St Edmundsbury and Ipswich
Diocesan Multi Academy Trust

Supporting pupils with medical conditions policy

Date approved by Trust Board:	Pending
Next Review Date:	
Body Responsible for Review:	Premises and Risk Management Committee

St Edmundsbury and Ipswich
Diocesan Multi Academy Trust

Content

1. Aims *4*

2. Legislation and statutory responsibilities *4*

3. Roles and responsibilities *4*

3.1 The Trust board 4

3.2 The Local Governing Body (LGB) 5

3.2 The Headteacher 5

3.3 Staff 5

3.4 Parents/carers 6

3.5 Pupils 6

3.6 School nurses and other healthcare professionals 6

4. Equal opportunities *6*

5. Being notified that a child has a medical condition *7*

6. Individual healthcare plans (IHPs) *7*

7. Managing medicines *8*

7.1 Controlled drugs 9

7.2 Pupils managing their own needs 9

7.3 Unacceptable practice 9

8. Emergency procedures *10*

9. Training *10*

10. Record keeping *11*

11. Liability and indemnity *11*

12. Complaints *11*

13. Monitoring arrangements *11*

Trust board 11

Local Governing Body 11

14. Links to other policies *12*

Appendix 1: Being notified a child has a medical condition *13*

Appendix 2: Procedures for children who are sick or infectious *14*

Appendix 3 - School-specific procedures.....15

St Edmundsbury and Ipswich
Diocesan Multi Academy Trust

1. Aims

At St Edmundsbury and Ipswich Diocesan Multi Academy Trust we understand that medical conditions requiring support at school can affect quality of life and may be life-threatening.

Our schools will support pupils with medical conditions so that they have full access to education, including school trips and physical education.

This policy aims to:

- Make sure that pupils, staff and parents/carers understand how our school will support pupils with medical conditions
- Set out the roles and responsibilities for everyone in the school community in regard to pupils with medical conditions
- Set out the procedure for creating, reviewing and managing individual healthcare plans (IHPs)
- Set out how we will manage medicines in school
- Reassure parents/carers that the school will help their child feel safe, supported and included

The Headteacher in each school has responsibility for implementing this policy. For schools with an Executive Headteacher this may be delegated to a Head of School or Deputy Headteacher (the term Headteacher is used throughout this policy to identify this role).

Where a school has a nursery, the provisions of this policy apply to nursery as well as the main 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 statutory guidance on supporting pupils with medical conditions at school and the Early Years Foundation Stage statutory framework from the Department for Education (DfE).

This policy also complies with our funding agreement and articles of association.

3. Roles and responsibilities

3.1 The Trust board

The Trust board has ultimate responsibility for ensuring Trust schools make arrangements to support pupils with medical conditions.

The Trust board will:

- Review this policy regularly, in line with the relevant legislation and requirements
- Make sure that the policy sets out the procedures to be followed whenever a Trust school is notified that a pupil has a medical condition

- Make sure that schools are appropriately insured (or through equivalent RPA cover) to support pupils in this way

3.2 The Local Governing Body (LGB)

Each school's LGB will:

- Ensure that pupils with medical conditions can access and enjoy the same opportunities as any other pupil at the school.
- Ensure that the arrangements under this policy apply at all times when a child is in the care of the school, including: before-school provision, free breakfast clubs and after school clubs, whether delivered directly by the school or through a third party provided operating on or in the vicinity of the school site.
- Monitor practice, and staff training, relating to pupils with medical conditions, in line with this policy

3.2 The Headteacher

The headteacher will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Make sure that there are 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
- Make sure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development and monitoring of individual healthcare plans (IHPs)
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- Manage cover arrangements in the case of staff absence or turnover, to make sure a suitable staff member is always available, and supply staff are briefed appropriately about pupils' medical needs
- Approve risk assessments for school visits and school activities outside the normal school timetable that involve provision for pupils with medical conditions
- 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
- Make sure 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 the administration of medicines.

Those staff who take on the responsibility to support pupils with other 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/carers

Parents/carers will:

- Provide the school with sufficient and up-to-date information about their child's medical needs
- Provide evidence of appropriate prescription and written permission for medicines to be administered by staff
- 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

3.5 Pupils

Older pupils with medical conditions will often be well placed to provide information about how their condition affects them. Where appropriate, pupils should be 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

The school nursing service will notify a school when they are aware that 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 our school nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

4. Equal opportunities

Trust schools will adhere to the legal responsibilities under the Equality Act 2010 and will not unlawfully discriminate against any pupils. Trust schools are 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.

Trust school staff 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.

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 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 prior to the child attending, or by the beginning of the relevant term for pupils who are new to our school.

