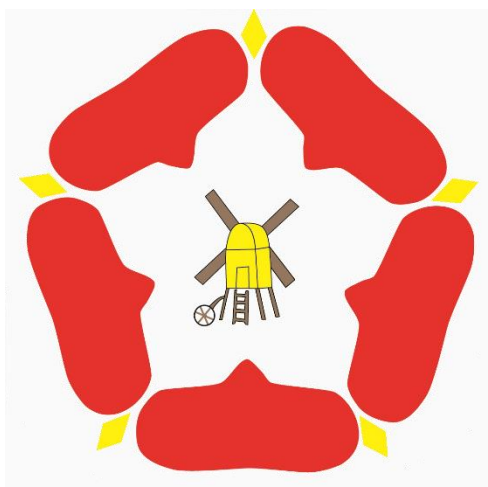


# Bozeat Community Primary School



## Supporting Pupils with Medical Conditions policy

**Approved by:** Full Governing Body

**Last reviewed on:** September 2022

**Next review due by:** September 2024

# **Index**

- 1. Introduction**
- 2. Aims**
- 3. Definitions**
- 4. Rationale**
- 5. Entitlement**
- 6. Expectations**
- 7. Individual Health Care Plans**
- 8. Emergencies**
- 9. Day Trips, Residential Visits & Sporting Activities**
- 10. Complaints**
- 11. Roles and Responsibilities**
- 12. Appendix 1**
- 13. Appendix 2**
- 14. Appendix 3**

## **1. Introduction**

This policy describes the arrangements to provide support for pupils with medical conditions; it includes details on how the policy will be implemented effectively, including a named person who has overall responsibility for policy implementation. The policy covers the administration of medicines in school and the role of individual healthcare plans for those pupils who need them. It identifies who is responsible for the development of healthcare plans in supporting pupils at school with medical conditions. It describes the arrangements to actively support pupils with medical conditions for them to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. It requires that written records are kept of all medicines administered to children. It requires that staff are properly trained to provide the support that pupils need. The policy sets out what should happen in an emergency situation. It requires that the appropriate level of insurance is in place and appropriately reflects the level of risk, with risk assessment being carried out, when appropriate. It requires parents to provide the school with sufficient and up-to-date information about their child's medical needs. This will be prompted with an annual data check.

## **1. Aims**

To ensure pupils at Bozeat Community Primary School and Nursery with medical conditions, in terms of both physical and mental health are properly supported so they can play a full and active role in school life, remain healthy and achieve their academic potential. To ensure the needs of children with medical conditions are effectively supported in consultation with health and social care professionals, their parents and the pupils themselves.

### **The school aims to:**

- assist parents in providing medical care for their children;
- educate staff and children in respect of special medical needs;
- arrange training for volunteer staff to support individual pupils;
- liaise as necessary with medical services in support of the individual pupil;
- ensure access to full education if possible, so that all pupils with medical conditions are able to participate in all aspects of school life
- monitor and keep appropriate records.

## **2. Definitions**

Pupils' medical needs may be broadly summarised as being of two types:

- (a) Short-term affecting their participation in school activities, whilst they are on a course of medication.
  
- (b) Long-term potentially limiting their access to education and requiring extra care and support (deemed special medical needs).

## **3. Rationale**

Local Authorities and schools have a responsibility for the health and safety of pupils in their care. The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of pupils with special medical needs, the responsibility of the employer is to make sure that safety measures cover the needs of all pupils at the school. This may mean making special arrangements for particular pupils who may be more at risk than their classmates. Individual procedures may be required. The employer is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support these pupils may need.

The Children and Families Act 2014, from September 2014, places a duty on schools to make arrangements for children with medical conditions. Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone. Teachers and other school staff in charge of pupils have a common law duty to act in loco parentis and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site. This could extend to a need to administer medicine.

The prime responsibility for a child's health lies with the parent who is responsible for the child's medication and should supply the school with information. The school takes advice and guidance from the medical profession which encourages self-administration of medication when possible.

#### **4. Entitlement**

We believe that pupils with medical needs should be assisted wherever possible and that they have a right to the full education available to other pupils. We believe that pupils with medical needs should be enabled to have full attendance and receive necessary proper care and support whilst at school.

We believe that all employees have rights in relation to supporting pupils with medical needs as follows:

- Choose whether or not they are prepared to be involved;
- Receive appropriate training;
- Work to clear guidelines;
- Have concerns about legal liability;
- Bring to the attention of management any concern or matter relating to supporting pupils with medical needs.

