

Supporting Pupils at School with Medical Conditions

Date Agreed: November 2023 Date for review: November 2024

RATIONALE

The school has a duty under Section 100 of the Children and Families Act 2014 to make arrangements for supporting pupils at school with medical conditions. The governing committee will ensure that arrangements are in place to support pupils with medical conditions in doing so they should ensure that such children can access and enjoy the same opportunities at school as any other child. The governing committee will therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life. The governing committee will ensure that arrangements give parents and pupils confidence in the school's ability to provide effect support for medical conditions in school. The arrangements will show an understanding of how medical conditions impact on a child's ability to learn as well as increase their confidence and promote self-care. They will ensure that staff are properly trained to provide the support that pupils need.

PURPOSE

Children with medical conditions are entitled to a full education and have the same rights of admission to school as other children. This means that no child with a medical condition should be denied admission (see School Admissions Code 2012) or prevented from taking up a place in school because arrangements for their medical condition have not been made. However, in line with their safeguarding duties, governors do not have to accept a child in school at times where it would be detrimental to the health of that child or others to do so.

GENERAL GUIDELINES

When school is notified that a child has a medical condition, procedures are in place to cover any transitional arrangements between schools and arrangements for any staff training or support. School does not have to wait for a formal diagnosis before providing support to a pupil. In cases where a pupil's medical condition is unclear or where there is a difference of opinion, judgements will be needed about what support to provide based on the available evidence.

INDIVIDUAL HEALTHCARE PLANS

Individual Healthcare Plans (IHP) will help school effectively support pupils with medical conditions. They will provide clarity about what needs to be done, when and by whom.

(See Annex A and also Healthcare Plan proforma).

- Plans will be drawn up in partnership between school, parents and a relevant healthcare professional eg School or Specialist Nurse. Pupils will be involved whenever appropriate.
- Plans will be reviewed at least annually or earlier if evidence is presented that the child's needs have changed.
- Where a child has a special educational need identified in a statement or Educational Health and Care Plan (EHCP), the individual Healthcare Plan (IHP) will be linked to, or become part of that statement or EHCP.

Points considered when developing an IHP

- The medical condition, its triggers, signs, symptoms and treatments
- Specific support for the child's educational, social and emotional needs eg
 how absences will be managed, requirements for extra time to complete tests,
 use of rest periods or additional support in catching up with lessons,
 counselling sessions
- The level of support needed (some children will be able to take responsibility for their own health needs), including in emergencies. If a child is selfmanaging their medication this should 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 child's medical condition from a Health Professional, and cover arrangements for when they are unavailable
- Who in the school needs to be aware of the child's condition and the support required
- Arrangements for written permission from parents and the Headteacher, or delegated person, for medication to be administered by a member of staff or self-administered by the child during school hours
- Separate arrangements or procedures for school trips or other school activities outside of the normal school timetable that will ensure that the child can participate, eg risk assessments
- Where confidentiality issues are raised by the parent of a child the designated individuals to be entrusted with information about the child's condition
- What to in an emergency, including whom to contact and contingency arrangements

ROLES AND RESPONSIBILITIES

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. School will work in partnership with healthcare professional, social care professionals, Local Authorities, Parents and Pupils.

Governing Committee

The governing committee will make arrangements to support children with medical conditions in school and ensure that a policy is developed and implemented. The governing committee will ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions

Headteacher

The Headteacher will ensure that:

- the school's policy is developed and effectively implemented with partners
- all staff are aware of the policy and understand their role in its implementation
- all staff who need to know are aware of the child's condition
- there are sufficient trained numbers of staff available to implement the policy and deliver against all IHPs including in contingency and emergency situations

School Staff

- may be asked to provide support to children with medical conditions, including administration of medicines (although they cannot be required to do so)
- will receive sufficient and suitable training and achieve the necessary level of competency before they take on the responsibility to support children with medical conditions

School Nurse

Every school has access to school nursing services and a referral process is in place. The school nursing team is responsible for:

- working with the school when a child has been identified as having a medical condition which will require support in school
- liaising with lead clinicians locally on appropriate support for the child and associated staff training needs
- providing advice and liaising with staff on the implementation of a child's IHP

Other Healthcare Professionals including GPs and Paediatricians

- They should notify the school nurse when a child has been identified as having a medical condition that will require support at school.
- Specialist local health teams may be able to provide support in schools for children with particular conditions (eg asthma, diabetes)

Children

 Will be fully involved in discussions about their medical support needs and contribute, and comply with, their IHP as appropriate

Parents

- Will provide the school with sufficient and up to date information about their child's medical needs
- Will be involved in the development and review of their child's IHP
- Will provide medicines and equipment and ensure they, or another nominated adult, are contactable at all times

Local Authority

The Local Authority should provide support, advice and guidance to support children with medical conditions to attend full time. Where children would not receive a suitable education at Sacred Heart Primary because of their health care needs the LA has a duty to make other arrangements.

