

Supporting Pupils with Medical Conditions Policy



Hollygirt School NOTTINGHAM

Date of Review:	13/09/2024 / Version 1.1
Policy Review Led by:	SENDCo
Approval by Trustees:	09/10/2024
Date of Next Review:	September 2027

Table of Contents

1.	Aims	3
2.	Legislation and Statutory Responsibilities.....	3
3.	Roles and Responsibilities	3
3.1.	Board of Trustees	3
3.2.	The Headteacher and Senior Leadership Team	3
3.3.	Staff.....	4
3.4.	Parents	4
3.5.	Pupils	4
3.6.	External Healthcare Professionals	4
4.	Equal Opportunities	4
5.	Being Notified that a Child has a Medical Condition	5
6.	Individual Healthcare Plans	5
7.	Managing Medicines	8
7.1.	Controlled Drugs	8
7.2.	Misuse of Medication	8
7.3.	Pupils Managing Their Own Needs	9
7.4.	Unacceptable Practice	9
8.	Emergency Procedures	9
9.	Training.....	10
10.	Record Keeping.....	10
11.	Liability and Indemnity.....	10
12.	Complaints.....	10
	Appendix 1: Individual Healthcare Plan	12

To be read in conjunction with the following policies:

- Accessibility Plan
- Administration of Medicine Policy
- Admissions Policy
- Complaints Policy
- Educational Visits Policy
- First Aid Policy
- Health and Safety Policy
- Safeguarding and Child Protection Policy
- SEND Policy

This policy will be reviewed every three years.

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 Board of Trustees will take ultimate responsibility for the implementation of this policy. They will ensure all staff fulfil their duties with regard to the policy, that there is budgetary provision to provide for resourcing the area and will review the policy. The Headteacher will ensure the policy is effectively implemented throughout the school and that appropriate training is given to all appropriate staff. The SENDCo will care out the day-to-day duties of:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupil's condition, where appropriate on a need to know basis
- 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 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.

3. Roles and Responsibilities

3.1. Board of Trustees

The Board of Trustees has ultimate responsibility to make arrangements to support pupils with medical conditions. The trustee 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 and Senior Leadership Team

The Headteacher and Senior Leadership Team 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 appropriate external professionals and host those commissioned by parents to ensure the most up to date information and training for that child's medical needs is held and disseminated
- 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 supervising the self-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.

3.4. 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.

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. External Healthcare Professionals

External 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 SENDCo and notify them of any pupil 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 a 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 schools.

6. Individual Healthcare Plans

The Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions in their school. At Hollygirt, the SENDCo is responsible for developing and monitoring IHP's and ensuring the smooth implementation; with support from any support staff, LSA's that work directly with the pupil.

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 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 a specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

