



Queensway Primary School

Supporting Pupils with Medical Conditions Policy

November 2019

Approved by the Governors of Queensway School on

Date	Amendment	Signed

To be reviewed every 3 years

1.0 INTRODUCTION

At Queensway School, we aim to ensure that all children with medical conditions, in terms of both physical and mental health, are supported so that they can play a full and active role in school life, remain healthy and achieve their academic potential. We want all pupils to be healthy and to feel safe. It is also important that parents / carers feel confident that effective support for their child's medical condition will be provided.

Pupils with long-term and complex medical conditions may require ongoing support, medicines or care whilst at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. In making decisions about support for medical conditions, Queensway School will utilise established relationships with relevant local health services. Advice from healthcare professionals will be fully considered and listened to, and the views of parents / carers and the pupils themselves will be valued.

Long-term absences due to health problems can affect children's educational attainment, impact on their ability to integrate with their peers and affect their general well-being and emotional health. Short-term and frequent absences, including those for appointments connected with a pupil's medical condition (which can often be lengthy), also need to be effectively managed and appropriate support put in place to limit the impact on the child's educational attainment and emotional and general well-being.

Some children with medical conditions may be considered disabled under the definition set out in the Equality Act 2010. Where this is the case, the school's Governing Body will comply with their duties under that act. Some children may also have special educational needs (SEN) and have an Education, Health and Care (EHC) Plan which brings together health and social care needs, as well as their special educational provision. For children with SEN, this guidance should be read in conjunction with the special educational needs and disability (SEND) code of practice¹.

The Children and Families Act 2014 places a duty on schools to make arrangements for children with medical conditions. Pupils with medical conditions have the same right of admission to school as other children and cannot be refused admission or excluded on medical grounds alone.

This policy sets out the arrangements we have at Queensway School to ensure all pupils with medical conditions are supported and have full access to school life and the educational and wider opportunities we offer.

1.1 OUR AIMS

This policy aims to ensure that:

- All children with medical conditions are supported to allow them to access the same education as other pupils, including attending school trips, visits and sporting activities.
- Parents / carers feel confident that the school will provide effective support for their child's medical condition and that all pupils feel safe.

¹ <https://www.gov.uk/government/publications/send-code-of-practice-0-to-25>

- The views of parents / carers and pupils with medical conditions will be listened to and acted on appropriately.
- Effective relationships with health services will be established and maintained in order to seek and fully consider any advice they offer in terms of supporting children with medical conditions.
- Staff are adequately trained to provide the support that pupils in their care need. They are equipped to respond sensitively, discretely and quickly to situations where a medical condition requires support.

Through the Headteacher, Queensway School's Governing Body will implement this policy by:

- Making sure sufficient staff are suitably trained.
- Making staff aware of a pupil's condition, where appropriate.
- Making sure there are cover arrangements so that a staff member is always available to support pupils with medical conditions.
- Providing supply staff with appropriate information about the policy and relevant pupils.
- Developing and monitoring individual healthcare plans.

1.2 LEGISLATION AND STATUTORY RESPONSIBILITIES

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on 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: [Supporting pupils at school with medical conditions](#).

1.3 ROLES AND RESPONSIBILITIES

1.3.1 The Governing Body

The Governing Body 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.

1.3.2 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 healthcare plans, including in contingency and emergency situations.
- Take overall responsibility for the development of individual healthcare plans.
- Ensure that pupils with medical conditions are clearly identified on 'risk / analysis forms' for educational out of school activities.
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way.
- 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.

1.3.3 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 may include the administration of medicines. 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 medical needs of pupils they teach. All staff will know what to do and will respond accordingly when they become aware that a pupil with a medical condition needs help and support. The school takes pupil privacy and confidentiality very seriously. Therefore, some medical information about a child will only be shared with staff on a need-to-know basis.