Providers of Health Services

Providers of Health Services should co-operate with school in providing valuable support, information, advice and guidance

STAFF TRAINING AND SUPPORT

- The relevant healthcare professional will normally lead on identifying and agreeing with the school, the type and level of training required and how this can be obtained. However, school may wish to choose to arrange training and ensure this remains up to date
- Training will be sufficient to ensure that staff are competent and have confidence in their ability to support children. This includes an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

Staff will not give prescription medicines or undertake healthcare procedures without appropriate training – the training will be updated to reflect any IHP A first-aid certificate does not constitute appropriate training in supporting children with medical needs

- Healthcare professionals, including the school nurse, can provide confirmation
 of the proficiency of staff in a medical procedure, or in providing medicine
- School will have arrangements in place for whole school awareness training regarding supporting children with medical conditions (eg INSET day, induction arrangements) to help ensure that all medical conditions affecting pupils in the school are understood fully, this includes preventative and emergency measures so that staff can recognise and act quickly when a problems occurs
- The family of a child will be key in providing relevant information to school staff about how their child's needs can be met

THE CHILD'S ROLE IN MANAGING THEIR OWN MEDICAL NEEDS

- The governing committee will ensure that arrangements are made, for children who are competent, to manage their own health needs and medicines. This should be reflected in their IHP.
- Wherever possible children will be allowed to carry their own medicines and relevant devices or should be able to access their medicines for selfmedication quickly and easily. Some children may require an appropriate level of supervision. If it is not appropriate for a child to self-manage, then relevant staff should help to administer medicines and manage procedures for them
- If a child refuses to take medicine or carry out a necessary procedure, staff will not force them to do so. Parents will be informed when the medication has not been administered for this reason

MANAGING MEDICINES ON SCHOOL PREMISES

- Medicines should only be administered at school when it would be detrimental
 to a child's health or school attendance not to do so
- We advise all parents to administer medications at home
- No child will be given prescription or non-prescription medicines without their parent's written consent. Forms are available from the office. (See Annex B)
- No child will be given medicine containing aspirin unless prescribed by a doctor. Medication, eg for pain relief, will never be administered without first checking maximum doses and when the previous dose was taken. Parents will be informed when the dose was given
- School will only accept prescribed medicines that are in date, labelled with original pharmacy label, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage (exception to this is insulin, which must still be in date but may be available inside an insulin pen or a pump, rather than in its original container) – it is an offence to alter any pharmacy label
- All medicines will be stored safely. Children will be informed where their
 medicines are 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 children both in their class
 and in the medical room (consideration of this will be taken when off school
 premises eg school trips)
- School will keep controlled drugs that have been prescribed for a pupil securely stored and only named staff will have access. Controlled drugs will be easily accessible in an emergency. A record will be kept of any dosage used and the amount of the controlled drug held in school
- School staff may administer a controlled drug to whom it has been prescribed in accordance with the prescriber's instructions. School will keep a record of all medicines administered to individual children stating what, how and how much was administered, when and by whom. Any side effects will be noted
- When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharp boxes will always be used for the disposal of needles and other sharps
- No cough sweets allowed in school

- In line with the Commission on Human Medicines (CHM) we cannot administer topical oral pain relief (Bonjela, Bonjela Cool Mint)
- The school will consider each request to administer medication for a pupil with special medical needs, liaising with the school health service to seek advice and support where needed

RECORD KEEPING

Written and electronic records on CPOMS will be kept of all medicines administered to children, via IHPs. Parents will be informed if their child has been unwell in school

EMERGENCY PROCEDURES

- Where a child has an IHP this will clearly define what constitutes an
 emergency and explain what to do including ensuring that all relevant staff are
 aware of emergency symptoms and procedures. Other children in the school
 should know what to do in general terms such as informing a teacher
 immediately if they think help is needed
- If a child needs to be taken to hospital, staff should stay with the child until the parent arrives or accompany a child to hospital in an ambulance

When local emergency services are called staff will give precise details of which entrance to use (See Annex D)