## 5. Expectations

It is expected that:

- Any pupil with a medical condition requiring medication or support in school should have an individual healthcare plan which details the support that child needs. If the parents, healthcare professional and school agree that a healthcare plan is inappropriate or disproportionate, a record of the child's medical condition and any implications for the child will be kept in the school's medical record and the child's individual record which are stored safely school. Inhalers will be kept in classrooms for easy access in zip locked bags clearly labelled with the child's name.
- Parents will be encouraged to co-operate in training children to self-administer medication if this is practicable and that members of staff will only be asked to be involved if there is no alternative;
- Where parents have written to request the school to administer the medication for their child the prescription and dosage regime should be typed or printed clearly on the outside. The school will only administer medicines in which the dosage cannot be administered outside of school hours or has to be taken with meals. The name of the pharmacist should be visible. School staff will not accept any medications not presented as described. Pupils should not bring in their own medicine. This should be brought into school by the parent.
- Staff are trained by professionals and parents in some instances to administer medicines such as EpiPens.
- Controlled drugs (such as Ritalin) may only be taken on school premises by the individual to whom they have been prescribed. Passing such drugs to others is an offence. Controlled drugs will be stored in a locked non-portable container and only named staff will have access.
- Asthma inhalers will be stored in classrooms in a ziplocked bag with the child's name. Each class will have a record book to monitor usage. Information will be provided to parents or carers regularly so they are aware of the child's usage. A central record will be kept of asthma sufferers.
- Staff will consider carefully their response to requests to assist with the giving of medication or supervision of self-medication and that they will consider each request separately.
- The school will liaise with the School Health Service for advice about a pupil's special medical needs and will seek support from the relevant practitioners where necessary and in the interests of the pupil.

Bozeat Community Primary School and Nursery cannot be held responsible for side effects that occur when medication is taken correctly.

Any medicines brought into school by the staff e.g. headache tablets; inhalers for personal use will be kept securely in appropriate storage and kept out of the reach of the pupils. Staff medicine is the responsibility of all staff concerned and not the school.

The SENDCO is responsible for ensuring that whenever the school is notified that a pupil has a medical condition:

- Sufficient staff are suitably trained
- All staff are made aware of a child's condition
- Cover arrangements in case of staff absence/turnover is always available
- Supply teachers are briefed
- Risk assessments for visits and activities out of the normal timetable are carried out
- Individual healthcare plans are monitored regularly and reviewed annually or earlier if evidence is presented that the child's needs have changed. The plan should be developed with the child's best interests in mind and ensure that the school assesses and manages risks to the child's education, health and social wellbeing, and minimizes disruption.
- Transitional arrangements between schools are carried out
- If a child's needs change, the above measures are adjusted accordingly

## 6. Individual Health Care Plans (IHCPs)

- There is a need for proper documentation at all stages when considering the issue of support for pupils with medical needs in school. The following information should be considered when writing an individual healthcare plan:
- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication and other treatments, times, facilities, equipment, testing, dietary requirements and environmental issues
- Specific support for the pupil's educational, social and emotional needs
- The level of support needed including in emergencies
- Who will provide support, their training needs, expectation of their role, confirmation of their proficiency and cover arrangements
- Who in school needs to be aware of the child's condition and the support required
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate
- Confidentiality
- What to do if a child refuses to take medicine or carry out a necessary procedure
- What to do in an emergency, who to contact and contingency arrangements
- Where a child has SEND but does not have an Education, Health and Care plan, their special educational needs should be mentioned in their individual healthcare plan.



## **7. Emergencies**

- Medical emergencies will be dealt with under the school's emergency procedures.
- Where an Individual Healthcare Plan (IHCP) is in place, it should detail: What constitutes an emergency. What to do in an emergency.
- Pupils will be informed in general terms of what to do in an emergency such as telling a teacher.
- If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents arrive.

## **8. Day trips, residential visits and sporting activities**

- Where pupils are required to take medicine during a day trip etc, arrangements should be made to administer them in accordance with this policy
- Pupils with medical conditions should not be precluded from taking part in day trips, residential visits or sporting activities unless evidence from a clinician such as a GP states that this is not possible.
- Teachers should be aware of how a pupil's medical condition may impact on their participation
- School will consider any reasonable adjustments that may need to be made to enable pupils with medical conditions to participate fully and safely on visits.

## **9. Unacceptable practice**

The following are generally considered to be unacceptable practice:-

- Preventing children from easily accessing their inhalers and medication and administering them when necessary.
- Assuming that every child with the same condition requires the same treatments
- Ignoring the views of the child or their parents; or medical evidence or opinion (although this may be challenged);
- Sending children with medical conditions home frequently or preventing them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- If the child becomes ill, sending them to the school office or medical room unaccompanied or with someone inappropriate;
- Penalizing children for their attendance record if their absences are related to their medical condition e.g. hospital appointments; Preventing pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- Requiring parents, or making them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs; or
- Preventing children from participating or creating unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

## **10. Complaints**

If parents or pupils are dissatisfied with the support provided by school, they should discuss their concerns directly with the school. If, for whatever reason, this does not resolve the issue, they may make a formal complaint via the school's complaints procedure. Making a formal complaint to the Department for Education should only occur if it comes within scope of section 496/497 of the Education Act 1996 and after other attempts at resolution have been exhausted.