Schools must have a system covering how they obtain information about a child's need for medicine, and for keeping this information up to date (see section 10 of this policy). Trust schools will apply these procedures for all children with medical needs. Each school will update Appendix 4 with the procedure specific to their school.

For example schools may:

- For new starters, send a form to all parent/carers of pupils after their place at the school has been confirmed, but before their first school year starts, to confirm any medicine(s) their child needs. Where a pupil has a new diagnosis and/or a pupil has moved to the school mid-term, send a form and put arrangements in place prior to the child attending
- Send a reminder to parents/carers at the start of each year in a newsletter, as well as a form to complete, if their child requires certain medicine(s)
- Ask that parents/carers proactively inform them by either phone call to the school if their child's medical needs change during the school year.

6. Individual healthcare plans (IHPs)

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions, but may delegate this on a day-to-day basis to another member of staff, usually the SENDCo.

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 no consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents/carers 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 special educational needs (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 body and the headteacher, or other designated 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, 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 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/carer or pupil, the designated individuals to be entrusted with information/identification photos about the pupil's condition
- What to do in an emergency, including who to contact and contingency arrangements

7. 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**
- Where the school has parents'/carers' written consent

The person administering the medicine will keep a written record in school. Parents/carers will always be informed, in writing, on the same day the medicine has been administered, or as soon as reasonably possible.

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 recommended and maximum dosages for the pupil's age, and when the previous dosage was taken.

Schools will only accept prescribed medicines that are:

- In-date
- Labelled, clearly including the child's name
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

Schools 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.

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 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.

IHPs will include procedure for staff to follow if a pupil refuses to carry out a necessary procedure or take medicine.

7.3 Unacceptable practice

Although school staff will use their discretion and judge each case on its merits with reference to the pupil's IHP, they will keep in mind that it is not generally acceptable practice 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
- 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
- Send an ill pupil to the school office or medical room unaccompanied or with someone unsuitable (e.g. a fellow pupil who is not old or responsible enough)
- 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/carers, 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/carer 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/carers to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

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/carer 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. 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 support 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 must complete awareness training on allergies and anaphylaxis (see separate Allergy Safety Policy for further detail). In the case of an individual with known allergies, further training delivered by healthcare professionals may be necessary.

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 that they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

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

IHPs are kept in a readily-accessible place that all staff are aware of.

We will:

- Enter each pupil's medicine need in the school's system
- Update our records when parents/carers of pupils inform us of changes to their child's needs
- Keep a record of changes, labelling the most recent record for each child
- Make sure that all staff have access to records so that they are informed about pupils' medical needs
- Securely hold this information digitally in accordance with the UK GDPR
- Inform parents/carers about how they can access their child's information (provided no relevant exemptions apply to their disclosure under the Data Protection Act 2018)

11. Liability and indemnity

In respect of public liability, the Trust board will ensure that schools are either insured, or a member of the DfE's risk protection arrangement (RPA).

12. Complaints

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

13. Monitoring arrangements

Trust board

The Trust Board is responsible for:

- Ensuring that the Trust has an effective Supporting pupils with medical conditions policy.
- Approving the policy and ensuring it is published.
- Ensuring the policy is reviewed at least every three years, and following relevant serious incidents or near misses where appropriate.
- Ensuring arrangements for local monitoring, support and challenge are reflected in the Trust's governance and delegation arrangements.

Local Governing Body

Local Governing Bodies monitor local implementation of the policy and provide appropriate support and challenge to school leaders.

