

Supporting Pupils with Medical Conditions Policy

THE HUB SCHOOL



Policy Owner:	The Executive Headteacher	
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1. Aims

This policy aims to ensure that:

- Medical conditions include both physical and mental health conditions requiring support during the school day.
- 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).

The named senior leader with responsibility for implementing this policy is the Head of School.

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 (DfE)'s statutory guidance on supporting pupils with medical conditions at school.

The school also recognises the statutory requirements relating to allergy safety in schools. The school's detailed arrangements for allergy identification, prevention, emergency response, spare adrenaline auto-injectors, training, catering, educational visits, incident and near-miss reporting and related arrangements are set out in the TEAL Allergy Safety and Anaphylaxis Policy.

This policy should therefore be read and implemented alongside the TEAL Allergy Safety and Anaphylaxis Policy. Where a pupil has an allergy or risk of anaphylaxis, the two policies apply together, with the Allergy Safety and Anaphylaxis Policy providing the specific operational requirements for allergy safety.

The school will have regard to the relevant statutory guidance in force and will review this policy where legislation or statutory guidance changes.

3. Role and responsibilities

3.1 The LGB (Local Governing Board)

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

The Local Governing Board will also ensure that the school's arrangements operate consistently with the TEAL Allergy Safety and Anaphylaxis Policy where pupils have allergies or are at risk of anaphylaxis.

3.2 The Headteacher / Head of School or delegated senior leader with responsibility for pastoral care

The Headteacher / Head of School or delegated senior leader with responsibility for pastoral care 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, with day-to-day responsibility delegated to the SENCO where appropriate.
- 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.
- Ensure that, where a pupil has an allergy or risk of anaphylaxis, arrangements are also implemented in accordance with the TEAL Allergy Safety and Anaphylaxis Policy.

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 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.

Where a pupil has an allergy or risk of anaphylaxis, staff will also follow the relevant requirements of the TEAL Allergy Safety and Anaphylaxis Policy and the pupil's individual allergy action plan/IHP.

3.4 Parents/carers

Parents/carers 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.
- Where relevant, provide up-to-date information about allergies and prescribed adrenaline auto-injectors and work with the school in accordance with the TEAL Allergy Safety and Anaphylaxis Policy.

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.

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 recognises its duties under the Equality Act 2010 to make reasonable adjustments and 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.

Where a pupil has an allergy, reasonable adjustments and risk assessments will also be considered in accordance with the TEAL Allergy Safety and Anaphylaxis Policy.

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.

Where the notified condition is an allergy or risk of anaphylaxis, the school will also follow the identification, assessment and planning arrangements in the TEAL Allergy Safety and Anaphylaxis Policy, including consideration of an IHP and allergy action plan where required.

See Appendix 1.

6. Individual healthcare plans (IHPs)

The Headteacher / Head of School has overall responsibility for the development of IHPs. This responsibility may be delegated to the SENCO for day-to-day coordination and review.

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 / Head of School 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.

Where the pupil has an allergy or risk of anaphylaxis, the IHP will be developed and reviewed alongside the requirements of the TEAL Allergy Safety and Anaphylaxis Policy. The allergy-specific policy and any individual allergy action plan should be used to identify the practical arrangements required for prevention, medication, emergency response, educational visits, catering and staff awareness. The IHP should cross-reference these arrangements rather than duplicate them where 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 role of the 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 / Head of School 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. Medical information will be stored securely and shared only with staff who need to know in accordance with UK GDPR and the Data Protection Act 2018.
- What to do in an emergency, including who to contact, and contingency arrangements. Where an allergy or risk of anaphylaxis is identified, this must include or cross-reference the pupil's allergy action plan and the emergency arrangements in the TEAL Allergy Safety and Anaphylaxis Policy.

See Appendix 2.

7. Managing medicines

Prescription medicines, and non-prescription medicines where agreed by the Headteacher / Head of School and supported by written parental consent, 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 parents' 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.

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.

For pupils with allergies, the storage, access to and use of prescribed adrenaline auto-injectors and spare adrenaline auto-injectors will be managed in accordance with the TEAL Allergy Safety and Anaphylaxis Policy and the pupil's IHP/allergy action plan.

The detailed arrangements for allergy medication, including prescribed and spare adrenaline auto-injectors, are contained in the TEAL Allergy Safety and Anaphylaxis Policy and should be followed by staff.

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

7.1 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.

A pupil who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another pupil to use. All other 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 Pupil managing their own needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures and wherever possible be allowed to carry their own medicine and relevant devices. This will be assessed on a case by case basis, discussed with parents and reflected in a child's IHP. In doing so, recognition must not only be taken of the potential risk to the child in question but also to other pupils and members of staff if medication of any description is handed into the care of a pupil. Whilst self-management for pupils assessed to be competent is encouraged, the general position is that all medication will be controlled and documented by the school.

Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered, if necessary.

7.3 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 medical 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

See Appendix 3.

7.4 Staff Medicines

Staff who have prescribed medication in their possession or in school should not carry it around with them. It should be kept in a place that is not accessible by pupils, i.e. personal locker or own office (as long as it can be locked and is not accessible to pupils). If neither option is available, it should be retained in the secure area of the main staff room in the school's medical locked cabinet and treated in exactly the same way as pupils' prescribed medication, but staff remain solely responsible for it.