School staff will not give non-prescribed medication to children except in special cases at the complete discretion of the Headteacher. All medication given will be recorded by the member of staff administering the medication, who will also oversee the medication being given. Administration of medication will be carried out by a member of the school office team or a specifically trained member of staff.

1.3.4 Parents / Carers

Parents / carers will:

- Provide the school with sufficient and up-to-date information about their child's medical needs and medical history. This may include providing copies of health letters from supporting professionals, such as the child's GP or paediatrician.
- In some cases, be the first to notify the school that their child has a medical condition.
- Keep the school informed about any changes to their child's health.
- Complete a 'Parental Agreement form' giving consent for school to administer medicine before bringing medication into school. It is imperative that parents do not send their child to school with any form of medication without the knowledge of school staff.
- Provide the school with the medication their child requires, ensuring that the medicine held in school is always in date.
- Collect any leftover medicine at the end of the course, term or year as appropriate.
- Discuss medications with their child prior to requesting that school staff administer the medication.
- Be involved in the development and review of their child's individual healthcare plan (if needed) and may be involved in its drafting. Parents / carers must ensure that they and / or a nominated adult are contactable at all times.
- Carry out any action they have agreed to as part of the implementation of the individual healthcare plan, for example provide medicines and equipment.

1.3.5 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 an individual healthcare plan if this is needed. They are also expected to comply with their individual healthcare plan.

Following discussions with parents / carers, children who are competent will be encouraged to take responsibility for managing their own medical procedures whilst in school. This will always be with supervision from a trained member of staff.

1.3.6 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. Wherever possible, this will be before the pupil starts school.

The school nursing service may support staff to implement a child's individual healthcare plan and provide advice. They can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs.

Healthcare professionals, such as GPs and paediatricians, will provide information and advice to Queensway School where consent from the child's parents / carers has been given. They too may provide advice on developing individual healthcare plans. Specialist local teams may be able to offer support for children with particular conditions, for example asthma, diabetes and epilepsy.

1.3.7 The Local Authority

The Local Authority is responsible for providing support, advice and guidance, including suitable training for school staff to ensure that the provision specified within individual healthcare plans can be delivered effectively. Local authorities should work with schools to support pupils with medical conditions to attend full time. Where pupils would not receive a suitable education in a school setting because of their health needs, the local authority has a duty to make other arrangements.

