

# The University Academy Holbeach

Principal: Sheila Paige B.A. (Hons.)

# Supporting pupils with medical conditions policy

Adopted by the Governing Body:

To be reviewed every 2 Years Review date: November 2025

# Contents

1. Aims	2
2. Legislation and statutory responsibilities	2
3. Roles and responsibilities	3
4. Equal opportunities	4
5. Being notified that a child has a medical condition	4
6. Individual healthcare plans	4
7. Managing medicines	5
8. Emergency procedures	6
9. Training	6
10. Record keeping	7
11. Liability and indemnity	7
12. Complaints	
13. Monitoring arrangements	
14. Links to other policies	7
Appendix 1: Being notified a child has a medical condition	
Appendix 2: Proforma for individual health care plan	
Appendix 3: Proforma for parental agreement for setting to administer medicine	
Appendix 4: Contacting emergency services	

Appendix 5: Example of risk assessment proforma

### 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

The governing board will implement this policy by:

- >Making sure sufficient staff are suitably trained
- >Making staff aware of pupil's condition, 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)

The named person with responsibility for implementing this policy is Miss R Daw

# 2. Legislation and statutory responsibilities

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

It is also based on the Department for Education's statutory guidance: <u>Supporting</u> <u>pupils at school with medical conditions</u>.

This policy also complies with our funding agreement and articles of association.

# 3. Roles and responsibilities

#### 3.1 The board of governors

The board of governors has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing body 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 Principal

The Principal 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, or delegate an appropriate member of staff to contact, the Children's Community Nursing team 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 Children's Community Nursing team
- 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 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 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

#### 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 Children's Community Nursing Team and other healthcare professionals

Our Children's Community Nursing Team may 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.

Healthcare professionals, such as GPs and paediatricians, may liaise with the schools nurses and notify them of any pupils identified as having a medical condition.

# 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.

Appendix 6 contains an example Risk Assessment proforma for pupil medical needs.

# 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 1.

### 6. Individual healthcare plans

The Principal has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to Miss R Daw and Miss L Curtis.

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 not a consensus, the Principal will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the Children's Community Nursing Team, specialist or paediatrician, who can best advice 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 Plan (EHCP). If a pupil has SEND but does not have a statement or EHC plan, the SEND 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 board and designated member of staff, will 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
- Contact information of relevant healthcare professionals involved with oversight of the pupil's medical and health needs
- >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 Principal 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

See Appendix 2 for the proforma for use in creating an Individual Health Care Plan.

See Appendix 3 for the proforma for parental agreement for setting to administer medicine.

# 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

See Appendix 3 for a proforma for parental agreement for setting to administer medicine.

# 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

<u>Controlled drugs</u> are prescription medicines that are controlled under the <u>Misuse of</u> <u>Drugs Regulations 2001</u> 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. If a pupil is prescribed a controlled drug, parents must ensure that the school has the correct dosage and instructions to be able to dispense this safely in school. The school should have written permission to do so and the controlled drug must be kept in a secure cupboard in the school medical room. Only named staff should have access and be able to dispense the drug. Any training necessary to do so should be given to named staff before dispensing a controlled drug. A record of any doses used and the amount will be kept.

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.

Pupils will be allowed to carry their own medicines and relevant devices wherever possible (e.g. asthma inhaler) and where they are not deemed potentially harmful if obtained and/or used by others.

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 or has been discussed and agreed with parents
- 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.

Appendix 5 outlines the procedure for contacting the emergency services.

# 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 Principal and SENDCO. 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 governing board will ensure that written records are kept of all medicine administered to pupils. 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. Liability and indemnity

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

We will ensure that we are a member of the Department for Education's risk protection arrangement (RPA) for academies.

