

# Supporting pupils with medical conditions, including medicine management policy

APPROVED BY:	Board of Governors
APPROVED BY SIGNATURE (Chair):	
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# 1. Aims

This policy aims to ensure that:

- > Pupils, staff and Parents/Carers 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

The Governors will implement this policy by:

- > 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

# 2. Legislation and statutory responsibilities

This policy meets the requirements under <u>Section 100 of the Children and Families Act 2014</u>, which places a duty on governing bodies 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 <u>supporting pupils with medical</u> <u>conditions at school</u>.

# 3. Roles and responsibilities

#### 3.1 The Governors

The Governors have ultimate responsibility to make arrangements to support pupils with medical conditions. The Governors will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

#### 3.2 The Headteacher

The Headteacher 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 care plans, including in contingency and emergency situations
- > Ensure that all staff who need to know are aware of a child's condition
- > Ensure the development of medical plans are created and coordinated by the Special School nurses
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- Contact the special 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 special school nurses
- 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 trained member of staff may be asked to provide support to pupils with medical conditions. 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 and class teams will consider 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
- Be involved in the development and review of their child's medical plan and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the medical plan, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times

#### 3.5 Pupils

Pupils within our setting and due to their learning difficulties and associated needs, may not be able to recognise their medical conditions or provide information about how their condition affects them. Pupils will be involved in discussions about their medical support needs as much as is possible and appropriate. They are also expected to comply with their medical plans.

#### 3.6 School nurses and other healthcare professionals

Our special 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 at the school, wherever possible. They may also support staff to implement a child's medical plan.

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 medical plans.

# 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/Carers 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 a medical plan.

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 1.

## 6. Medical plans

The Special School nurses has overall responsibility for the development of medical plans for pupils with medical conditions, and these are in conjunction with the Headteacher.

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 a medical plan. It will be agreed with a healthcare professional and the Parents/Carers when a medical plan 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.

Medical plans will be linked to, or become part of, any education, health and care (EHC) plan.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The Governors and the Headteacher, will consider the following when deciding what information to record on medical plans:

- > 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.
- 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/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 medicines will 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

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 in the meds office. Pupils will be informed about where their medicines are at all times and be able to access them immediately with a member of trained staff. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils in their classroom medication cabinet.

Medicines will be returned to Parents to arrange for safe disposal when no longer required.

The School allows 'Over the Counter' medication for menstruation pain only. These are to be handed in to the School Office as per all other medications so we know what is in school and for what reason. See Appendix 2.

Any other medication related to pain relief will be assessed on an individual basis. School will not keep a stock of medication, and these will be returned daily.

# 7.1 Controlled drugs

<u>Controlled drugs</u> are prescription medicines that are controlled under the <u>Misuse of Drugs Regulations 2001</u> and subsequent amendments, such as morphine and methadone.

All controlled drugs are kept in a secure cupboard in the meds office and only named staff an administer these.

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

Our pupils do not have medication on them as they are not competent to administer independently. All medication needs to come in to the office firstly, then be signed in by the meds team and stored securely in the meds room.

# 7.3 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's medical care plan, 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/Carers
- > 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 medical care plans
- 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 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' medical care plans 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 medical care plans. Staff who provide support to pupils with medical conditions will be included, where possible, 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 medical care plans
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Special School nurses 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 Governors 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.

Medical care plans are kept centrally in the meds room, which all staff are aware of, unless the child requires immediate care for their medical condition and therefore this remains near the child at all times.

# 11. Liability and indemnity

The Governors will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

The school currently takes insurance out via the DfE's Risk Protection Agreement

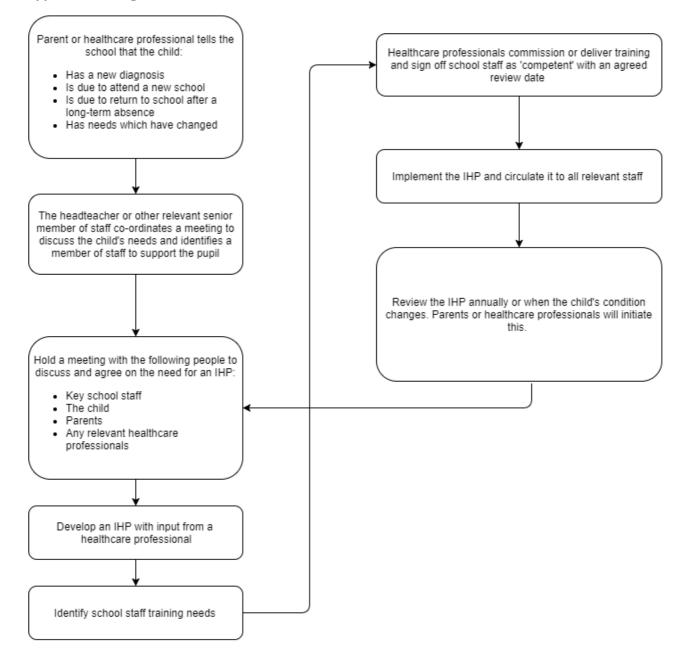
# 12. Complaints

Parents/Carers with a complaint about the handling of their child's medical condition should discuss these directly with the class teacher, in the first instance. If the class teacher cannot resolve the matter, they will direct Parents to the school's complaints procedure.

## 13. Monitoring arrangements

This policy will be reviewed and approved by the Governors every year.

Appendix 1: Being notified a child has a medical condition





## Over the Counter Medication

Pupils Name	
Medication	
Reason	
Phone call home – Date of call	
Time of call	
Who phoned Parent/Carer?	
Which Parent/Carer was spoken to?	
Confirmed reason for usage	
Last time of taking – on that day	
Date signed in – by who	
Time administered	
Date signed out – by who	
When was this last administered in school?	