

SUPPORTING CHILDREN WITH MEDICAL CONDITIONS POLICY

Review Frequency: Annual

Next Review: Autumn 25

Agreed by Local Governing Committee: Autumn 2024

The children and Families Act 2014 places a duty on schools to arrange for children with medical conditions. All children have a right to access the full curriculum. This policy has been drawn up in accordance with the DfE statutory guidance 'Supporting pupils at school with medical conditions' December 2015. St Mary's CE Primary School supports the needs of children with medical conditions (short-term or long-term) whilst safeguarding staff by providing clear guidelines and parameters for the support they offer.

Definitions of Medical Conditions:

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

- **Short-term**: affecting their participation in activities at St Mary's CE Primary School because they are on a course of medication.
- Long-term: potentially limiting their access to education and requiring extra care and support, medicines or care while at school to help them to manage their condition and keep them well, including monitoring and intervention in emergency circumstances. It is important that parents feel confident that the school will provide effective support for their child's medical condition and that children feel safe.

Some children with medical conditions may be considered disabled. Where this is the case local governing committee must comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEN) and may have a statement, or Education, Health Care Plan (EHCP). Where this is the case, this policy should be read in conjunction with the 0-25 SEND Code of Practice and the school's SEND Policy / SEN Information Report and the Individual Healthcare Plan will become part of the EHCP.

Policy Implementation

The statutory duty for making arrangements for supporting children at school with medical conditions rests with the local governing committee. Day to day responsibility for the successful administering and implementation of this Policy is given to Mr Lizzie Wayland and Victoria Woodier, Co-Headteachers of St Mary's CE Primary School. However, the local governing committee remains legally responsible and accountable for fulfilling its statutory duty.

The Co-Headteachers will also be responsible for ensuring that sufficient staff are suitably trained, and will ensure cover arrangements in case of staff absences or staff turnover to ensure that someone is always available and on site with an appropriate level of training and for briefing supply teachers.

The Assistant Headteacher/SENCO will also be responsible, in conjunction with Parents/Carers, for drawing up, implementing and keeping under review the Individual Healthcare Plan for each child and making sure relevant staff are aware of these plans.

The Class Teachers are responsible for preparing risk assessments for individual children for school visits and other school activities outside of the normal timetable and for the monitoring of Individual Healthcare Plans.

All members of staff will be expected to show a commitment and awareness of children's medical conditions and the expectation of the policy. All new members of staff will be inducted into the arrangements and guidelines set out in this Policy.

Procedure to be followed when notification is received that a Child has a medical Condition

We will ensure that the correct procedures are followed whenever we are notified that a child has a medical condition. The procedures will also be in place to cover any transitional arrangements between schools, the process to be followed upon reintegration after a period of absence or when children's needs change. For children starting at St Mary's CE Primary School for the first time, arrangements will be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or children moving to St Mary's CE Primary School mid-term, we will make every effort to ensure that arrangements are put in place within two weeks.

In making the arrangements, we will take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. We will therefore ensure that the focus is on the needs of individual children and how their medical condition impacts

on their school life. St Mary's CE Primary School will ensure that arrangements give Parents/Carers and children's confidence in the school's ability to provide effective support for medical conditions in school.

We will ensure that staff are properly trained and supervised to support children's medical conditions and will be clear and unambiguous about the need to actively support children with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. We will make arrangements for the inclusion of children in such activities with any adjustments as required unless evidence from a clinician, such as a GP, states that this is not possible.

St Mary's CE Primary School does not have to wait for a formal diagnosis before providing support to children. In cases where a child'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. This would normally involve some form of medical evidence and consultation with the Parents/Carers. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place. This discussion will usually be led by the Special Educational Needs Co-ordinator (SENDCO) or the Co-Headteachers. Following these discussions, an Individual Health Care Plan will be written in conjunction with the Parent/Carer, the School Nurse and the SENCO.

Individual Health Care Plans

Individual Healthcare Plans will help to ensure that St Mary's CE Primary School effectively supports children with medical conditions. They will provide clarity about what needs to be done, when, and by whom. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. They are likely to be helpful in the majority of other cases, too, especially where medical conditions are long-term and complex. However, not all children will require one. The school, health care professional and Parents/Carers should agree, based on evidence, when an Individual Health Care Plan would be inappropriate or disproportionate. If consensus cannot be reached, the Co-Headteachers, Mr Lizzie Wayland and Victoria Woodier, is best placed to take a final view. A flow chart for identifying and agreeing the support a child needs and developing an individual healthcare plan is provided in Template A.

St Mary's CE Primary School will ensure that Individual Health Care Plans are reviewed at least annually, or earlier if evidence is presented that the child's needs have changed. They will be developed and reviewed with the child's best interests in mind and ensure that St Mary's CE Primary School assesses and manages risks to the child's education, health and social well-being and minimises disruption. Where a child is returning to school following a period of hospital education or alternative provision, we will work with the local authority and education provider to ensure that the Individual Healthcare Plan identifies the support the child will need to reintegrate effectively.