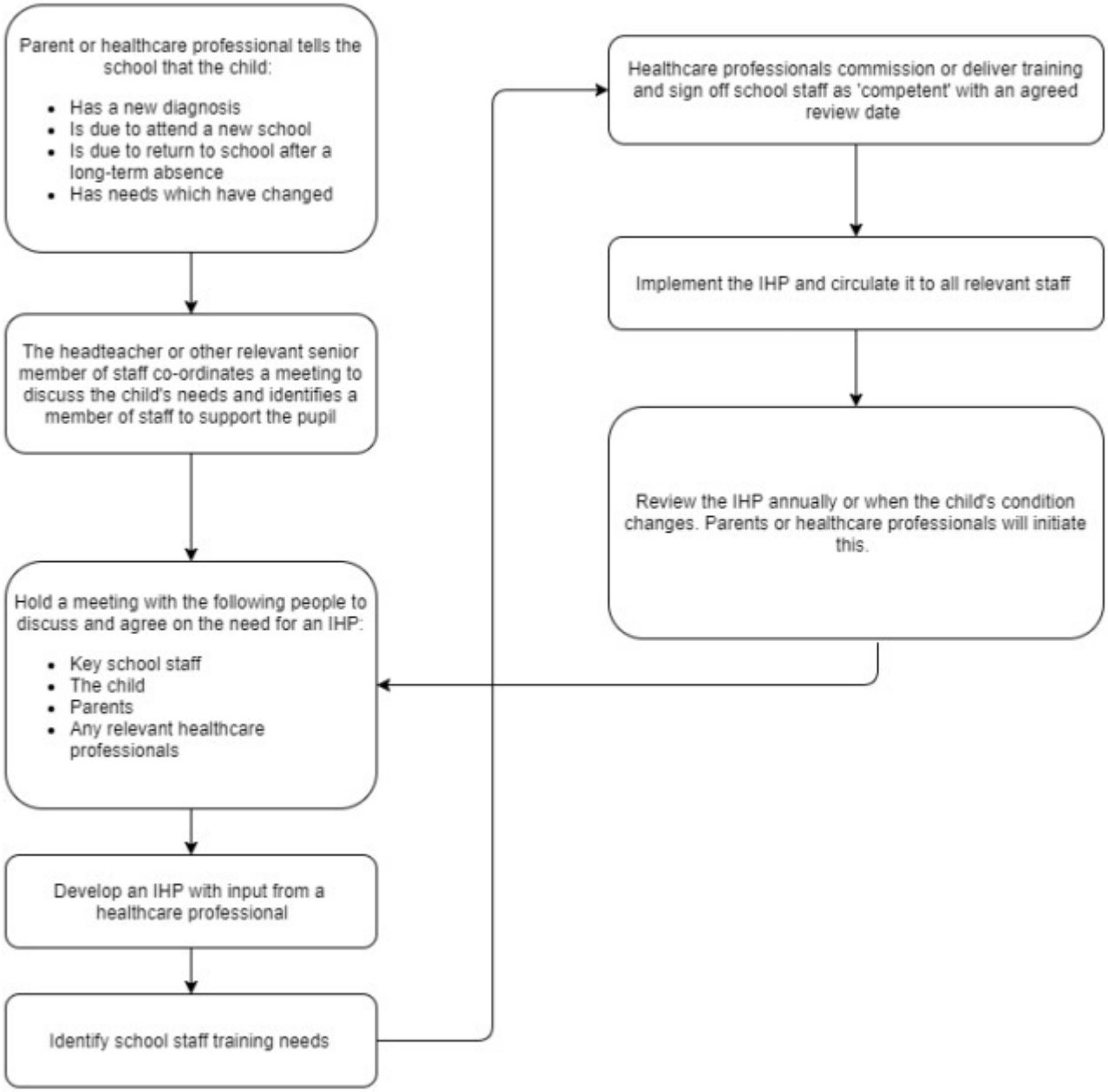
14. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First Aid Guidance Note
- Health and safety
- Safeguarding
- Special educational needs information report and policy
- Allergy safety

St Edmundsbury and Ipswich
Diocesan Multi Academy Trust

Appendix 1: Being notified a child has a medical condition



St Edmundsbury and Ipswich
Diocesan Multi Academy Trust

Appendix 2: Procedures for children who are sick or infectious

- Pupils who have an infectious disease shouldn't attend school/nursery
    - Parents should notify the school if their child has an infectious disease
    - If a pupil becomes unwell during the day – for example, they have a temperature, sickness, diarrhoea or stomach pains – the parents or carers will be contacted to collect their child
    - Pupils with a temperature, sickness, diarrhoea or an infectious disease should not attend school/nursery while they are sick. Depending on the sickness, staff may ask parents to take their child to the doctor before they return to school
    - Staff will notify parents if a risk to other pupils exists

Children with specific infectious diseases set out in the UK Health Security Agency's exclusion table will not be allowed to return to school/nursery until the appropriate exclusion period has passed.

Schools will take the following steps to prevent the spread of infection:

- Reducing or eliminating sources of infection through good hygiene practices
- Good handwashing practice
- Encouraging and facilitating healthy eating
- Ensuring that regulated food hygiene standard requirements in the maintenance of food preparation areas and preparation of food are followed
- Championing and educating staff, parents, carers and pupils on the importance of immunisation as a tool against infection (while recognising the individual's right to choose)

Schools with nurseries, will also establish a daily cleaning routine for:

- Nappy changing facilities
- Play areas
- Toys, activities and equipment

St Edmundsbury and Ipswich
Diocesan Multi Academy Trust

Appendix 3 - School-specific procedures

Who is responsible for maintaining IHPs

People with other specific responsibilities, e.g., regular checking of medicines in date, maintaining eth register etc,.

How the school gathers information about a child's need.