

This Policy has been adopted and approved by Gippswyk Community Educational Trust and has been adapted for use by Copleston High School.

SUPPORTING PUPILS WITH MEDICAL CONDITIONS POLICY	
Approved by GCET	19.7.2022
Written	May 2023
Ratified by Copleston LGB	26.6.23
Date of next Review	Summer Term 2024
Responsible Officer	Paul Walker – Assistant Principal/ Henry Palmer - DSL
Policy Number	SACS8

Definition of a Parent

- All biological parents, whether they are married or not.
- any person who, although not a biological parent, has parental responsibility for a child or young person - this could be an adoptive parent, a step-parent, guardian or other relative
- any person who, although not a biological parent and does not have parental responsibility, has care of a child or young person.

A person typically has care of a child or young person if they are the person with whom the child lives, either full or part time and who looks after the child, irrespective of what their biological or legal relationship is with the child.

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
- Those with medical conditions are not limited by their condition, and have equal opportunities to learn and work in a safe and healthy environment.
- The Trust Board will implement this policy by:
 - Ensuring sufficient staff are suitably trained
 - Raising awareness 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 Andy Green, Principal, Copleston High School.

The Principal should make clear which staff member(s) have the delegated responsibility for the day-to-day management of this for students with medical and health conditions. This responsibility may be delegated to the school's SENCO or, where there is one in post, the school nurse or equivalent (for example, a first aid lead). The responsibility can be delegated to a member of staff other than those suggested, as long as they are fully aware that they have this role and understand the requirements.

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 Trust 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: Supporting pupils at school with medical conditions.

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

3. Roles and Responsibilities

3.1 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
- 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 an appropriate manner.
- 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

3.2 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.

3.3 Parents

Parents will:

- Provide the school with sufficient and valid 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.
- Discuss with the School where they may feel that changes should be made to the provision of care offered.

3.4 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.
- Pupils 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.
- Healthcare professionals, such as GPs and paediatricians, will liaise with the school 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.

5. Procedures

When the school is notified that a student has a medical condition the person with delegated responsibility will be made aware without delay. School will then make contact with the family and any identified healthcare professionals in order to obtain a full picture of the student's needs, including social and emotional needs as well as educational, and use this to identify support that can be put in place. If any student develops a medical or health condition, or requires first aid or emergency support, the school will understand that this need that has not been pre-identified or brought to the their attention.

5.1 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.

5.2. Individual healthcare plans

- The Principal has overall responsibility for the development of IHPs for pupils with medical conditions, but may delegate this to a designated person in school.
- 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 school nurse, specialist or paediatrician, who can best advise on the pupil's specific needs.
- IHPs will be linked to, or become part of, special educational needs (SEN) or 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 Trust Board and the Head Teacher, 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.
 - 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 Teacher 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

5.3. 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 1
- If the medicine has been prescribed for use by the child by a medical professional
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

See Appendix 3: Protocol for Administering Medicines – Checklist for Staff.

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. See Appendix 2: Record of Medicines Received and Returned.

5.4 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.

5.5 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.

5.6 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

5.7. 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.

6. 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.

A record of staff who have received specialist medical training will be completed. See Appendix 6: Record of Staff Medical Training.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Principal. 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.

7. Record Keeping

The school will ensure that written records are kept of all medicine administered to pupils. See recording templates Appendix 5: Administering Medicines to an Individual Child and Appendix 6: Recording Template Administering Medicines to all Children e.g. vaccinations.

Records will be securely stored with the attendance officer and medical needs will be added to the pupil data on SIMs.

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

IHPs and supporting documents/information will be stored on individual pupil's record on SIMs and all staff are to be made aware.

8. Liability and Indemnity

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

GCET is insured through Zurich and full indemnity is provided to staff providing appropriate medical care through the public liability section of the policy. Further information is

provided via the following link:

<https://newsandviews.zurich.co.uk/strategic-focus/supporting-schools-pupils-medical-conditions/>

9. Complaints

Parents with a complaint about their child's medical condition should discuss these directly with the Principal in the first instance. If the Principal 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 Trust Board every year.