Template B provides a basic template for the Individual Health Care Plan.

Roles and Responsibilities

Please refer to the section on policy implementation for the areas, which have been delegated to different members of the school team at St Mary's CE Primary School.

The School Nurse is responsible for:

- Notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible this should be done before the child starts at St Mary's CE Primary School.
- Providing support for staff on implementing an Individual Healthcare Plan and providing advice and liaison, particularly with training.

Children with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their Individual Healthcare Plan. Other children will often be sensitive to the needs of those with medical conditions, and can, for example, alert staff to the deteriorating condition or emergency need of children with medical conditions.

Parents/Carers should provide the school with sufficient and up-to-date information about their child's medical needs. They may, in some cases, be the first to notify the school that their child has a medical condition. Parents/Carers are key and should be involved in the development and review of their child's Individual Healthcare Plan, and may be involved in the drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure that they, or another nominated adult are contactable at all times.

Staff training and support

The school has a number of trained first aiders; a list is displayed in the staffroom and key areas around the school. There are key members of staff who will be regularly trained in supporting individual children with specific medical conditions such as diabetes, epilepsy and severe allergies.

All staff that are required to provide support to children with medical conditions will be trained by Healthcare professionals qualified to do so. The training need will be identified by the Healthcare professional during the development or review of the Individual Healthcare Plan.

Template E will be used to record staff training for administration of medicines and or medical procedures. Any medicine administered to children at school must be witnessed by another member of staff.

The child's role in managing their own medical needs

If after discussion with the Parents/Carers, a child is competent to manage their own medication and procedures, the school will encourage them to take responsibility and this will be reflected within the Individual Health Care Plan.

Wherever possible, children will be allowed to carry their relevant devices, or should be able to access their medicines for self-medication quickly and easily; these will be stored in the medical room to ensure that the safeguarding of other children is not compromised. St Mary's CE Primary School does also recognise that children who can take their medicines themselves or manage procedures may require an appropriate level of supervision. If a child is not able to self-medicate then relevant staff will help to administer medicines and manage procedures for them.

If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so but instead follow the procedure agreed in the Individual Health Care Plan. Parents/Carers will be informed so that alternative options can be considered.

Managing medicines on school premises and record keeping

At St Mary's CE Primary School, the following procedures are to be followed:

- Medicines should only be administered at school with permission of the Co-Headteachers, or a member of the Senior Leadership Team
- Medicines should only be administered at the school when it would be detrimental to a child's health or school attendance not to do so.
- No child under 16 should be given prescription or non-prescription medicines without their Parents/ Carers' written consent Template F.
- St Mary's CE Primary School will not administer non-prescription medicines except where this is specified in a child's Individual Healthcare Plan. In such cases, medication, e.g. for pain relief, will never be administered without first checking maximum dosage and when the previous dose was taken and Parents/Carers will be informed.
- Where clinically possible, medicines should be prescribed in dose frequencies, which enable them to be taken outside school hours.
- St Mary's CE Primary School will only accept prescribed medicines, with written permission from Parent/Carer, that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin, which must be in date, but which will generally be available to schools inside an insulin pen or a pump rather than in its original container.
- Asthma inhalers will be held in a labelled plastic box, which will be stored safely in the child's
 class or a known location. All other medicines, including epi-pens (or equivalent) will be
 stored safely in the school medical room and one epi-pen in the class or EYFS first aid room.
 Equipment/medicine relating to diabetes is currently kept with the individual child users. All
 medicines and related medical equipment should be clearly labelled with the child's name.
- All medicines will be stored safely in the medical room. Children should know where their medicines are at all times and be able to access them immediately. Where relevant, they should know who can help them access their medicines.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to children and not locked away; these will be stored in the medical room where both first aiders and the child know how to access them. If a child requires an asthma inhaler, it is crucial that they have an in-date inhaler in the school at all times. Depending on the age of the child, best practice would be that they retain their inhaler or epi-pen with them, with a spare kept centrally.

- During school trips, either the child or the first aid trained member of staff will carry all medical devices and medicines required depending on the age and individual needs of the child requiring medication.
- In the case of a child who has been prescribed a controlled drug, we will keep these securely stored in a locked, non-portable container and only staff named on the Healthcare Plan will have access. Controlled drugs should be easily accessible in an emergency. A record should be kept of any doses used and the amount of the controlled drug held in the school.
- Staff administering medicines should do so in accordance with the prescriber's instructions. St Mary's CE Primary School will keep a record (Template C and D) of all medicines administered to individual children, stating what, how, and how much was administered, when and by whom. Any side effects of the medication at school should be noted. Written records are kept of all medicines administered to children with the exception of asthma inhalers for occasional use. Where an asthma inhaler has been prescribed to a child for routine use, written records will be kept. These records offer protection to staff and children and provide evidence that agreed procedures have been followed.
- When no longer required, medicines should be returned to the Parent/Carer to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps.
- It is the responsibility of the Parent/Carer to ensure that medicines supplied to the school are in date, and to provide replacement medicines as required.