DAY TRIPS, RESIDENTIAL VISITS AND SPORTING ACTIVITIES

The Governing body will ensure that arrangements are clear and unambiguous about the need to support actively children with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. School will make arrangements for the inclusion of children in such activities with any adjustments as required unless evidence from a clinician states that this is not possible

A risk assessment will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included (refer to guidance on school trips)

POINTS FOR CONSIDERATION

- School does not assume that every child with the same condition requires the same treatment
- School will not send children with medical conditions home frequently, or prevent them from staying for normal school activities, unless this is specified in their IHP
- If a child becomes ill, they will not be sent to the school office or medical room unaccompanied
- School take into consideration hospital appointments when monitoring attendance
- School does not prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively

- School will not require parents, or make them feel obliged, to attend school to administer medication or provide medical support to their child, including toileting issues. No parent will have to give up working because the school is failing to support their child's medical needs
- School will encourage parents to administer medication outside of school hours wherever possible
- School will not prevent children from participating in any aspect of school life, including school trips, by requiring parents to accompany

LIABILITY AND INDEMITY

School has an Insurance Policy that provides liability cover relating to the administration of mediation. Any parents of pupils dissatisfied with the support provided should discuss their concerns directly with the school. If this cannot be resolved parents may make a formal complaint via the schools complaints procedure The Headteacher will have overall responsibility that this Policy is implemented and that risk assessments for school visits are undertaken.

The SENCo and School First Aider will ensure that sufficient staff are suitably trained, cover arrangements are in place, supply teachers are briefed and IHP's are monitored

Annex A

Model process for developing individual healthcare plans (IHP)

1. Parent of healthcare professional informs school that child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed



2. Headteacher or senior member of school staff to whom this has been delegated, co-ordinates meeting to discuss child's medical support needs; and identifies member of school staff who will provide support to pupil



3. Meeting to discuss and agree on need for IHP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them)



4. Develop IHP in partnership - agree who leads on writing it. Input from healthcare professional must be provided



5. School staff training needs identified



6. Healthcare professional commissions/delivers training and staff signed-off as competent – review date agreed



7. IHP implemented and circulated to all relevant staff



8. IHP reviewed annually or when condition changes. Parent or healthcare professional to initiate

Annex B



Templates

Supporting pupils with medical conditions

May 2014

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Introduction

In response to requests from stakeholders during discussions about the development of the statutory guidance for supporting pupils with medical conditions, we have prepared the following templates. They are provided as an aid to schools and their use is entirely voluntary. Schools are free to adapt them as they wish to meet local needs, to design their own templates or to use templates from another source.

Template A: individual healthcare plan

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	
Family Contact Information	
Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Clinic/Hospital Contact	
Name	
Phone no.	
G.P.	
Name	
Phone no.	
Who is responsible for providing support in school	

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, contraindications, administered by/self-administered with/without supervision
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
Form copied to

Template B: 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	
ſ	3
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 contain	iner 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 freque of the medication or if the medicine is stopped.				
Signature(s)	Date			

Template C: record of medicine administered to an individual child

Name of school/setting			
Name of child			
Date medicine provided by pa	arent		
Group/class/form			
Quantity received			
Name and strength of medicin	ne		
Expiry date			
Quantity returned			
Dose and frequency of medic	ine		
Date Time given Dose given Name of member of staff			
Staff initials			
Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

C: Record of medicine administered to an individual child (Continued)

Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		

Template D: record of medicine administered to all children

Name of school/	setting						
Date	Child's name	Time	Name of medicine	Dose given	Any reactions	Signature of staff	Print name
_							

Template E: staff training record – administration of medicines

Name of school/setting			
Name			
Type of training received			
Date of training complete	ed .		
Training provided by			
Profession and title			
= = = = = = = = = = = = = = = = = = =	-		letailed above and is competent g is updated [name of member of
Trainer's signature			
Date			
I confirm that I have rece	ived the training det	tailed above.	
Staff signature			
Date			
Suggested review date			

Template F: contacting emergency services

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

- 1. your telephone number
- 2. your name
- 3. your location as follows [insert school/setting address]
- 4. state what the postcode is please note that postcodes for satellite navigation systems may differ from the postal code
- 5. provide the exact location of the patient within the school setting
- 6. provide the name of the child and a brief description of their symptoms
- 7. inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
- 8. put a completed copy of this form by the phone

Template G: model letter inviting parents to contribute to individual healthcare plan development

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. 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. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely



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