



## Supporting Children with Medical Conditions

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This policy will ensure that all children with medical conditions are supported in the Academy so that they can play a full and active role in Academy life, remain healthy and achieve their academic potential.

It will also ensure that no child with a medical condition is discriminated against or denied access to education and associated services. This includes all aspects of Academy life such as trips, clubs and activities.

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Approved by the Governing Body 15<sup>th</sup> May 2023.

Reviewed: April 2023

Next Review: April 2024

## **CONTEXT**

This policy is to be read in conjunction with Statutory Framework for the Early Years Foundation stage (DfE, 2017,) Supporting pupils at schools with medical conditions (DfE 2015,) Section 100 of the Children and Families Act (2014,) SEN Code of Practice (2014), School Admissions Code (DfE 2014), Misuse of Drugs Act (1971) Child Protection and Safeguarding policy, Health and Safety policy.

### **1. AIMS**

1.1 All children with medical conditions can play a full and active role in Academy life including trips, visits and sporting activities, remain healthy and achieve their academic potential in line with the Equalities Act 2010. Pupils, staff and parents understand how our Academy supports pupils with medical conditions.

1.2 Under The Equality Act 2010, the Governing Body must ensure that no child with a medical condition is discriminated against or denied access to education and associated services. This includes all aspects of Academy life such as trips, clubs and activities.

1.3 The Academy will seek and consider advice from all health care professionals and listen to and value the views of parents/carers and pupils, in developing appropriate provision for any medical condition.

### **2. POLICY IMPLEMENTATION**

2.1 Overall responsibility for the implementation of this policy and related procedures lies with the Governors' Specialist, Early Years and Safe Guarding Committee. This committee will approve and review this policy annually.

2.2 The Academy office will be the first point of contact for any member of staff, parent/carers who wishes to discuss medical condition or health concern regarding a child.

2.3 The Executive Leadership Team (ELT) are responsible for ensuring that all Academy staff are aware of this policy and any related procedures.

2.4 The ELT will ensure that all staff supporting children with medical conditions have appropriate training. A record of this training will be held in the Academy office.

2.5 The ELT will be responsible for the monitoring of all individual health care plans and risk assessing any activities/individual pupils as necessary.

2.6 The Academy will ensure that suitably trained staff are available whenever pupils with medical conditions are engaged in Academy activities.

2.7 The Academy will ensure that all relevant staff are made aware of the child's medical condition this includes a briefing for supply teachers.

### **3. PROCEDURES WHERE NOTIFICATION IS RECEIVED THAT A PUPIL HAS A MEDICAL CONDITION**

3.1 Whenever the Academy is notified of a child's medical condition this will be recorded and appropriate action will be taken to ensure that individual needs are met. (See Appendix A- Medical condition flowchart)

3.2 Academy staff will seek permission from parents/carers to view/source information from medical professionals as necessary.

3.3 The Academy will make every effort to arrange support relating to the condition within two weeks from notification.

#### **4. INDIVIDUAL HEALTHCARE PLANS**

4.1 Parents, relevant staff and the Academy Medical Lead will be responsible for developing individual healthcare plans for children in the Academy. An individual healthcare plan will always be initiated where a child has a long-term, complex or life threatening condition. (See Appendix B-IHCP Flowchart).

4.2 Any member of Academy staff, parent/carer or healthcare professional may initiate an individual healthcare plan. Where possible a meeting will be held for these parties to agree the plan and the child will be involved as much as possible. Their views on their condition will be recorded on the plan. Individual healthcare plans will be reviewed at least annually or earlier if there is a change to the child's condition. (See Appendix C-Individual Healthcare plan IHCP).

4.3 Where a child has SEND but does not have an EHCP their special educational needs will be recorded in the individual healthcare plan.

4.4 All individual healthcare plans will be stored securely, but they should be easily accessible to all who need to refer to them, while preserving confidentiality.

#### **ROLES AND RESPONSIBILITIES**

5.1 Governors will ensure that all individual healthcare plans are reviewed regularly. This includes making sure that children with medical conditions are able to access and participate as much as possible in all aspects of Academy life.

5.2 The Governing body must ensure that arrangements are in place to support pupil with medical conditions. In doing so it should ensure that such children can access and enjoy the same opportunities within the Academy as any other child.

5.3 Governors will ensure that the Academy provides suitable training to sufficient numbers of staff to meet the needs of children with medical conditions.

5.4 The ELT will ensure that all Academy staff are aware of this policy and understand their role in implementing it. There will be sufficient trained numbers of staff to implement the policy and deliver against all individual healthcare plans.

5.5 The ELT will ensure that Academy staff are appropriately insured to support the children in their care.

5.6 The ELT will ensure that the School Nursing Service is informed where any child requires support with a medical condition.

5.7 Academy Staff maybe asked to provide support for children with medical conditions including the administering of medicines, although they cannot be required to do so. Any support required for a child will be recorded and or detailed in an individual healthcare plan as necessary. Paediatric First Aid trained nursery staff will administer medicines to children in the nursery setting with the consent of the parents.

