



# **Pate's Grammar School Policy**

## **Supporting Pupils With Medical Conditions**

**Approved by: Full Governing Body Date: May 2022**

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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.

### 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 the Governing Body to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education'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 Governing Body

The Governing Body will:

- ensure that this policy enables provision of effective support for medical conditions in its school's in line with the Statutory guidance "[Supporting Pupils at School with Medical Conditions](#)" December 2015 and any other related guidance from the DfE;
- ensure that the policy complies with its duties under Equality law and the school's Equality policy and all responsibilities in the SEN Code of Practice;
- focus on the needs of individuals in ensuring that pupils and parents have confidence in the school's ability to provide effective support;
- review and approve this policy, and ensure that it is updated regularly;
- accept that all employees have rights in relation to supporting pupils with medical needs as follows:
  - receive training as appropriate and work to clear guidelines;
  - bring to the attention of the Head Master and Deputy Head any concern or matter relating to supporting pupils with medical conditions.

**The Governing Body acknowledges that Andrew Jones, Deputy Head, is the named individual responsible for implementing this policy, namely:**

- ensuring that arrangements are in place to support students with medical conditions, focusing on the needs of the individual student, so that these students can access and enjoy the same opportunities at School as any other student;
- ensuring that arrangements meet statutory responsibilities, with policies and procedures effectively implemented in a way which gives students and parents' confidence;
- ensuring that arrangements show an understanding of how medical conditions impact on the ability to learn, as well as increasing confidence and promoting self-care;
- 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);
- providing adequate First Aid cover, and staff training, as outlined in the [Health and Safety \[First Aid\] Regulations 1981](#);
- monitoring and responding to all matters relating to the health and safety of all persons on School premises. See the School's Health and Safety Policy.

### **3.2 The Head Master**

The Head Master 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.

### **3.3 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 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 must:

- 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.

### **3.5 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 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.

#### **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 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 school.

See Appendix I.

#### **6. Individual healthcare plans (IHPs)**

The Head Master 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 Head Master 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 Governing Body has asked Andrew Jones to 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 Head Master 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 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 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.

## **7.3 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 parent 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 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**

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 Andrew Jones. 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 school 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. Educational Visits, Residential Trips and Sports Fixtures**

The school aims to include all students with medical conditions in all school activities, including day trips, sports fixtures and any residential activities either in the UK or abroad. The Combined Cadet Force (CCF) will follow the same protocol with regard to trips they administer.

Appropriate risk assessments are undertaken for every school trip. If there is any concern about the school's ability adequately to provide for a student's safety, or the safety of other students on the trip, parents will be consulted and medical advice sought from health professionals. Any decision will be made in discussion with the student and his or her parents, but Governors have delegated to the Head Teacher the responsibility of approving risk assessments, and the final decision about participation will rest with the Head Teacher

Staff supervising visits, trips and sports fixtures will be made aware of students' medical needs. On day trips and sports fixtures students are responsible for carrying personal emergency medication with them and staff will check that they have this with them prior to the trip or sports team departing. Spare emergency medication provided to the school, including associated health care plans, will also be taken.

On longer residential trips the storage of medication will be agreed as part of the risk assessment and agreed with the student and parent.

For residential trips an enhanced HCP may be required, drawn up in consultation with the student/parent/healthcare professionals and trip leader.

## **12. Liability and indemnity**

The school Bursar will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk. We will ensure continuing membership of the Department for Education's risk protection arrangement (RPA).

