



**KING'S PARK  
ACADEMY**

High Expectations Lead to High Achievers

# **Supporting Pupils with Special Medical Needs Policy**

**Adopted by Academy Advisory Committee: October 2020**

**To be reviewed: October 2023**

**HIGH EXPECTATIONS LEAD TO HIGH ACHIEVERS  
PART OF AMBITIONS ACADEMIES TRUST**

# King's Park Academy

## Supporting Pupils with Special Medical Needs Policy

King's Park Academy endeavours to ensure that all its pupils achieve success in their academic work in their relationships and in their day to day experiences at school. Some of our pupils are likely to have medical needs which mean that additional measures are required to ensure that they are enabled to have full access to the curriculum, that the impact of their medical difficulties upon their life in the academy is minimised as far as possible, and that all staff who work with the pupil understand the nature of their difficulties and how best to help them.

While there is no legal or contractual duty on teachers to administer medicines or supervise pupils taking their medicines nevertheless we would wish to support our pupils where we can. Pupils with special medical needs have the same right of admission to King's Park Academy as other children and cannot be excluded from the academy on medical grounds alone.

Teachers and support staff are in 'loco parentis' and may need to take swift action in an emergency, both at the academy and off site, for example during school trips.

The prime responsibility for a pupil's health lies with the parent or carer who is responsible for the pupil's medication and should supply the school with any relevant information.

### 1. Aims

King's Park Academy aims to:

- a) Follow the statutory guidance supporting pupils at school with medical conditions April 2014.
- b) Assist parents in providing medical care for their children.
- c) Produce in conjunction with Parents, Health Care Professionals and SENCO individual Health Care Plans where necessary. See Appendix 1 and 2.
- d) Educate staff and pupils in respect of special medical needs.
- e) Adopt and implement any national or LA policies in relation to medication in academies.
- f) Arrange training for staff who support individual pupils with special medical needs.
- g) Liaise as necessary with medical services in support of the pupil.
- h) Ensure that pupils with special medical needs are enabled to access the full life of the academy where possible.
- i) Maintain appropriate records.

### 2. Entitlement

King's Park Academy accepts that pupils with medical needs should be assisted if at all possible and that they have a right to the full education available to other pupils

King's Park Academy believes that pupils with medical needs should be enabled to achieve full attendance and receive necessary proper care and support.

King's Park accepts all employees have rights in relation to supporting pupils with medical needs in relation to:

- a) Access to Health Care Plans (HCP)/Education Health Care Plans (EHCP).
- b) Choosing whether or not to become involved
- c) Receiving appropriate training
- d) Working to clear guidelines as detailed in the EHCP & HCP
- e) Any concerns about legal liability
- f) Bringing any concerns they have about supporting pupils with medical needs to the management

### **3. Expectations**

We do not expect parents to ask staff to administer medication unless it is absolutely essential (a) that this takes place during school hours and (b) that the pupil is unable to do so him/herself either because of the complexity of the procedure or because the pupil would not normally have access to prescription medication without supervision.

Where parents have asked the academy to administer the medication for their child we ask that the prescription and dosage regime is clearly typed or printed on the outside of the container. The name of the pharmacist should be visible. Any medications not presented properly will not be accepted by academy staff.

Only medication where the dosage is required 4 times a day or administered prior to food will be accepted.

King's Park Academy will deal with each request to administer medication or offer other support to a pupil with special medical needs separately.

The academy will liaise with the School Health Service for advice and information about a pupil's special medical needs and will seek support from the relevant practitioners where necessary and in the interests of the pupil. An Education Health Care Plan or Health Care Plan will be put in place if appropriate.

### **4. Practice**

When a parent requests that we administer medication in the academy school we will:

- a) Ask the identified person to consider whether or not they are prepared to administer the medication.
- b) Discuss with the Lead First Aider and obtain the parent's written consent for the administration of the medication required.
- c) If it is viable for the Academy to administer the medication we will then work with the parent to set up a HCP for the pupil.
- d) We will ensure that the medication is kept in a secure place during the Academy day, that it is only accessed by the identified person, and that each time the medication is administered the academy's medication record is completed.
- e) At the end of the school day or at the end of each week, or at the end of term (whichever is appropriate) we will ensure that any leftover medication is handed back to the parent/carer by the identified person.

- f) Out of date medication is the responsibility of the parent. If the parent/carer does not come to the academy to collect the medication it will be destroyed using approved methods and this will be recorded in the medication register.
- g) When the pupil comes to the end of his/her course of treatment the HCP will be marked 'treatment completed' but will be retained on the pupil's academy record should it be needed for future reference.
- h) The academy will also keep the medication record in the academy's secure archives so that any future queries can be resolved.