5.8 Academy Staff will familiarise themselves with this policy. Where any staff member has a concern about a child they should raise this on a Cause for Concern Form and follow safeguarding procedures.

5.9 Where a child has a new or pre-existing condition, healthcare professionals including the School Nursing Service should inform the Academy ideally before or on entry. They may provide advice or further support for children with particular conditions. (See Appendix D: Signposting Information for Schools Seeking Support for Complex Childhood Medical Conditions).

5.10 Children will be involved in discussions about their medical support needs and contribute as much as possible to their care.

5.11 Parents/Carers should provide the Academy with sufficient and up to date information about their child's medical needs. Parents/Carers will also be involved with the development and review of any support or individual healthcare plan. Parents/Carers should carry out any action they have agreed to as part of a plan, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

5.12 Healthcare professionals, including GP's and paediatricians, will provide guidance to the Academy Wellbeing Officer when a child has been identified as having a medical condition that will require support in the Academy. They may provide advice on developing an individual healthcare plan. Specialist local health teams may be able to provide support in the Academy for children with particular conditions (e.g. epilepsy).

5.13 The Governing body should ensure that written records are kept of all medicines administered to children. Records offer protection to staff and children and provide evidence that agreed procedures have been followed.

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

## **STAFF TRAINING AND SUPPORT**

6.1 The Governors should ensure that the Academy's policy sets out clearly how staff will be supported in carrying out their role to support pupils with medical conditions, and how this will be reviewed. This should specify how training needs are assessed, and how and by whom training will be commissioned and provided.

6.2 Any member of Academy staff working with a child with a medical condition will receive appropriate training. This may be from NHS staff, PIMS Advisory staff or an external agency. A record of any training will be kept.

6.3 Key staff will be invited to contribute to meetings or reviews where a child's medical condition will be discussed.

6.4 Healthcare professionals will always be involved in confirming the proficiency of staff in any medical procedure or the administration of prescribed medications. (See Appendix E: Managing Medicines on Academy Premises procedures).

6.5 New staff will be informed of this policy and related procedures as part of the Academy's induction process.

6.6 A first-aid certificate does not constitute appropriate training in supporting children with medical conditions.

6.7 Staff must not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect requirements within individual healthcare plans).

6.8 No member of academy staff will administer medication to a child unless agreement has been obtained from the parent/carer either by telephone/verbally or prior written agreement. If the agreement is verbal a Parent/Carers agreement form will be sent home detailing medication/amount/timings, the Parent/carer is to sign this and return it to school for our records. (See Appendix J: Parent/Carer Agreement to Administer Medicines)

6.9 In some cases, written instructions from the parents or on the medication container dispensed by the pharmacist may be considered sufficient, but ultimately this is for the Academy to decide, having taken into consideration the training requirements as specified in pupil's individual health care plans.

Nursery staff must have a full Paediatric First Aid certificate within three months of starting work in order to be included in the required staff:child ratios at level 2 or level 3 in a nursery and or early years setting.

## **THE CHILD'S ROLE**

7.1 After discussion with parents/carers, children who are competent to should be encouraged to take responsibility for managing their own medicines and procedures. Wherever possible, children should be allowed to carry their own medicines and relevant devices or to access them quickly and easily. If it is not appropriate for a child to self-manage, relevant staff should help to administer medicines and manage procedures for them.

7.2 Appropriate supervision will be provided for any child with a medical need and this will be described, and staff providing support may be named, in any plans.

## **MANAGING MEDICINES ON ACADEMY PREMISES**

(See Appendix E: Managing Medicines on Academy Premises procedures)

8.1 The Academy will administer medicines in the Academy only when it would be detrimental to a child's health or attendance not to do so.

8.2 No child under 16 should be given prescription or non-prescription medicines without their parent's written consent – except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, every effort should be made to encourage the child or young person to involve their parents while respecting their right to confidentiality. The Academy should set out the circumstances in which non-prescription medicines may be administered

8.3 A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. See Appendix E: Staff 1.2: Managing Medicines on Academy Premises (Procedures)

8.4 Where clinically possible, medicines should be prescribed in dose frequencies, which enable them to be taken outside of the child's academy hours.

8.5 The Academy should only accept prescribed medicines if these 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 still be in date, but will generally be available to the Academy inside an insulin pen or a pump, rather than in its original container. Medicines will not be administered unless there is agreement from the Parent/Carer either verbal or written (See Appendix J: Parent/Carer Agreement to Administer Medicines and Appendix E: Managing Medicines on Academy Premises (Procedures))

8.6 All medicines should be stored safely. Children should know where their medicines are at all times and be able to access them immediately. Where relevant, they should know who holds the key to the storage facility. Medicines and devices such as asthma inhalers and blood glucose testing meters should always be readily available to children and not locked away, the Adrenaline Auto Injector (AAI) pen will be stored in a named box containing delivery instructions and kept as close to the child as possible as will epilepsy rescue medication (buccal midazolam). This will be stored in a named bum bag, which will be taken with the child by a supporting adult wherever the child goes (see 8.8). This is particularly important to consider when outside of the Academy premises, e.g. on trips. (See Appendix E: Storage 4: Managing Medicines on Academy Premises (Procedures))

8.7 When no longer required, medicines should be returned to the parent to arrange for safe disposal and also sharps boxes, which should always be used for the disposal of needles and other sharps.