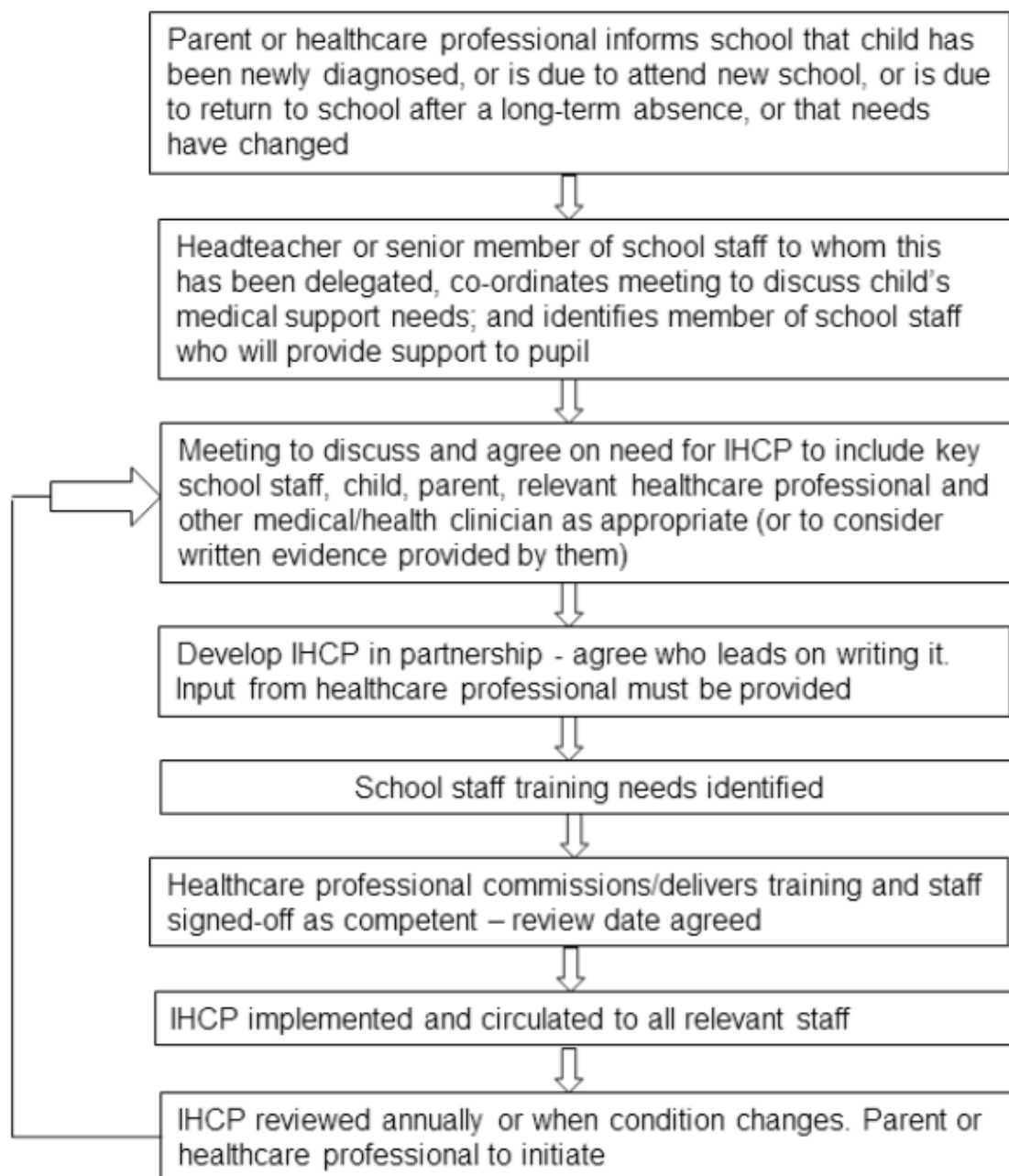
IHPs will be linked to, or become part of any Education, Health and Care Plan (EHCP). If a pupils has SEN but does not have a statement or EHC Plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The Board of Trustees, Headteacher and SENDCo and 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 and use of rest periods or additional support in catching up with lessons,
- 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

Annex A: Model process for developing individual healthcare plans



7. Managing Medicines

See Administration of Medicine Policy

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 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.

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
- 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.

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. Misuse of Medication

Errors can occur at different stages of the medication process: prescribing, preparing, dispensing, administering, and monitoring. Medication errors occur when weak medication systems or human factors affect the process. This policy in conjunction with

the Administration of Medicine Policy and appropriate monitoring and training should reduce risk to a minimum and prevent incidents occurring. Where pupils are self-administering and carrying their own medications, we recognise an increased risk of error and will put in further supervision and support accordingly. If an error were to occur, staff should seek advice from the health professional named on the IHP, local pharmacist services or emergency services. Where an error has occurred, the staff involved should make a record, inform parents and with the support of the Headteacher and/or SENDCo conduct a review of the policies, procedures and training levels to prevent re-occurrence. There should also be discussion with the pupil(s) involved to foster the appropriate level of respect and responsibility around medication, to prevent a repeat.

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.

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 so that an alternative option can be considered, if necessary.

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 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 pupil 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 a 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

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 or the SENDCo. 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 Board of Trustees will ensure that written records are kept of all medicine administered to pupils, using the Drug Administration Form. (See Administration of Medicine Policy) 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 Board of Trustees will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

12. Complaints

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

Appendix 1: Individual Healthcare Plan

Health Care Plan

Pupil Name:	
Keyworker:	
Start Date:	

Context/ Background Information:	
Describe condition and give details of the individual symptoms:	
Describe what constitutes an emergency for this pupil:	
Follow up care:	
Name/Type of Medication	
FULL DIRECTIONS FOR USE OF MEDICATION	
Dosage and Method:	
Timing:	
Special Precautions	
Side Effects	

Name of Doctors:
Emergency Contact Numbers:

- Review before each new trip
- Review after an incident
- Review in light of new information

Parent Signature:	
Date:	