**Key Codes:**

SENCO – Special Education Needs Co-ordinator

LA – Local Authority

EHCP – Education Health Care Plan

HCP – Health Care Plans

**CARE PLAN FOR A SCHOOL-AGE CHILD WITH HEALTH NEEDS**  
**N.B. This information should be shared on a need to know basis.**

|          |                                |
|----------|--------------------------------|
| Name:    | Date of Birth:                 |
|          | NHS No:                        |
| Female   | Ethnic Origin/Religion:        |
| Address: | School:<br>King's Park Academy |

Medical Condition(s):

**PLAN PREPARED AND CO-ORDINATED BY:**

|                       |                               |
|-----------------------|-------------------------------|
| Name: Rachel Holroyde | Designation: Head First Aider |
| Signature:            |                               |
| Date Plan Prepared:   | Review Date:                  |

**FAMILY CONTACT INFORMATION**

|   |                        |
|---|------------------------|
| Name:   | Relationship to Child: |
| <b>Telephone (Daytime):</b><br><b>Telephone (Work):</b><br><b>Telephone (Home):</b><br><b>Telephone (Mobile):</b> |                        |

**2<sup>ND</sup> EMERGENCY CONTACT**

|   |                        |
|---|------------------------|
| Name:   | Relationship to Child: |
| <b>Telephone (Daytime):</b><br><b>Telephone (Work):</b><br><b>Telephone (Home):</b><br><b>Telephone (Mobile):</b> |                        |

**HEALTHCARE CONTACTS**

|                      |            |
|----------------------|------------|
| School Nurse:        | Telephone: |
| Hospital Consultant: | Telephone: |
| GP:                  | Telephone: |
| Other:               | Telephone: |

**Signature of Parent/Guardian:**.....

**Form prepared in partnership with and copied to:**

Parents of  
School

GP  
Hospital consultant

**Aims and Objectives:**

**For \*\*\*\* to be able to fully access the school curriculum.**  
**For \*\*\*\*\* to have his health needs met within the school environment, in a supportive, safe and manageable way.**  
**For parents and school to maintain open communication in order to support \*\*\*\*\*'s needs and ensure all parties feel supported to maintain the highest standards of care.**

**Medical Condition:**

**Identified Health Care Needs:**

**How to care for a child following a medical incident:**

**For School Nursing to be kept updated by either school or parents of any changes to the above plan, in order to keep \*\*\*\*\*'s School Health records up to date and accurate.**

**References:**  
**Department for Education (2015). Supporting pupils at schools with medical conditions.**  
**Accessed on:**  
**[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/638267/supporting-pupils-at-school-with-medical-conditions.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/638267/supporting-pupils-at-school-with-medical-conditions.pdf)**

**Copies to be kept:**  
**In Class**  
**Medical Room**  
**School File**

.....  
**Mrs Lauren Dean**  
**Principal**

.....  
**Parent/Mother/Father**

# Individual healthcare plan (IHP) for epilepsy

Date: \_\_\_\_\_ Review date: \_\_\_\_\_

## Child's details

|                  |  |
|------------------|--|
| Name             |  |
| Group/class/form |  |
| Date of birth    |  |
| Address          |  |

## Family contact information

|                       |  |
|-----------------------|--|
| 1. Contact name       |  |
| Relationship to child |  |
| Phone number (work)   |  |
| (mobile)              |  |
| (home)                |  |
| 2. Contact name       |  |
| Relationship to child |  |
| Phone number (work)   |  |
| (mobile)              |  |
| (home)                |  |

## Clinic/hospital contact

|              |  |
|--------------|--|
| Name         |  |
| Role         |  |
| Phone number |  |

## GP

|              |  |
|--------------|--|
| Name         |  |
| Phone number |  |

|   |  |
|---|--|
| Who is responsible for providing support at school? |  |
|---|--|

## Details of epilepsy / epilepsy syndrome

|  |
|--|
|  |
|--|

Seizure(s) – type, what happens before, during and after, frequency, and duration

|    |  |
|----|--|
| 1. |  |
|    |  |
| 2. |  |
|    |  |
| 3. |  |
|    |  |

Action to be taken during and after a seizure

|    |  |
|----|--|
| 1. |  |
|    |  |
| 2. |  |
|    |  |
| 3. |  |
|    |  |

Emergency procedure if seizure lasts more than \_\_\_\_\_ minutes

|   |
|---|
| <p>Is an emergency medicines care plan in place: yes / no</p> |
|---|

Emergency medicine(s) *(only to be administered by named and trained members of staff):*

|   |  |
|---|--|
| Name and dose of medicine                 |  |
| Named individual(s) who may give medicine |  |

Epilepsy medicine(s)

|       |       |            |
|-------|-------|------------|
| Name: | Dose: | Time given |
| Name: | Dose: | Time given |
| Name: | Dose: | Time given |



Support needed after a seizure

Side-effects of medicine(s)

Information about other treatments

Seizure triggers (if known)

Specific support or equipment required (for medical, learning, social, emotional needs)

Activities that require special precautions, and how to manage

Arrangement for school trips

|  |
|--|
|  |
|--|

Other information

|  |
|--|
|  |
|--|

This plan has been agreed by (pupil/parent/carer/doctor/school nurse/epilepsy specialist nurse):

|       |                 |
|-------|-----------------|
| Name: | Signature:      |
| Role: | Contact number: |

|       |                 |
|-------|-----------------|
| Name: | Signature:      |
| Role: | Contact number: |

|       |                 |
|-------|-----------------|
| Name: | Signature:      |
| Role: | Contact number: |

|       |                 |
|-------|-----------------|
| Name: | Signature:      |
| Role: | Contact number: |

|       |                 |
|-------|-----------------|
| Name: | Signature:      |
| Role: | Contact number: |

Details of staff training required/undertaken

|  |
|--|
|  |
|--|

