



Supporting Pupils with Medical Conditions Policy

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Aims

This policy aims to ensure that:

- Pupils, staff and parents/carers 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
- School leaders 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 person with responsibility for implementing this policy is the Head teacher

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 bodies 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](#).

Roles and Responsibilities

The Governing Body

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

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
- Follow the Joint Protocol (see appendix 1) to gain consent, before communicating with relevant health professionals, in the case of any pupil who has a medical condition that may require support at school.
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

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, although the named first aiders will always be the first adults used if possible.

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.

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

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.

Healthcare professionals

The hospital and relevant healthcare professionals should 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.

Healthcare professionals, such as GPs and paediatricians, will liaise with the school inclusion team or hospital service and notify them of any pupils identified as having a medical condition.

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/carers and any relevant healthcare professionals will be consulted.

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 7](#)

Individual healthcare plans

The head teacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to the school's lead First Aider.

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/carers when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the head teacher will make the final decision.

Using the Joint Medical Protocol, plans will be drawn up in partnership with the school, parents/carers and healthcare professionals, 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 statement of special educational needs (SEN) or education, health and care (EHC) plan. If a pupil has SEN but does not have a statement or 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 body and Head Teacher 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/carers and the head teacher 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 or carer/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

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
- Only where we have parents'/carers written consent

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

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. Parents/carers will always be informed.

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/carers to arrange for safe disposal when no longer required.

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.

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/carers and it will be reflected in their IHPs.

Pupils will be allowed to carry their own medicines and relevant devices wherever possible. 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/carers so that an alternative option can be considered, if necessary.

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/carers
- 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
- 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/carers to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

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.

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

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.

Record keeping

The headteacher will ensure that written records are kept of all medicine administered to pupils. Parents/carers 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.

Liability and indemnity

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

The details of the school's insurance policy are: **Zurich Municipal – Policy No – QLA-09AC02-0013.**

Complaints

Parents/carers with a complaint about their child's medical condition should discuss these directly with the member of staff who is delivering care as listed in the plan in the first instance. If this member of staff cannot resolve the matter, they will direct parents/carers to the school's complaints procedure.

Monitoring arrangements

This policy will be reviewed and approved by the governing body every 2 years.

Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding
- SEND information report and policy

Links to Joint Medical Protocol

Links to [Joint Protocol between Health Services & Schools](#) in respect of the management of pupil absence from school when medical reasons are cited. Included in the link are appendices with flowcharts, consent forms and information for parents and carers.

Links to School Forms

- [CONSENT TO ADMINISTER MEDICINE IN SCHOOL](#)
- [INDIVIDUAL HEALTHCARE PLAN INCLUDING ASTHMA](#)
- [EMERGENCY SALBUTAMOL INHALER CONSENT FORM](#)

CONSENT TO ADMINISTER MEDICINE IN SCHOOL

CONSENT TO ADMINISTER MEDICINE IN SCHOOL						
ABOUT THE PUPIL						
Name of child						
Date of birth				Age		
Please state the medical condition or the reason for this medication. Please be as specific as you can.						
ABOUT THE MEDICINE						
Please note, any unused medication will be returned to you.						

Name of medicine (as described on the container)		
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Medicines must be in the original container as dispensed by the pharmacy

Expiry date					
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Dose to be given at school		
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How is this to be given?		By mouth / Applied as cream
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At what time should we give this?		
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How long should we give this for?		
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Please note that we will not give pain relief medication for longer than 3 days without a medical prescription or note from your Health Visitor or GP

Special precautions/other instructions	
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Any medical conditions, allergies or side effects we need to know about?	
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Can your child self administer?	Yes / No
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CONTACT DETAILS						

Do you have parental responsibility, special or legal guardianship?	
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Name	
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Relationship to child	
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Address	
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Daytime telephone no.	
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The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to Queen's Hill Primary School to administer medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

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Signature		Date	
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FOR SCHOOL USE						
Date medicine provided by parent						
Quantity received						
ADMINISTRATION OF MEDICINE						
Date				Date		
Time Given				Time Given		
Dose Given				Dose Given		
Staff Initials				Staff Initials		
Date				Date		
Time Given				Time Given		
Dose Given				Dose Given		
Staff Initials				Staff Initials		

Date				Date		
Time Given				Time Given		
Dose Given				Dose Given		
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Staff Initials				Staff Initials		
Date				Date		
Time Given				Time Given		
Dose Given				Dose Given		

Staff Initials			Staff Initials		
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INDIVIDUAL HEALTHCARE PLAN INCLUDING ASTHMA

INDIVIDUAL HEALTHCARE PLAN						
INCLUDING ASTHMA						
<p>Please complete this form to the best of your ability. 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.</p>						
ABOUT THE PUPIL						
Name of child						
Class						
Date of birth				Age		
Medical diagnosis or condition						
FAMILY CONTACT INFORMATION						

Name						
Relationship to child						
Phone number						
G.P						
Name						
Phone number						
CLINIC/HOSPITAL CONTACT (if applicable)						
Name						
Phone number						
SCHOOL INFORMATION						
Describe medical needs						
Triggers						

Symptoms/Signs	
Treatments	
Equipment or devices	
Any other information	
Name of medication	
Dose	
Administration method	by mouth / on skin / injection / other (please detail)
When to be taken	
Side effects	
Self administered	Yes / No
Daily care requirements	
Specific support for the pupil's educational, social and emotional needs	

Arrangements for school visits/trips						
Other information						
Describe what constitutes an emergency, and the action to take if this occurs						
Signature				Date		
School Use Only						

Who is responsible for providing medical support in school						
Who is responsible in an emergency (state if different for off-site activities)						
Form copied to						
Staff training needed/undertaken - who, what, when						
Staff Signature				Date		

EMERGENCY SALBUTAMOL INHALER CONSENT FORM

ABOUT THE PUPIL

Name of child

Date of birth

I confirm that my child has been diagnosed with asthma and has been prescribed a blue reliever inhaler (usually salbutamol).

In the event of my child displaying symptoms of asthma, and if their inhaler is not available or unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school.

I consent for the school to hold this information on file and for my child to receive the use of the emergency inhaler for the duration of their time at Queen's Hill Primary School. If this changes at any time, I understand that I must inform the school at the earliest opportunity.

Name						
Signature					Date	