## **13. Complaints**

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

## **14. Monitoring arrangements**

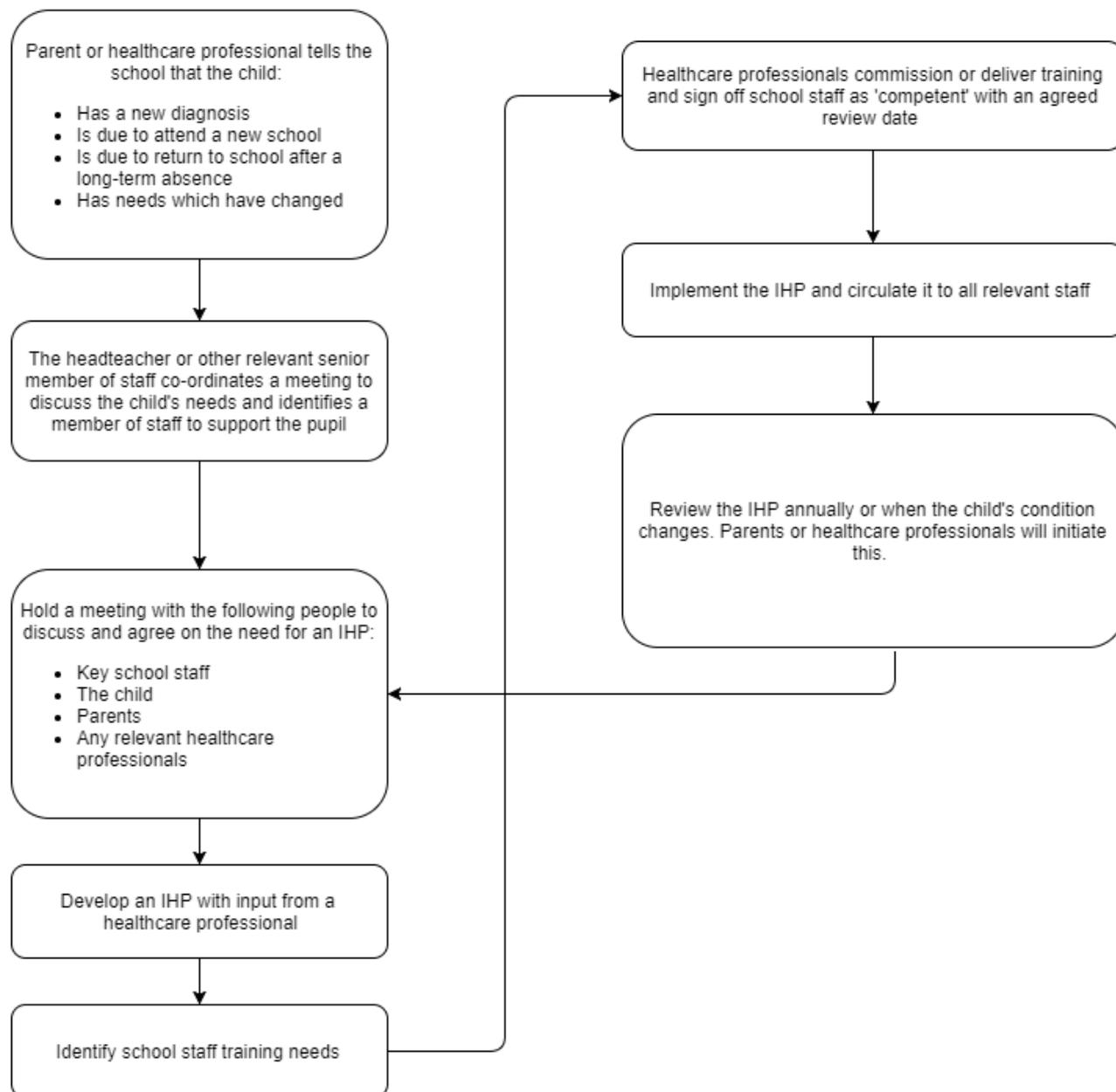
This policy will be reviewed and approved by the Governing Body on an annual basis.

## **15. Links to other policies**

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding
- Special educational needs information report and policy
- Children with Health Needs who cannot attend school.

## Appendix I: Being notified a child has a medical condition



*Please continue over the page for notification form.*

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.


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

Are there any additional requirements for school visits/trips? As a matter of course students should always have personal emergency medication with them on school trips or on sports fixtures. Spare medication supplied by parents will also be taken on trips and sports fixtures

Other information

Describe what constitutes an emergency, and the action to take if this occurs, including who to contact

Signed (Parent/Guardian)

--

Signed (School)

.....  
.....

FOR OFFICE USE

Signed copy of HCP returned to parent

Signed copy of spare medication form returned to parent

Spare medication received for office Yes/No

Spare medication received for PE department Yes/No

**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	Pate's Grammar School
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

**Medicine**

Name/type of medicine <i>(as described on the container)</i>	
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 – YES/NO	
Procedures to take in an emergency	

**NB: Medicines must be in the original container as dispensed by the pharmacy clearly marked with the child's name.**

**Contact Details**

Name	
Daytime telephone no.	
Relationship to child	
Address	
Parent signature - I understand that I must deliver the medicine personally to Reception	

**Spare Emergency Medication Supplied to School**

If you wish to supply spare emergency medication to the school please complete below

Please tick as appropriate

- I will provide spare emergency medication for the school to hold for use in an emergency at school – please drop into reception
- I would like this spare emergency medication to accompany my son/daughter on school trips
- I would like to supply spare medication for trips on a trip by trip basis
- at sports  I will provide the PE department with an additional set of emergency medication for use at fixtures – please drop into reception

**I have supplied the following to the school in a named container**

Box 1 – to be held in the main office – for back up at school or when on school trips

Medication	Expiry Date

Box 2 – to be held by PE department (if applicable) as back up for sports fixtures

Medication	Expiry Date

**I understand that is my responsibility to ensure that medication is kept in date and that the school is kept informed of any changes to the healthcare needs of my child.**

Signed (Parent).....

Signed (School) .....