14. 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

Appendix 1



REQUEST FOR THE SCHOOL TO ADMINISTER MEDICATION

The school will not give your child medicine unless you complete and sign this form and the Principal has agreed that school staff can administer the medication.

Legal Disclaimer

I understand that neither the Principal nor anyone acting on his authority, nor the Governing Body will be liable for any illness or injury to my child arising from the administering of the medication or drugs unless caused by the negligence of the Principal, the person acting on his authority or the Governing Body as the case may be.

Signed _____ Date _____

Relationship to the Student _____

<i>For Admin Use only</i>			
Name of Recipient		Date of Receipt	
Details of Medication Received			
Signed Parental Consent Form Received	YES / NO		
Passed on to		Date collected by Sick Bay Staff	
Logged onto School System by (name)		Date Logged	

PLEASE SIGN AND HAND IN AT MAIN RECEPTION

'The school is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.'



REQUEST FOR THE SCHOOL TO ADMINISTER MEDICATION

The school will not give your child medicine unless you complete and sign this form and the Principal has agreed that school staff can administer the medication.

Please read and sign below and the Legal Disclaimer overleaf.

Student Details

Surname			
Forename(s)			
Address			
		Postcode	
Date of Birth		Form Group	
Condition or illness			

Medication Details

Name/Type of Medication (as described on the container)	
Directions for use and dosage	
Timings for Medication to be Administered	
Warnings / Special Precautions (if any)	
Side Effects (if any)	
Procedures to take in an emergency	

Contact Details

Name of Parent / Guardian	
Relationship to Student	
Address (if different to above)	
Contact Number	

My child's Doctor has prescribed the above medication to be administered OR
I have supplied my child with the above medication to be administered by the school
(delete as appropriate)

I understand that I must deliver the medication personally to the School Reception. I accept this is a service which the school is not obliged to undertake.

Signed _____ Date _____

Relationship to Student _____

Appendix 2: Record of Medicines Received and Returned

[illegible]

APPENDIX 3 – PROTOCOL FOR ADMINISTERING MEDICINES – CHECKLIST FOR STAFF

Protocol for the administration of medicine

- Check name on medication (never give medication to anyone other than the person named on the prescription)
- Check dosage method and timings
- Check expiry date
- Check medicine is in its original container and clearly labelled (do not accept medication that has been decanted into another container)
- Check details on possible side effects are included with medication (usually a leaflet)
- Check storage requirements (refrigeration)
- Follow any specialist requirements/other instructions e.g. take on an empty stomach, do not crush tablets etc. If applicable consult individual health care plan. In addition if administering non-prescription paracetamol follow WSCC protocol
- Keep records of administration – parental consent template B and admin of medicines template C & D
- If giving a controlled drug ensure administration is witnessed and signed by witness on template B. Before administering medication

Check you are giving the:

- RIGHT MEDICATION to the RIGHT CHILD
- Medication is the RIGHT STRENGTH • You are giving the RIGHT DOSE
- You are administering via the RIGHT ROUTE (i.e. oral, apply to skin etc.) and are following any specific instructions i.e. take with food
- You are administering at the RIGHT TIME of day – with the correct interval between doses
- And the medication is IN DATE

**Appendix 4: MODEL LETTER INVITING PARENTS TO CONTRIBUTE TO INDIVIDUAL HEALTH CARE
PLAN DEVELOPMENT**

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom.

Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely

Appendix 5: Administering Medicines to an Individual Child

Name of school	
Name of child	
Date medicine provided by parent	
Year /Form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Date	Time given	Dose given	Staff Signature	Pupil Signature	Witness Signature

Appendix 6: Recording Template Administering Medicines to all Children e.g. vaccinations

Name of School:

Date	Pupil's Name	Time	Name of Medicine	Dose given	Any reactions	Signature	Print Name