1.4 EQUAL OPPORTUNITIES

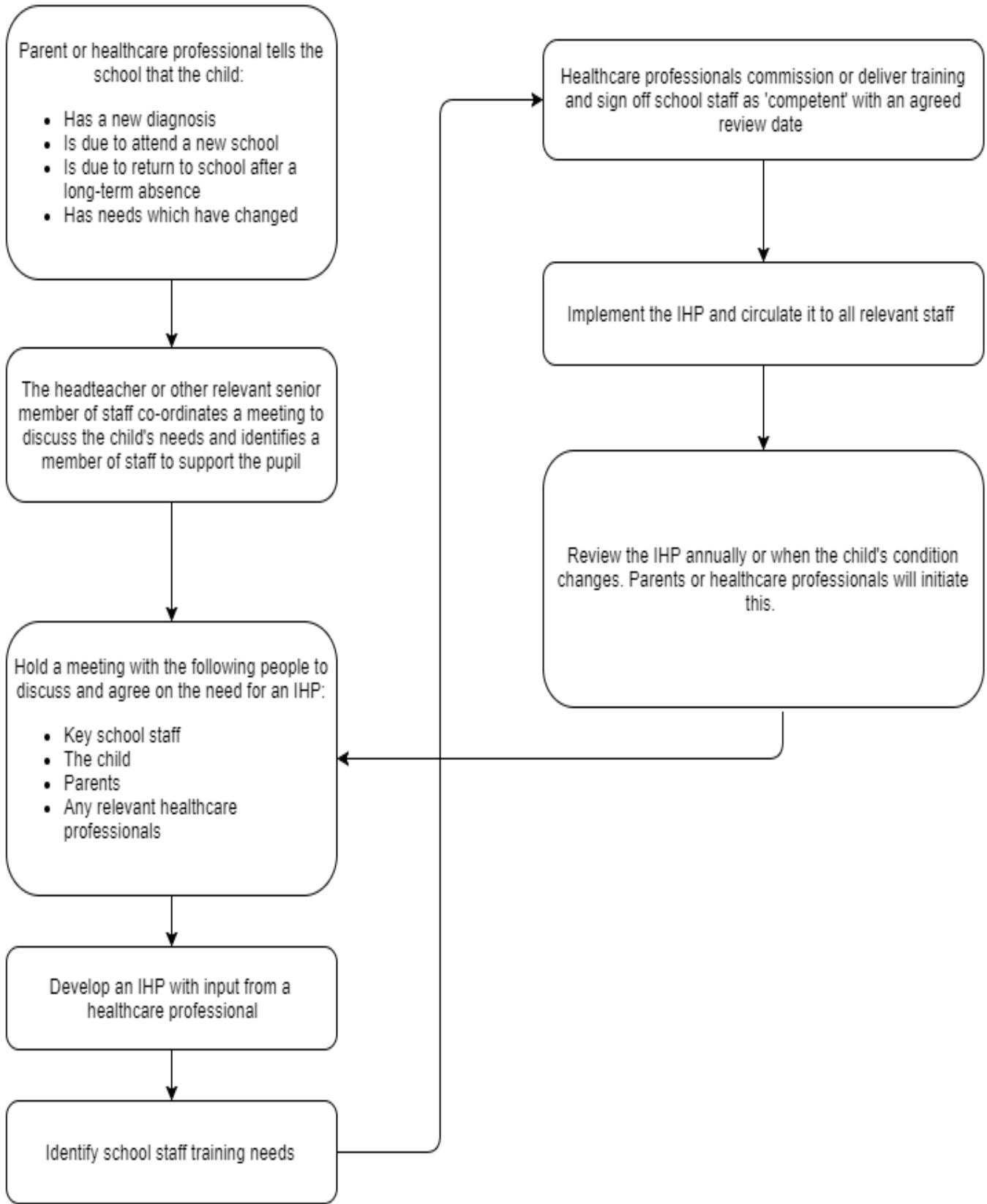
Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully 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.

Queensway School will make arrangements for the inclusion of pupils in trips, visits and sporting activities, with any adjustments as required unless evidence from a clinician (such as a GP) states that this is not possible.

1.5 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 Individual Healthcare Plan. The school will make every effort to ensure that arrangements are put into place within two weeks, or by the beginning of the relevant term for pupils who are new to our school.

The flow chart overleaf details the procedure that will be followed when notification is received that a pupil has a medical condition. *Please note: The abbreviation 'IHP' stands for 'individual healthcare plan'.*



1.6 INDIVIDUAL HEALTHCARE PLANS

Individual healthcare plans can help to ensure that pupils with medical conditions are supported effectively. The Headteacher has overall responsibility for the development of individual healthcare plans for pupils with medical conditions. At Queensway School this has been delegated to the school's Inclusion Manager.

Individual healthcare plans are confidential documents. 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 the aim is to capture the steps the school must take to help a child manage their condition and overcome any potential barriers to their education. Individual healthcare plans will provide clarity about:

- What needs to be done;
- When; and
- By whom

Not all pupils with a medical condition will require an individual healthcare plan. It will be agreed with a healthcare professional and the parents / carers when an individual healthcare plan would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the Headteacher 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. The pupil will be involved wherever appropriate. Individual healthcare plans will be linked to, or become part of, any Education, Health and Care (EHC) Plan. If a pupil has a special educational need (but does not have an EHC Plan), this will be acknowledged in the individual healthcare 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 Headteacher will consider the following when deciding what information to record on individual healthcare 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. 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 / carers and the Headteacher for medication to be administered by a member of staff or self-administered by the pupil during school hours, with supervision from a trained member of staff.
- 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 / carer or the pupil themselves, 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

1.7 MANAGING MEDICINES

Medicines will only be administered at school:

- a) When it would be detrimental to the pupil's health or school attendance not to do so; **and**
- b) Where we have written consent from the parent / carer.

