



Polehampton CE
 Infant and Junior Schools
 "Let your light shine"
 Matthew 5:16



"Unlocking the Future"

Supporting Pupils With Medical Conditions Policy

Policy Level and Description:	1	<u>TKAT Statutory Policy</u> NO CHANGES TO THE CORE TEXT ALL Schools require a policy on this topic/area. Only changes to highlighted sections are allowed to the core text – changes will be limited to school name and very limited school-specific details - LGBs to adopt, implement and monitor this policy.	
Reviewed by: (Trust Officer)	Hester Wooller CEO	Reviewed by: (School representative)	P Sherwood, Executive Headteacher
Approved by: (Trust Committee/Trust Board)	CECE	Approved by: (LGB/LGB Committee)	LGB
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Version	DATE	DESCRIPTION
1	April 2024	New policy

At Polehampton Church of England Infant and Junior Schools, our vision is "Let your light shine" (Matthew 5:16). Jesus reminded us in Matthew's gospel that we are lights for the world. As we seek to follow him, we can share his light with others and change the world. Supported by our school values of gratitude, friendship, perseverance, forgiveness, honesty and compassion, we seek to help pupils make positive choices in all they do. We follow our Christian values to enable everyone in our school community to let their light shine.

At Polehampton Church of England Infant and Junior Schools, we want all our stakeholders and community links to know what is expected in terms of fair and transparent anti-fraud, bribery & corruption, so that we can work together to let our lights shine in all aspects of school life.

Notes from Polehampton CE Infant and Junior Schools:

- The term 'parents' refers to parents, carers or guardians.
- Any reference to Head/Head of School should be read as 'Head of School or Executive Headteacher'.
- Any reference to Headteacher/Head of School/CEO should be read as 'Head of School or Executive Headteacher'.
- Please note that there will be instances within this policy where 'CEO' refers correctly to the CEO. These instances are in places where 'CEO' is the only option listed.
- Any amendments to this model policy (other than formatting) have been added in blue text

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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)

The named person with responsibility for implementing this policy is 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 Multi Academy Trusts and 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](#). This policy also complies with our funding agreement and articles of association.

3. Roles and responsibilities

3.1 The Trust Board

- Remains legally responsible and accountable for fulfilling its statutory duty to support pupils with medical conditions. Will develop and update suitable policies and systems to meet their statutory responsibilities.
- Ensure that policies, plans, procedures and systems are properly implemented.
- Ensure that the arrangements they set up include details of a named person who has overall responsibility for policy implementation in each school.

3.2 The Governing Board

- has delegated responsibility to make arrangements to support pupils with medical conditions.
- Will ensure that the school liaises directly with the appropriate medical practitioner to assess training needs
- will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.
- will ensure that the policy is readily accessible to parents and school staff.

- ensure that the arrangements, include a named person who has overall responsibility for policy implementation in their school and the development of individual healthcare plans for pupils at school with medical conditions.
- Will monitor how staff are supported and review training needs and outcomes.

3.3 The Headteacher/Head of School

The Headteacher/Head of School 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

3.4 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.

3.5 Parents/Carers (See Note 1)

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

3.6 Pupils

When appropriate, pupils with medical conditions may be best placed to provide information about how their condition affects them. Where age, ability and competency allows 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.

3.7 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.

When working on-site health care professionals will be covered by the same obligations for their employer to provide evidence of identity and safeguarding checks considering the nature of the activities to be undertaken and the regularity and frequency of any contact.

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 in Appendix 1 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 (IHPs)

The Headteacher/Head of School 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/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.

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 local governing board and the Headteacher/Head of School / 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

- 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 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.

Any member of staff giving a pupil any medication (for example, for pain relief) will only do so when there is parental written consent. They will only do so in the presence of and witnessed by, another member of staff. They will:

- First check maximum dosages
- When the previous dosage was taken.

A written record of the administration will be made detailing the dosage, time and signed and witnessed. Parents will always be informed in writing using the prescribed format for doing so.

Refusal or inability to administer medication

Parents must be informed as soon as possible of the pupil's refusal or the inability to administer the medication. Parents should then make alternative arrangements for the dose to be administered. This conversation should be noted, dated with the time recorded and entry signed by the member of staff.

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. Its 'use by date' and any other restrictions or servicing for equipment remain the responsibility of the parents to manage in a timely fashion.

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 or age-expired.

7.1 Controlled drugs

Controlled Drugs (marked POM & CD) – these are the most serious category of medication as they have powerful effects on the body and can harm or cause addiction. There are strict restrictions on how these drugs should be prescribed, dispensed, stored and administered. Examples include Morphine, Fentanyl and Methylphenidate which is used to treat ADHD.

Advice must be sought from the CEO when controlled drugs have been prescribed.

7.2 Pupils managing their own needs

Where pupils are confident, and it is age appropriate to do so, they may self-administer medication. Prior to agreeing to this, it will be discussed with parents and it will be reflected in their IHPs. A risk assessment must be carried out and self-administration must be supervised. You may also be required to prompt a pupil to self-administer at the correct times. Inhalers can be safely carried by pupils but self-administration must still be supervised.

Self-administration must not be carried out with controlled drugs and advice must be sought from the CEO.

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.

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

The Local Governing Body will ensure that any staff who are asked to support pupils with medical needs 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/Head of School or their designated representative. Training will be kept up to date.

Training will:

- Be sufficient to ensure that any staff who agree to administer treatment or medication 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 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.

Governors will be informed by Senior Leaders when training has been undertaken and update them around new requirements and updates.

10. Record keeping

The local 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

As the employer, the Trust will ensure that the Department for Education's risk protection arrangement (RPA) is in place for all employees. This covers undertaking medical procedures and provision of prescribed medicines subject to adherence with the statutory guidance on supporting pupils at school with medical conditions, December 2015 or similar amending statutory guidance.

12. Complaints

Parents with a complaint about the school's management of their child's medical condition should discuss these directly with the Headteacher/Head of School in the first instance. If the Headteacher/Head of School cannot resolve the matter, they will direct parents to the school's complaints procedure.

13. Monitoring arrangements

This policy and its implementation will be reviewed by the Trust Board and adopted by the local governing body annually.

14. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality, Diversity and Inclusion
- First aid
- Health and safety
- Safeguarding
- Special educational needs information report and policy

Note 1 "Parent" is defined in law (The Education Act 1996) as either:

- any person who has 'parental responsibility' (defined in the Children Act 1989) for the child or young person; or
- any person who has care of the child or young person.

Appendix 1: Being notified a child has a medical condition