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.

For pupils with an allergy or risk of anaphylaxis, staff will follow the pupil's allergy action plan and the emergency procedures in the TEAL Allergy Safety and Anaphylaxis Policy. The allergy-specific emergency procedure takes precedence where it provides more specific instructions for anaphylaxis.

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 Head of School. 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 pupil
- 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.

Where pupils have allergies or are at risk of anaphylaxis, staff training will also comply with the TEAL Allergy Safety and Anaphylaxis Policy, including the requirements applying to relevant staff and emergency response.

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. See Appendix 4.

Parents will be informed if their child has been unwell at school.

For allergy-related incidents and near misses, records and reporting will also be maintained in accordance with the TEAL Allergy Safety and Anaphylaxis Policy.

IHPs are kept in a readily accessible place which all staff are aware of, subject to appropriate confidentiality and data-protection arrangements.

11. Liability and indemnity

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

The Trust is a member of the ESFA's Risk Protection Arrangement (RPA) which is an alternative to commercial insurance for schools. Under RPA, the UK government covers the losses instead of commercial insurance. For details of the cover and links provided please see the Risk Protection Arrangement (RPA) for schools – GOV.UK.

12. Complaints

Parents with a concern in regard to their child's medical condition should discuss these with the school in the first instance to try and resolve any issues. If this does not resolve the matter, parents will use the school's complaints procedure that is available on the website.

Where a concern relates specifically to allergy safety or anaphylaxis arrangements, the concern will also be considered against the TEAL Allergy Safety and Anaphylaxis Policy.

13. Monitoring arrangements

This policy will be reviewed annually and approved by the Local Governing Board, or sooner if legislation or statutory guidance changes.

The school will monitor the implementation of this policy and its interaction with the TEAL Allergy Safety and Anaphylaxis Policy to ensure that the two policies remain aligned and that responsibilities are clear.

Any changes to statutory requirements relating to allergy safety will be reflected in the relevant policy and cross-references.

14. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Educational visits
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding
- Special educational needs information report and policy
- TEAL Allergy Safety and Anaphylaxis Policy
- Department for Education – Supporting pupils with medical conditions

The TEAL Allergy Safety and Anaphylaxis Policy is the school/Trust's dedicated policy for allergy safety and anaphylaxis. It should be read alongside this policy wherever a pupil has an allergy or risk of anaphylaxis.

Appendix 1: Being notified a child has a medical condition

Process for notification and assessment of whether an IHP is required.

On notification of a medical condition, the school will gather appropriate information from parents/carers and relevant healthcare professionals.

Where the condition is an allergy or risk of anaphylaxis, the school will also follow the TEAL Allergy Safety and Anaphylaxis Policy and establish the required allergy-specific arrangements.

Arrangements should be put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to the school, wherever possible.

Appendix 2: Individual healthcare plan

Name of school/setting

Pupil Name

Date of birth

Group/class/form

Pupil Address

Medical diagnosis or condition

Date

Review Date

Family Contact Information

Name

Phone no

Relationship to pupil

Clinic/Hospital Contact

G.P.

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.

Who is responsible for providing support in school

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

Where applicable, cross-reference the pupil's allergy action plan and the TEAL Allergy Safety and Anaphylaxis Policy rather than duplicating detailed allergy procedures.

Appendix 3: Administering medicines procedure summary and flow-chart

In cases where prescribed medication has to be administered in school time and staff have agreed to do so, the following procedures should be followed:

- Parents/carers should arrange delivery of all medicines to be taken or administered to the school office;
- Medicines should be clearly labelled with the child's name;
- Parents/carers will be asked to complete and sign a form specifying preparations, storage arrangements, dosage and circumstances under which it should be given;
- A member of staff will administer the medication, witnessed by another member of staff where required by school procedure, and the administration will be recorded;
- For medication in which training is required to administer it, only trained members of staff should be responsible for administering the medicine.
- For allergy medication and adrenaline auto-injectors, staff must also follow the TEAL Allergy Safety and Anaphylaxis Policy and the pupil's allergy action plan.

Appendix 4: Record keeping of medicine administered to all pupils

Name of school/setting:

Medication notification received as required

Prescribed medication (antibiotics, other)

Check consent folder/prescription sheet and any existing medication

Check consent folder/prescription sheet

Check prescription label

Administer as prescribed

Record of medicine administered

Message to be relayed to parent/carer

Date | Pupil Name | Time | Name of medicine | Dose given | Any reactions | Signature of staff |

Print Name | Staff Witness Initials

For allergy-related incidents or near misses, follow the additional reporting and recording requirements in the TEAL Allergy Safety and Anaphylaxis Policy.

Appendix 5: Parental agreement for setting to administer medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by

Name of school/setting

Name of child

Date of birth

Group/class/form

Medical condition or illness

Medicine

Name/type of medicine (as described on the container)

Expiry date

Dosage and method

Timing

Special precautions/other instructions

Are there any side effects that the school/setting needs to know about?

Self-administration – y/n

Procedures to take in an emergency

NB: Medicines must be in the original container as dispensed by the pharmacy.

Contact Details – Name / Daytime telephone no. / Relationship to child / Address

I understand that I must deliver the medicine personally to [agreed member of staff].

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____ Date _____ Parent