## 11. Roles and Responsibilities

### The Governing Board

- Governors ensure, through this policy, that arrangements are in place to support pupils with medical conditions. They also ensure that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.
- Some children with medical conditions may be disabled. Where this is the case the governors, through this policy, comply with their duties under the Equality Act 2012. In doing so they will ensure that such children can access and enjoy the same opportunities at school as any other child. Some pupils may have special educational needs (SEND) and may have a statement or EHC plan which brings health and social care needs, as well as their special educational provision. For children with SEND, this guidance should be read in conjunction with the SEND code of practice 2014.
- In making these arrangements, the Governing Board takes into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. Some will be more obvious than others. The focus is on the needs of each individual child and how their medical condition impacts on their school life.
- The Governing Board, through this policy, intend that their arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions in school. They intend that the arrangements should 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 intend that staff should be properly trained to provide the support that pupils need.
- The Governing Board intend that the arrangements put in place are sufficient to meet their statutory responsibilities and that policies, plans, procedures and systems are properly and effectively implemented. This aligns with their wider safeguarding duties. The link governor for safeguarding will monitor this as part of their meetings with the Headteacher.
- The Governing Board also intend that this policy is reviewed at least annually

## **The Headteacher**

The Headteacher will:

- Ensure that this policy is implemented.
- Consult with appropriate health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.
- Ensure all staff are aware of this policy and understand their role in its implementation
- Ensure all staff who need to know are informed of a child's condition
- Ensure sufficient numbers of staff are appropriately trained to implement the policy and deliver IHPs, including in emergency and contingency situations, Bozeat Community Primary School and Nursery, March 2019.
- Ensure the school and staff are appropriately insured.
- Is responsible for the development of IHPs.
- Contact the school nursing service in the case of any child with a medical condition who has not been brought to the attention of the school nurse.
- Ensure appropriate records are kept.
- Ensure all staff are aware of this policy.
- Ensure that personal details about children's medical needs are shared only with adults who need to know and work closely with the pupil.
- Ensure the policy is reviewed annually and is developed effectively with partner agencies.

### **School Staff**

- Any staff member may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so.
- Should receive sufficient and suitable training and achieve the necessary level of competency before taking on the responsibility of supporting children with medical conditions.
- Should familiarize themselves with procedure detailing how to respond when they become aware that a pupil with a medical condition needs help.
- Should undertake training to achieve necessary competency to support pupils with medical conditions, if they are required to undertake that responsibility.
- Any staff member should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help
- Staff who undertake responsibilities within this policy are covered by the school's insurance

### **School Nurses**

- Are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school.
- Should liaise locally with lead clinicians on appropriate support.
- May support staff on implementing a child's IHP and provide advice and liaison.

### **Other healthcare professionals**

- Should notify the school nurse when a child has been identified as having a medical condition that will require support at school.
- May provide advice on developing healthcare plans.
- Specialist local teams may be able to provide support for particular conditions (e.g. Asthma, diabetes) and should be consulted where necessary.

### **Pupils**

- should, wherever possible, be fully involved in discussions about their medical support needs and contribute to, and comply with, their IHP.

### **Parents**

- Must provide the school with sufficient and up-to-date information about their child's medical needs to complete *Appendix 1 - Individual healthcare plan template*
- Are the key partners and should be involved in the development and review of their child's IHP
- Should carry out any action they have agreed to as part of the IHP implementation
- Must come in to school to complete a written request for medicines to be administered by the school staff. *See Appendix 3 - Parental agreement for a school to administer medicine template*
- Must abide by and follow this policy.

**Appendix 1**

**Bozeat Community Primary School and Nursery Individual Healthcare Plan**

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, contra-indications, 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

**Appendix 1**

**Bozeat Community Primary School and Nursery Individual Healthcare Plan / *continued...***

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



## Appendix 2

### Bozeat Community Primary School and Nursery - Parental Agreement for School to Administer Medicine

**Bozeat Community Primary School and Nursery will be unable to administer medicine to your child unless this form is fully completed and signed. Medicines must be in the original container as dispensed by the pharmacy**

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

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 container as dispensed by the Pharmacy.**

**Appendix 2**

**Bozeat Community Primary School and Nursery - Parental Agreement for School to Administer Medicine / *continued*....**

Name:	
Daytime Tel 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 frequency of the medication or if the medicine is stopped.

Signature(s) \_\_\_\_\_ Date \_\_\_\_\_

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Bozeat Community Primary School and Nursery Staff to complete

The above named child received the above medicine at \_\_\_\_\_ (time)

Signed \_\_\_\_\_ Print Name \_\_\_\_\_

Date \_\_\_\_\_

**Copies: Original for school file. Copy to be sent home with child**

## APPENDIX 3

### Family Contact Information

Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

Contact 1 - Name	
Relationship to child	
Phone no. (work)	
(Home)	
(mobile)	
Contact 2 - Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

<b>Clinic/Hospital Contact</b>	
Name	
Phone no.	

<b>G.P.</b>	
Name	
Phone no.	