

Roxbourne Primary School



Supporting Pupils with Medical Conditions policy

Author	Inclusion Leader
Link Governor (if applicable)	Safeguarding Link Governor
Review Cycle	Annual
Approved By	Full Governing Body
Date of Review	February 2024
Date of Next Review	February 2025
Requirement	Statutory

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 pupil's condition, 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)

The named person with responsibility for implementing this policy is the Assistant Headteacher (for Inclusion and Safeguarding).

2. Legislation and statutory responsibilities

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), 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's statutory guidance: [Supporting pupils at school with medical conditions](#).

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
- 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.

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 take into account 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. Class Teachers will also lead sessions with their class on the importance of appropriate use / misuse of medicines and the importance of the Medical Box.

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

Depending on the age of pupils, pupils with medical conditions will:

- be best placed to provide information about how their condition affects them
- Will be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs
- be 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 pediatricians, will liaise with the school's nurse / Inclusion Lead and notify them of any pupils identified as having 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.

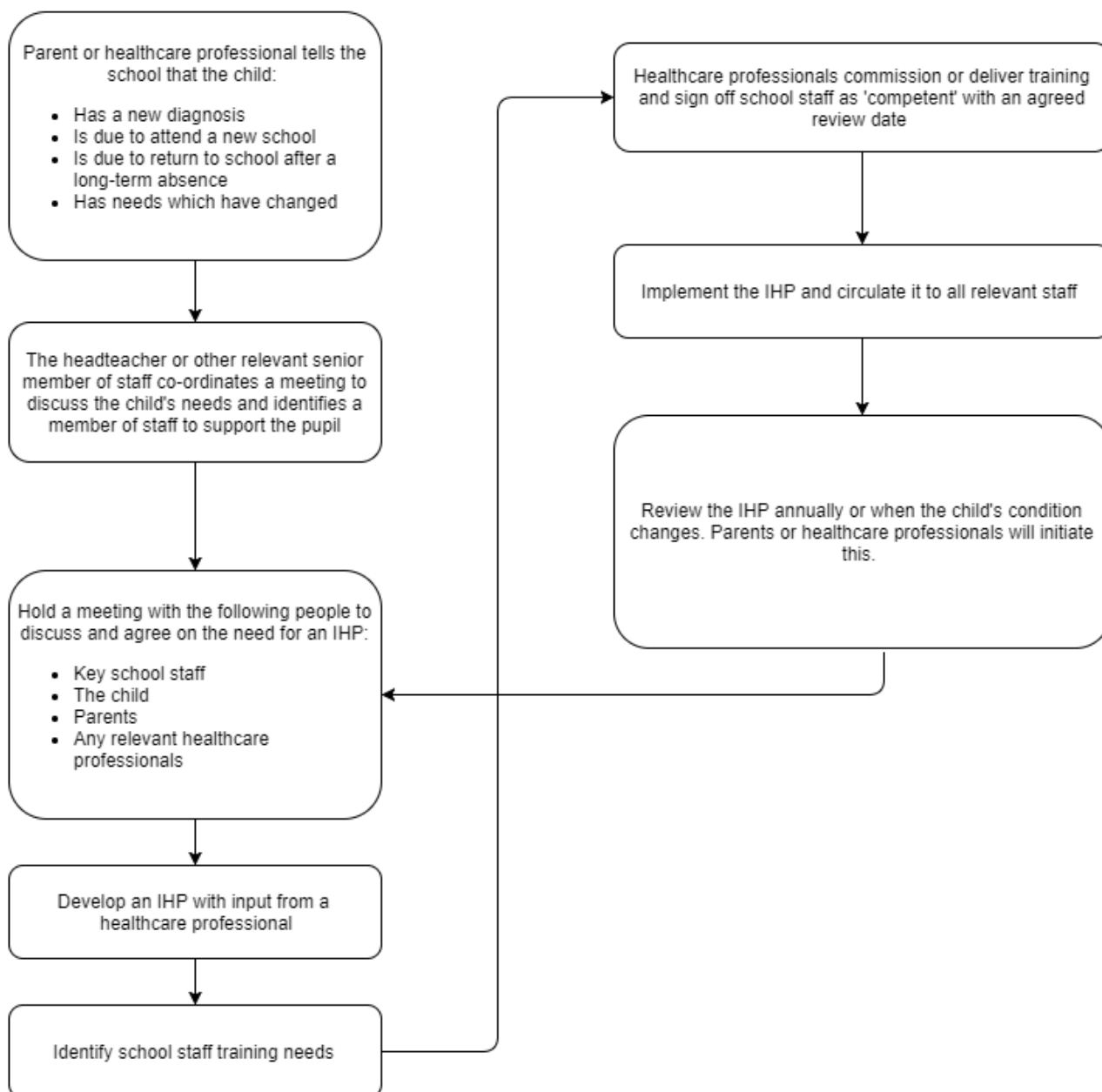
The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

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.



6. Individual Healthcare Plans

The Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This responsibility is delegated to the operations team, overseen by the Assistant Headteacher for Inclusion / Safeguarding.