# 12. Complaints

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

# 13. Monitoring arrangements

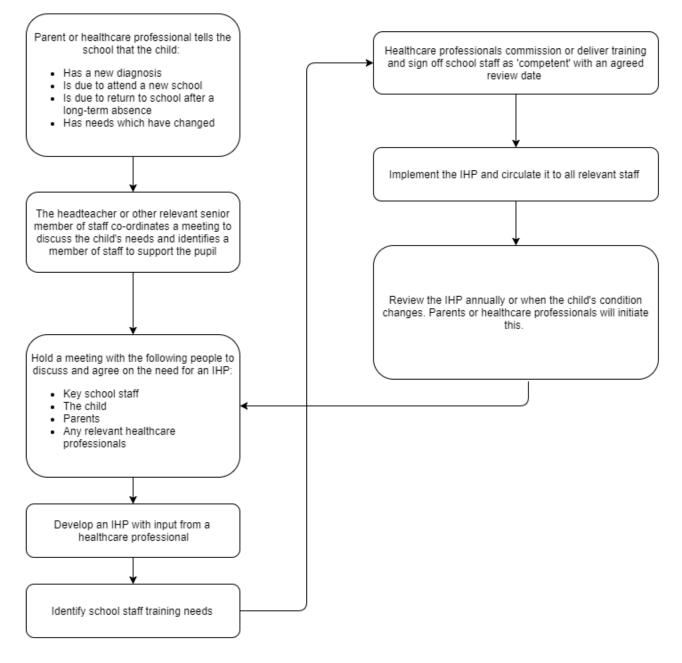
This policy will be reviewed and approved by the governing board every 2 years.

# 14. Links to other policies

This policy links to the following policies:

- >Accessibility plan
- >Complaints
- > Equality information and objectives
- >Medical treatment
- >Health and safety
- > Safeguarding and child protection
- > Special educational needs and disability information report and policy
- >Children with health needs who cannot attend school
- >Intimate Care Policy

#### Appendix 1: Being notified a child has a medical condition



### Appendix 2: Proforma for Individual Health Care Plan

# Individual healthcare plan

Name of school/setting	University Academy Holbeach
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)	

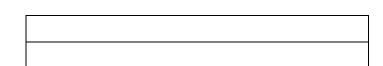
#### **Clinic/Hospital Contact**

Name Phone no.

#### G.P.

Name

Phone no.



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

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 3: Proforma for parental agreement for setting to administer medicine

#### 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	
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

#### **Contact Details**

Name

Daytime telephone 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\_\_\_\_

### **Appendix 4: Contacting Emergency Services**

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

1. Your telephone number (University Academy Holbeach is 01406 423042)

2. Your name

3. Your location as follows: University Academy Holbeach, Park Road, Holbeach, Spalding, Lincolnshire PE12 7PU.

4. State what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code

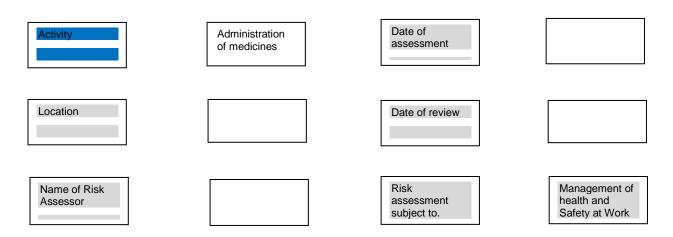
5. Provide the exact location of the patient within the Academy setting

6. Provide the name of the child and a brief description of their symptoms and any medical information relating to the pupil (e.g. diabetic, epileptic)

7. Inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient

#### Appendix 5: Example Risk Assessment Proforma

This risk assessment template can be used for specialist areas where a model template does not exist.



**Instructions for Use:** This blank risk assessment should be used for any area where there is not already a template risk assessment in place. You will need to ensure that you have identified the common hazards and recognised those people who could be at risk and whether they have any individual requirements. Consider all of the standard controls i.e. those things you need to do to reduce the risk and then confirm all of the standard controls are in place. Check if there is anything further that you may need to do. If all of these components are completed the level of risk for these hazards will have been reduced to the lowest acceptable level. An action plan should be completed if further mitigation is required following the assessment.

#### Original risk assessments must be kept for the life of the risk assessment plus a period of 3 years. On completion a hard copy should be printed off and placed in your local/site health and safety folder.

The "Supporting Pupils with Medical Conditions" document produced by the DfE and published in December 2015 for implementing into schools, includes the provision of administration of medicines to pupils. This risk assessment should be completed as part of the process to assist in identifying the specific hazards and control measure that need to be put in place to ensure medication is administered, managed and stored safely and effectively in schools by competent staff.

What are the hazards?	Who might be harmed and how?	What are you doing?	Do you need to do anything else to manage this risk?	Action by whom?	Action by when?	Done

#### Action Plan for Risk Assessment

Action Plan to be completed based on the findings of risk assessment. The following actions are to be undertaken to reduce the risk level as far as reasonably practical and to ensure that all of the standard controls and local arrangements are in place.

No	Hazard not fully controlled	Performance status Imminent <mark>High</mark> /Medium Low/Very low	Action required	Person responsible	Target Date	Date of completion
1						
2						
3						
4						
5						
6						
7						
8						