Emergency procedures

At St Mary's CE Primary School, Mr Lizzie Wayland and Victoria Woodier, Co-Headteachers will ensure that arrangements are in place for dealing with emergencies for all school activities, wherever they take place, including school trips within and outside the UK.

Where a child has an Individual Healthcare Plan, this should 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, a member of the school team will stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.

School trips, residential visits and preparing sporting activities

We will actively support children with medical condition to participate in day trips, residential visits and sporting activities by being flexible and making reasonable adjustments unless there is evidence from a clinician such as a GP that this is not possible.

At St Mary's CE Primary School, we will always carry out risk assessments so that planning arrangements take account of any steps needed to ensure that children with medical conditions can be included safely. This will involve consultation with Parents/Carers and relevant Healthcare professionals and will be informed by Health and Safety Executive (HSE) guidance on school trips.

Unacceptable Practice

Although staff at St Mary's CE Primary School should use their discretion and judge each case on its merits with reference to the child's Individual Health Care Plan, it is not generally acceptable practice to:

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary
- Assume that every child with the same condition requires the same treatment
- Ignore the views of the child or their Parents/Carers, or ignore medical evidence or opinion (although this may be challenged)
- Send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their Individual Healthcare Plans
- If the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable or leave them alone
- Penalise children for their attendance record if their absences are related to their medical condition (e.g. hospital appointments)
- Prevent children 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 the school to administer prescribed medication or provide medical support to their child, 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 or
- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring Parents/Carers to accompany the child.

Complaints

The normal arrangements for the treatment of complaints at St Mary's Hampton CE School are used for complaints about supporting children with medical conditions. The complaints policy is available on the school website (www.stmaryshamptonschool.org.uk) or upon request at the school office.

In the first instance we encourage parents to discuss their concerns with the class teacher who will seek to resolve any difficulty or misunderstanding. If matters remain unresolved then parents are encouraged to make an appointment with the Co-Headteachers who, together with the parent, will seek to resolve the issue before making a formal complaint to the Local Governing Committee.



Template A

Process for Developing Individual Health Care Plans

Parent or 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

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

Meeting to discuss and agree on need for IHCP 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)

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

School staff training needs identified

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

IHCP implemented and circulated to all relevant staff

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



Template B: Individual Health Care Plan

Child's Name		
Class		
Date of Birth		
Address		
Medical Diagnosis or Condition		
Date		
Review Date		
Name of Parent/Carer 1		
Contact Numbers	Work: Home: Mobile:	
Relationship to Child		
Name of Parent/Carer 2		
Contact Numbers	Work: Home: Mobile:	
Relationship to Child		
Clinic/Hospital Name		
Contact Number		
GP Name		
Contact Number		
Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.		
equipment of devices, environmentariss	ues etc.	
Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision		

Bull and the state of the state	
Daily care requirements	
Specific support for the child's educational, social an	d amational pands
specific support for the child's educational, social an	u emotional needs
Arrangements for school visits / trips, etc.	
Through the series visits y trips, etc.	
Other information	
Describe what constitutes an emergency and the act	ion to take if this occurs
Who is responsible in an emergency (state if differs fo	r off-site activities)
Staff training needed/undertaken – who, what, wher	e, when
, ,	,
Plan developed with	Signed
Train developed with	Signed
Francisco California	
Form copied to	



Template C: Record of Medicine Administered to an Individual Child

Child's Name			
Class			
Date medicine provided by Parent / Carer			
Quantity received			
Name and strength of medicine			
Expiry date			
Quantity returned			
Dose and frequency of medicine			
	1		
Staff signature			
Parent / Carer signature			
		T	T
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 - Class:

Date	Child's name	Time	Name of medicine	Dose given	Any reactions	Staff signature	Print name



Template E: Staff Training Record – administration of medicines and/or medical procedures

Name	
Type of training received	
Date of training completed	
Training provided by	
Profession and title	
	f] has received the training detailed above and is competent recommend that the training is updated [name of member of
Trainer's signature:	
Date:	
I confirm that I have received the traini	ing detailed above.
Staff signature:	
Date:	
Suggested review date:	



Template F: Parental Agreement for St Mary's CE Primary School to administer medicine

The school will not give your child medicine unless you complete and sign this form, and the school has a policy that the staff can administer medicine.

has a policy that the stair carradininister i	nedicine.	
Date for review to be initiated by		
Name of school		
Name of child		
Date of Birth		
Class		
Medical condition or illness		
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 needs to know about?		
Self-administration – y/n		
Procedures to take in emergency		
*NB: Medicines must be in the original container as disp	ensed by the pharmacy	
Name		
Daytime telephone no.		
Relationship to child		
Address		
I understand that I must deliver the	[agreed member of staff]	
medicine personally to		
The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.		
Signature:	Date:	