8.8 A child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence.

Monitoring arrangements may be necessary. The Academy should otherwise keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff should 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.

8.9 Academy staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines should do so in accordance with the prescriber's instructions. The Academy should keep a record 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 to be administered within the Academy should be noted in Academy.

## **RECORD KEEPING**

Governing bodies should ensure that written records are kept of all medicines administered to children.

Records offer protection to staff and children and provide evidence that agreed procedures have been followed. Parents should be informed if their child has been unwell at school.

## **EMERGENCY PROCEDURES**

9.1 All Academy staff will be made aware of what to do in an emergency, and key staff will know what constitutes an emergency for individual children.

9.2 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 pupils in the school should know what to do in general terms, such as informing a teacher immediately if they think help is needed.

9.3 Emergency procedures will be clearly displayed for Academy staff, and any incidents relating to any medical conditions will be recorded. (See Appendix F: What to do in a Medical Emergency)

9.4 If a child needs to be taken to hospital, staff should stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance. Schools need to ensure they understand the local emergency services' cover arrangements and that the correct information is provided for navigation systems.

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/803956/supporting-pupils-at-school-with-medical-conditions.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/803956/supporting-pupils-at-school-with-medical-conditions.pdf)

## **DAY TRIPS, RESIDENTIAL VISITS AND SPORTING ACTIVITIES**

10.1 All children at the Academy will be actively supported to engage in trips and visits and sporting activities, and will not be prevented from doing so. The Academy will make all reasonable adjustments to ensure that all children can participate in line with their own abilities unless any evidence from a clinician states that this is not possible.

10.2 Where there may be a concern about the health and safety of a child participating in an activity, appropriate advice will be sought and a risk assessment will be completed in order to ensure the safety of the child.

## **UNACCEPTABLE PRACTICE**

11.1 No child will be prevented from easily accessing inhalers and medication and administering their own medication when and where necessary.

11.2 The Academy will never assume that two children with the same health condition require the same treatment and care.

11.3 The Academy will not ignore the views of the child or their parents/carers or ignore medical evidence. However, these views may be challenged in line with our child protection safeguarding policy.

11.4 The Academy will not send children with medical conditions home frequently or prevent them from staying for normal Academy activities, unless specified in their individual healthcare plan. Similarly, no child will be penalised for their attendance record if it relates to their medical condition.

11.5 The Academy will not prevent any child with a medical condition from managing their condition effectively by drinking, eating or taking toilet or other breaks.

11.6 The Academy will not require or make parents/carers feel obliged to attend the Academy to administer medicines, provide medical support or meet their toileting needs. Neither will we require the parent/carer to accompany the child on trips or to engage in any other aspect of Academy life.

11.7 The Academy will not penalise children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments.

## **LIABILITY AND INDEMNITY**

12.1 The Academy is appropriately insured to cover staff supporting children with medical conditions. Our insurance policy is available to view at the Academy office.

12.2 All Academy activity is covered by our insurance policy except where a member of Academy staff is proven to have been negligent.

## **COMPLAINTS**

13.1 Should parents/carers, children or any other person concerned with the healthcare of a child have a concern, they should raise this with the class teacher in the first instance who will seek support and advice from the Senior Leadership Team. The Academy will respond in line with our complaints procedure (available from the Academy office or website).

## **APPENDICES**

Appendix A: Medical Condition flowchart

Appendix B: Individual HealthCare Plan (IHCP) Flowchart

Appendix C: Individual Healthcare plan (IHCP)

Appendix D: Signposting Information for Schools Seeking Support for Complex Childhood Medical Conditions

Appendix E: Managing Medicines on Academy Premises (Procedures)

Appendix F: What to do in a Medical Emergency

Appendix G: Guidance on Infectious Diseases in Schools procedures

Appendix H: Staff Opt-Out Form (Administering Medicines)

Appendix I: Staff Training Record (Administration of Medicines)

Appendix J: Parent/Carer Agreement for the Administration of Medicines

Appendix K: Model Letter for Parents and Carers IHCP

Appendix L: Record of Medicines Administered to All Children

Appendix M: Record of Medicines Administered to an Individual Child

Appendix N: Emergency Inhalers in Schools

Appendix O: Temporary injury or illness form

Form 6: PARENTAL REQUEST FOR THE ADMINISTRATION OF MEDICINES FOR RESIDENTIAL TRIPS

Guidance on how to give a baby or small child medicine including Calpol