A staff member giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents / carers will always be informed.

Children under 16 years of age will never be given medicine containing aspirin unless prescribed by a doctor.

Where clinically possible, parents / carers should request that medicines for their child are prescribed in dose frequencies which enable them to be taken outside of school hours.

The school will only accept prescribed medicines that are:

- In-date
- Labelled clearly with the child's first and last name
- Provided in the original container, as dispensed by the 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 schools inside an insulin pen or a pump, rather than in its original container;

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. This is particularly important to consider when outside of school premises, e.g. on school trips.

It is the parent / carers responsibility to ensure that medication held in school for their child is in date. Medicines will be returned to parents to arrange for safe disposal when no longer required.

Sharps boxes will be used for the disposal of needles and other sharps.

Inhalers will be returned to a child's parent / carer at the end of terms 2, 4 and 6 (three times a year) so that the plastic housing can be cleaned and air dried. There are no emergency inhalers in school and so it is the parent / carers responsibility to ensure that their child's inhaler is in school at all appropriate times and is in full working order.

1.8 CONTROLLED DRUGS

Controlled drugs are prescription medicines that are controlled under the Misuse of Drugs Regulations 2001 and subsequent amendments. All 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.

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. Queensway School will otherwise keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff 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.

School 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. A record will be kept 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 at school should be noted.

1.9 PUPILS MANAGING THEIR OWN NEEDS

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures, under supervision of a trained member of staff. This will be discussed with parents / carers and it will be reflected in a child's individual healthcare plan.

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 individual healthcare plan and inform parents so that an alternative option can be considered, if necessary.

2.0 UNACCEPTABLE PRACTICE

Queensway School staff will use their discretion and judge each case individually with reference to the pupil's individual healthcare 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 individual healthcare plan.
- 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, for example 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.
- Prevent pupils from participating or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, for example by requiring parents / carers to accompany their child.
- Administer, or ask pupils to administer, medicine in school toilets.

2.1 EMERGENCY PROCEDURES

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' individual healthcare 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.

2.2 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 individual healthcare plans. 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. Training will be kept up to date and will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils.
- Fulfil the requirements in the individual healthcare plan
- Help staff to understand 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.

2.3 RECORD KEEPING

The Headteacher and Inclusion Manager will ensure that written records are kept of all medicine administered to pupils. Records offer protection to staff and children and provide evidence that agreed procedures have been followed. Parents / carers will be informed if their child has been unwell at school. Individual healthcare plans are kept in a readily accessible place (the school office), but in a secure location to protect confidentiality.

The school ensures that the pupil's confidentiality is protected in line with the General Data Protection Regulation (GDPR) and will only share this information with relevant members of staff and healthcare professionals as appropriate.

2.4 LIABILITY AND INDEMNITY

The Governing Body will ensure that the appropriate level of insurance is in place and that this reflects the school's level of risk.

2.6 PROCEDURE FOR COMPLAINTS

The school has a standard complaints procedure. Should parents or pupils be dissatisfied with the school, the first point of contact should be the Class Teacher who may refer the query to the Head Teacher. If this does not bring a satisfactory conclusion the complaint will be heard by a panel comprising members of the Governing Body.

2.7 LINKS TO OTHER POLICIES

This policy links to the following policies:

- Accessibility Policy and Plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding
- Special educational needs information report and policy

2.8 MONITORING ARRANGEMENTS

This policy will be reviewed every 3 years by the Headteacher and the Resources Committee. Any alterations that come from this review will be discussed and ratified by the full Governing Body.

Chair of Resources Date

Head Teacher Date