



Supporting pupils with medical conditions policy

Category	Statutory	
Reviewed by	Office Manager and Headteacher	
Approved by and when	ved by and when Local Governing Body in March 2024	
Frequency of review Annually		
Next Review	March 2025	

1. Aims

This policy aims to ensure that:

Pupils, staff and parents understand how our school will support pupils with medical conditions

Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities.

The governing board will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupils' conditions, where appropriate

Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions Providing supply teachers with appropriate information about the policy and relevant pupils

> Developing and monitoring individual healthcare plans (IHPs)

2. Legislation and statutory responsibilities

This policy meets the requirements under <u>Section 100 of the Children and Families Act 2014</u>, which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education (DfE)'s statutory guidance on <u>supporting pupils with medical</u> <u>conditions at school</u>.

This policy also complies with our funding agreement and articles of association.

3. Roles and responsibilities 3.1 The

governing board

The governing board has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

3.2 The headteacher

The headteacher will:

- > Make sure all staff are aware of this policy and understand their role in its implementation
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- > Ensure that all staff who need to know are aware of a child's condition
- > Take overall responsibility for the development of IHPs
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- Contact the school nursing service in the case of any pupil who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

3.3 Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

Teachers will consider the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help. **3.4**

Parents

Parents will:

- > Provide the school with sufficient and up-to-date information about their child's medical needs
- > Be involved in the development and review of their child's IHP and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times

3.5 Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

3.6 School nurses and other healthcare professionals

Our school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible. They may also support staff to implement a child's IHP.

Healthcare professionals, such as GPs and paediatricians, will liaise with the school's nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

3.7 The Local Authority (LA) The

LA will:

- Promote cooperation between relevant partners and stakeholders regarding supporting pupils with medical conditions.
- > Provide support, advice and guidance to schools and their staff.
- Making alternative arrangements for the education of pupils who need to be out of school for fifteen days or more due to a medical condition.

4. 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.

5. 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.

See Appendix 1.

6. Individual healthcare plans (IHPs)

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

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

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, 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
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for use of rest periods or additional support in catching up with lessons, counselling sessions
- > The level of support needed, including in emergencies.
- 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 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

7. Managing medicines

Prescription and non-prescription medicines will only be administered at school:

> When it would be detrimental to the pupil's health or school attendance not to do so and

Where we have parent/carers written consent

The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents.

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken.

The school will only accept prescribed medicines that are:

- > In-date
- > Labelled
- > Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Pupils will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils and not locked away.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

See appendix 4 for medication administration permission and log.

7.1 Controlled drugs

<u>Controlled drugs</u> are prescription medicines that are controlled under the <u>Misuse of Drugs Regulations 2001</u> and subsequent amendments, such as morphine or methadone.

Controlled drugs are kept in a secure cupboard in the school office and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

7.2 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable to:

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- > Assume that every pupil with the same condition requires the same treatment
- > Ignore the views of the pupil or their parents
- > Ignore medical evidence or opinion (although this may be challenged)
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- > If the pupil becomes ill, send them to the school office unaccompanied or with someone unsuitable
- > Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- > Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupil, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- > Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

8. Emergency procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHPs will clearly set out what constitutes an emergency and will explain what to do. See appendix 5.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance.

9. Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the headteacher. Training will be kept up to date.

Training will:

- > Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
- Fulfil the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

10. Record keeping

The governing board will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parents will be informed if their pupil has been unwell at school.

IHPs are kept in a readily accessible place which all staff are aware of.

11. Liability and indemnity

The governing board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

Teachers who undertake responsibilities within this policy are covered by the school's insurance. The insurance provides professional indemnity for Staff, Directors and Officers.

Full written insurance policy documents are available to be viewed by members of staff who are providing support to pupils with medical conditions. Those who wish to see the documents should contact the Office Manager.

12. Complaints

Parents with a complaint about the school's actions in regard to their child's medical condition should discuss these directly with a senior member of staff in the first instance. If they cannot resolve the matter, they will direct parents to the school's complaints procedure.

13. Monitoring arrangements

This policy will be reviewed and approved by the governing board every year.

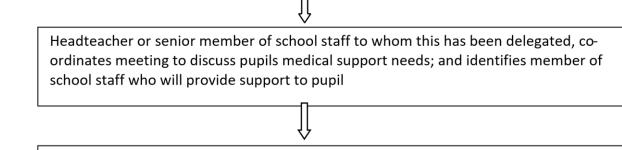
14. Links to other policies

This policy links to the following policies:

- > Accessibility plan
- > Child protection and safeguarding policy
- > Complaints
- > Equality information and objectives
- First aid
- > Health and safety
- > Special educational needs policy

Introduction
APPENDIX 1: Being notified a child has a medical condition

Parent or healthcare professional informs school that pupil has been newly diagnosed or is due to return to school after a long-term absence, or that the pupils needs have changed



Meeting to discuss and agree on need for IHP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them)

Develop IHP in partnership – agree who leads on writing it. Input from healthcare professional must be provided.

School staff training needs identified.

Healthcare professional commissions/delivers training and staff signed-off as competent – review date agreed

IHP implemented and circulated to all relevant staff

IHP reviewed annually or when condition changes. Parent or healthcare professional to initiate.

