information

The responsible person will ensure that relevant staff are made aware of any student's medical condition.

This information will include, where appropriate:-

- Medical condition
- Side effects of medication
- Signs and symptoms
- Modifications and allowances
- Emergency actions

The responsible person will also ensure that relevant information is shared with cover staff etc.

Being notified that a child has a medical condition

When the school is notified that a pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an IHP.

The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

Individual Healthcare Plans

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions.

This has been delegated to [insert role, if not the headteacher].

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed. A healthcare plan review can be initiated by the school, healthcare professional or the parents/carers.

Plans will be developed with the pupil's best interests in mind and will set out:

What needs to be done

When

By whom

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing board and the headteacher/role of individual with responsibility for developing IHPs, will consider the following when deciding what information to record on IHPs:

The medical condition, its triggers, signs, symptoms and treatments

The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, 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, including in emergencies. If a pupil is self-managing their medication, this will 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 pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable

Who in the school needs to be aware of the pupil's condition and the support required

Arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours

Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments

Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition

What to do in an emergency, including who to contact, and contingency arrangements

The needs of children with specific medical conditions which require specialist and intimate care as well as adjustments to the fabric of the building are covered by the school's Disability Access Plan, the Intimate Care Policy and within Individual Health Care Plans as they are specific to the needs of the individual child.

Risk Assessment

In addition to the healthcare plan the school will carry out individual risk assessments for any student where the student's medical needs introduce new risks to an activity or increase existing risks. This will include (but may not be limited to) individual risk assessments for off-site activities, sporting activities and practical lessons.

Risk assessment for off-site activities, in particular, will include consideration of:-

- Access to medication
- Appropriate storage of medication
- Staff training in administration of medication
- Emergency procedures

Unacceptable practice

To prevent unacceptable practice the responsible person will ensure that:

- Students have access to their medication at all times during the school day or during educational activities off-site.
- Healthcare plans reflect the needs of the student and take into account the views of parents/carers and advice of healthcare professionals
- Every effort is made to ensure that students with medical needs are able to stay in school for normal school activities (including lunch) unless there is a specific reason detailed in their healthcare plan not to do so.
- If the student becomes ill; ensure that he/she is accompanied to the school office/medical room by an appropriate person.
- Students with medical needs are not penalised in their attendance record if their absences are related to their medical condition, hospital appointments, etc.
- Toilet, food and drink breaks are provided where necessary in order to manage a student's medical condition.
- Arrangements for administering medication do not include the need for parent/carers to attend school.
- Every effort is made to ensure that students with medical needs are able to take part in every aspect of school life including off-site activities, sporting events and practical lessons.

Complaints

Parents/carers are encouraged to contact **Alexandra Carr** if they are concerned or dissatisfied in any way with the support provided by the school for a student with medical needs.

If concerns cannot be resolved in this manner; parents/carers can follow the school's complaint procedure.

Mental Health Concerns

Halwin School uses guidance from:

Mental health and behaviour in schools – November 2018

www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2

Counselling in Schools: a blue print for the future –February 2016

www.gov.uk/government/publications/counselling-in-schools

Future in mind - promoting, protecting and improving our children and young people's mental health and wellbeing – October 2012

[www.gov.uk/government/uploads/system/uploads/attachment_data/file/414024/Childrens Mental Health.pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/414024/Childrens_Mental_Health.pdf)

NICE guidance on social and emotional wellbeing in primary education. - November 2019

<https://pathways.nice.org.uk/pathways/social-and-emotional-wellbeing-for-children-and-young-people#path=view%3A/pathways/social-and-emotional-wellbeing-for-children-and-young-people/social-and-emotional-wellbeing-in-primary-education.xml&content=view-index>

to support this policy on mental health and wellbeing.

The school is aware that there could be children with mental health issues within the school and families for whom mental health is a significant problem.

Mental health and wellbeing is a term which covers a wide range of difficulties/situations faced by children and their families and include:

- Learning difficulties
- Emotional trauma
- Autism
- Attachment Disorder
- Attention Deficit Disorder
- Depression
- Anxiety
- Bipolar Disorder
- Obsessive Compulsive Disorder
- Bereavement
- Speech and Language Difficulties
- Low Self Esteem
- Poor resilience
- Gender Identity concerns
- Family break down
- Domestic Violence

All these conditions and situations, and many more, have a devastating impact upon the overall wellbeing of children in school, either directly or indirectly and they also impact upon their educational success. The Department for Education recognises that schools have a key role to play in supporting children to have resilience and to be mentally healthy.

Schools have a duty to promote the wellbeing of children.

Halwin School recognises the eight key principles outlined in government advice in promoting good emotional health and wellbeing:

- Good leadership and management which sees this as a whole school issue and recognises its importance for both children and staff
- An ethos and environment which promotes respect and values diversity
- Curriculum teaching and learning which promotes and supports resilience and social and emotional learning
- Recognition of the power of the student voice in influencing decisions
- Staff development and training which supports personal wellbeing as well as that of children
- Effective identification and recognition of need
- Targeted and effective support
- Close working with parents and carers

Equal opportunities

Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

At this school the following is in place to ensure that these principles underpin practice:

Training:

Epi Pen Training

Diabetic Training

First Aid

Paediatric first aid

3 day First Aid at Work

For further detail please refer to the training matrix which has staff names and dates of training.

· Interventions:

Strategy	Delivered by
Curriculum teaching	Teachers and HLTAs
TIS	Those staff suitably training
Draw and Talk	Professionally trained non-teaching staff
Emotional health and wellbeing	Dreadnought
Emotional health and wellbeing	Bishops Forum

· Professional advice

Professional	Service
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School Nurse	School Nursing Service
CAMHs	NHS
Paediatrician	NHS
Educational psychologist	Educational psychology service, Cornwall Local Authority
Penhaligon's Friends	Bereavement Service
ASD	Autistic Spectrum Team, Cornwall Local Authority

- Personal, Social, Health and Emotional Development

Curriculum resources used to support PHSED
Kapow PSHE curriculum guidance and resources
TIS guidance and resources
Lyfta

Other available resource links:

www.pshe-association.org.uk

www.youngminds.org.uk

<https://www.healthycornwall.org.uk/organisations/healthy-schools>

Evaluation:

The effectiveness of this policy is monitored by **Alexandra Carr & Linda May** to ensure that it:

- Continues to effectively meet the needs of the children, staff and wider stakeholders of the school
- Responds to any issues that have arisen which may impact upon the ability of the school to follow the principles of the policy
- Meets the needs of legislation and it changes and requires amendments to policy and procedures
- Meets the very particular needs of children and staff joining the school whose condition requires them to be recognised within the parameters of this policy.

This policy is reviewed annually by the governors to ensure that it meets the needs of the school.