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

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 not a 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 relevant Education Health Care Plan (EHCP). If a pupil has a special educational need, or disability, which can impact the effectiveness of an IHP, this will be explicitly referred to in the IHP so the increased measures can be planned and implemented.

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, Senior Leadership Team and operations team 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, counseling 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

7. Managing medicines

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/carer written consent

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

Pupils 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. Parents will always be informed.

The school will only accept prescribed medicines that are:

- In-date
- Labeled

- 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 (dependent on age). 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.

7.1 Medical Boxes

The classrooms should store the following medical boxes:

- Green First Aid boxes with First Aid equipment to treat minor injuries or ailments in and around the building and recorded in the accident forms. This reduces the time children are out of class and therefore missing learning time
- Red medical boxes, containing the pupil's personal medication equipment. This box may also contain important medical devices (such as Asthma Inhalers and Adrenaline Auto Injectors - if appropriate). In many cases, there will also be a secondary Inhaler / Adrenaline Auto Injector (if parents have provided two devices)

Medical and First Aid boxes are also helpful in that they are portable, and travel with the class. This means, medical care can be administered immediately without the need for medical equipment located in the Welfare Room.

All boxes, content and instructions will be clearly labeled in case they are needed in an emergency and will be stored in a clearly identifiable place in the classroom so that it is easily accessible – teachers will lead PSHE curriculum time on the importance of appropriate use of medicine / misuse of medicine and the importance of the Medical Box.

The school also stores Emergency Inhalers and Adrenaline Auto Injectors in the Welfare Room to be used in case of emergency and with parent consent.

7.2 Controlled drugs

[Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

All controlled drugs are kept in a secure cupboard in the Welfare Room.

Controlled drugs will be easily accessible in an emergency and a record of administration will be recorded.

7.3 Pupils managing their own needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents and it will be reflected in their IHPs (E.g. asthma).

The parent of any child administering their own medical care will be informed and this will be discussed with parents and reflected in their IHPs.

7.4 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 or Welfare Room 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

8.1 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 in the event of one.

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

8.2 Emergency Medical Care

Following Government recommendation, the school has purchased Emergency Inhalers and Epi-Pens to be used if a child's medical equipment cannot be located, is out of date or is not having the desired effect. These will be kept in a clearly identified place in the Welfare Room so that they can be accessed efficiently by any adult. All parents have provided consent for the school to administer Emergency Medical Care equipment to their child.

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 while also ensuring that 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
- Fulfill 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. 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.

The school is protected by Public liability insurance taken out on the behalf of the London Borough of Harrow. This covers all staff and any subsidiary companies working on behalf of the school and the governors. We will ensure that we are a member of the Department for Education's risk protection arrangement (RPA).

12. Complaints

Parents with a complaint about their child's medical condition should discuss these directly with the Assistant Headteacher for Inclusion / Safeguarding in the first instance. If they feel that their complaint has not been resolved, they should then arrange a meeting with the Headteacher via the School Office. If the matter continues to remain unresolved the parent should then be directed to the school's complaints procedure. All members of staff are encouraged to be a member of a union in the instance that an allegation or complaint is made against them, although this cannot be enforced.

13. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First Aid
- Health and Safety
- Safeguarding
- Special Educational Needs Information Report and Policy

Appendix 1



Administering Prescribed Medication Consent Form

Please remember school is only able to take consent for **prescribed medication** from a Doctor.

All medication should be in **date and in a clearly labeled** (both bottle and box)

Child's Name: _____

Child's Class: _____

I agree to members of staff administering prescribed medication as directed below:

Signed: _____

Name: _____ (parent/guardian)

Date: _____

<u>Administering Information</u>			
<u>Name of Medicine</u>	<u>Dosage to administer</u>	<u>Time(s) to administer</u>	<u>Course completion date</u>

Notes/special requirements:

Administration record

Date	Time	Administered by*	Date	Time	Administered by*

* Please initial



Roxbourne Primary School Individual Healthcare Plan

Child/ Young person details

Child's name:			
School:			
Child's Address:			
Year Group:			
Date of birth:			
Medical diagnosis:		Diagnosed since	
Explanation of condition:			
Other medical conditions:			
Allergies:			
Date:			
Review date:			

Family contact information

Name		
Relationship to child		
Telephone number	Home Work Mobile	

Email	
Address if different to child	
Name	
Relationship to child	
Telephone number	Home Work Mobile
Email	
Address if different to child	

Other essential contacts

Contacts	Contact number
General Practitioner	
Class teacher	
Health visitor/School nurse	
Special Educational Needs Co-ordinator (if applicable)	
Other relevant teaching staff (trained on diet)	
Other relevant non-teaching staff (trained on diet)	
Head teacher	

Describe and give details of child's symptoms, triggers, signs, environmental issues etc

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Name of treatment, medication, dose, method of administration, when to be taken, side effects, contraindications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupils educational, social and emotional needs

Arrangements for school visits/trips etc

Describe what constitutes an emergency, and the action to take if this occurs

Staff training needed/undertaken – who, what, when

Plan developed with and agreed by

	Name	Signatures	Date
Young person/ child			

Parents/ Guardians			
School representative (include job title)			
Health visitor/ School nurse			