APPENDIX 2: Example of Individual Healthcare Plan

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	
Family Contact Information	
Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Clinic/Hospital Contact	
Name	
Phone no.	
G.P.	
Name	
Phone no.	

Who is responsible for providing support in school

port in

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 pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

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)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

3: Model letter inviting parents to contribute to individual healthcare plan development

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom.

Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

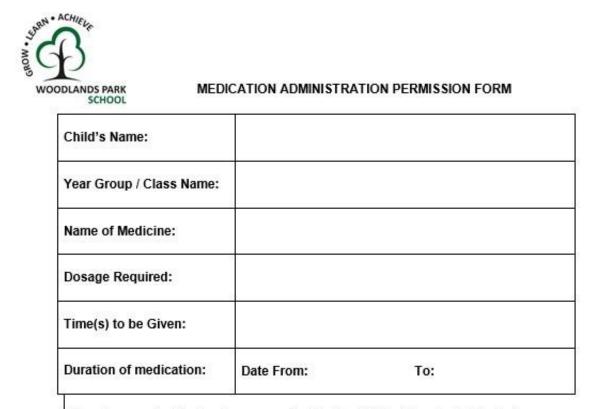
A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely

4: Example of Medication Administration Permission Form & Medicine Administration Log

The school will not give your child medicine unless you complete and sign a Medication Administration Permission Form.



If the above medication has been prescribed by the GP, it will be clearly labelled indicating contents, dosage and child's name in FULL. All other medication will be given as per instructions on the packet or as stated by the parent.

I understand that the medicine must be delivered personally to a member of staff and accept that this is a service which the School is not obliged to undertake.

Signed by Parent / Carer:	
I confirm that my emergency contact details on file with school are up to date and accurate.	
Date:	

PLEASE NOTE: Medication will not be accepted in the School unless this form is completed and signed by the parent or legal guardian of the child and administration of the medicine is agreed by the Headteacher.

The Governors and Headteacher reserve the right to withdraw this service. Whilst the School will endeavour to ensure that your child is given the above medication, we cannot accept responsibility if it is forgotten or not administered on time. Please refer to the Supporting Pupils with Medical Conditions Policy.

5: Contacting Emergency Services

At Woodlands Park to contact the emergency services you need to lift handset and press Line 1 or Line 2 on the black phones OR press 9 on the internet handsets.

Dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

School Telephone Number	01628 822350
Mobile number if being used	
Name of caller	
The location of the school	Woodlands Park Primary School Heywood Avenue Woodlands Park Maidenhead Berkshire SL6 3JB
The name of the child and a brief description of their symptoms	
The exact location of the patient within the school setting	
The best entrance to use and state that the crew will be met and taken to the patient	The main vehicle gates entrance
Any First Aid already administered	
Have the parents been informed?	

If the parer	nts are not
available to	o attend school
who will ac	company the child
to hospital?	?

6: Woodlands Park First Aid Procedure

Our first Aid procedure requirements will be achieved by:

Ensuring there are an adequate number of trained first aiders on duty to provide sufficient and effective cover for the numbers and risks on the premises in accordance with need.

The first aiders are responsible for administering first aid, in accordance with their training, to those who become injured or fall ill whilst at work or on the premises. The School Business Manger is responsible for the first aid kit requirements. A list of current First Aiders is displayed in each classroom, the hall and the offices.

Our stock of First Aid supplies is kept in the cupboard in the disabled toilet opposite the Beech room. A First Aid Kit Bum-Bag containing wipes, gloves, plasters and gauze is located in each classroom for immediate use. A First Aid Kit is also located in the School Hall. All staff may administer minor first-aid treatment of minor cuts and grazes.

Toileting Accidents

From time to time it is necessary for school staff to change a child following a toileting incident. When children join the school, parents/carers are asked to sign 'Permission to change your child' as part of admission process, giving the school permission to change the child in a sensitive and safe way.

Following good safe guarding practice, at Woodlands Park we ensure that no adult is put in a vulnerable position in this situation and therefore a second adult is always advised and in the immediate vicinity when a child is being changed. Older children are encouraged to change themselves although an adult is available to give guidance and verbal support.

Emergency Arrangements

When called in the event of an accident, the first aider will take charge of the first aid administration and emergency treatment commensurate with their training. Following their assessment of the injured person they are to administer appropriate first aid and make a balanced judgement as to whether to call an ambulance. If this is deemed necessary information on Contacting Emergency Services is set out above in **Appendix 5**. Copies of this form are kept next to the phone in the main school office.

If parents are not contactable in an emergency when a child requires hospital treatment a member of staff will accompany the child to hospital and remain with them until parents arrive at the hospital.

Records

A record is kept of all minor injuries that require actual medical intervention to children that occur on school site – this does not include minor scrapes/grazes that may or may not require a plaster. Recorded incidents will include any minor injury that requires a cold compress, or broader medical intervention. Records in school consist of a copy of the information that is sent home to parents via a 'school accident form'.

Should a child receive a bump to the head, a judgement is made as to whether or not a call of concern to the parent/carer is required. This is noted on the form.

Details of more serious accidents/injuries, including those that require the intervention of emergency services, will be recorded on the Accident/Incident/Near Miss Report Form. This form is then sent to the Chris Fisher at SEBMAT.