



Supporting pupils with medical conditions policy

QES & QESstudio

Approved by:
Local Governing Body

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1. Aims

QES and QESstudio are values-led schools. We believe that all children should have equality of access to all aspects of school life and every experience that we have to offer. At QES and QESstudio we understand that medical conditions requiring support at school can affect quality of life and may be life-threatening.

Our schools will support pupils with medical conditions so that they have full access to education, including school trips and physical education.

This policy aims to:

- › Make sure that pupils, staff and parents/carers understand how our school will support pupils with medical conditions
- › Set out the roles and responsibilities for everyone in the school community in regard to pupils with medical conditions
- › Set out the procedure for creating, reviewing and managing individual healthcare plans (IHCPs)
- › Set out how we will manage medicines in school
- › Reassure parents/carers that the school will help their child feel safe, supported and included

The named people with responsibility for implementing this policy are the Executive Headteacher and the Deputy Headteacher.

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 boards to make arrangements for supporting pupils at their school with medical conditions.

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

3. Roles and responsibilities

3.1 The governing board

The governing board has ultimate responsibility for making arrangements to support pupils with medical conditions.

The governing board will:

- › Review this policy in a timely manner, in line with the relevant legislation and requirements
- › Make sure that the policy sets out the procedures to be followed whenever the school is notified that a pupil has a medical condition
- › Monitor practice, and staff training, in regards to pupils with medical conditions, in line with this policy

The governing board delegates the day-to-day implementation of this policy to Executive Headteacher, David Waugh.

3.2 The Executive Headteacher

The Executive Headteacher will:

- › Make sure all staff are aware of this policy and understand their role in its implementation
- › Make sure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHCPs), including in contingency and emergency situations
- › Make sure that all staff who need to know are aware of a child's condition
- › Take overall responsibility for the development and monitoring of individual healthcare plans (IHCPs)
- › Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- › Manage cover arrangements in the case of staff absence or turnover, to make sure a suitable staff member is always available, and supply staff are briefed appropriately about pupils' medical needs
- › Approve risk assessments for school visits and school activities outside the normal school timetable that involve provision for pupils with medical conditions
- › Contact the relevant medical professional or service in the case of any pupil who has a medical condition that may require support at school, but who we don't believe has yet been brought to their attention.
- › Make sure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date
- › The Executive Headteacher may delegate these responsibilities to other appropriate staff members.

› 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/carers

Parents/carers will:

- › Provide the school with sufficient and up-to-date information about their child's medical needs
- › Provide evidence of appropriate prescription and written permission for medicines to be administered by staff
- › Be involved in the development and review of their child's IHCP, and may be involved in its drafting
- › Carry out any action they have agreed to as part of the implementation of the IHCP, e.g. provide medicines and equipment, replace medications when they have expired, and ensure they or another nominated adult are contactable at all times

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 IHCPs. They are also expected to comply with their IHCPs.

3.6 Healthcare professionals

Healthcare professionals 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. They may also support staff to implement a child's IHCP.

Healthcare professionals, such as GPs and paediatricians, should liaise with our school and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHCPs.

4. Equal opportunities

The school will adhere to the legal responsibilities under the Equality Act 2010 and will not unlawfully discriminate against any pupils. Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents/carers and any relevant healthcare professionals will be consulted.

5. Being notified that a child has a medical condition

When the school is notified that a pupil has a medical condition, the school will decide whether the pupil requires an IHCP.

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.

6. Individual healthcare plans (IHCPs)

The Executive Headteacher has overall responsibility for the development of IHCPs for pupils with medical conditions.

The day-to-day responsibility has been delegated to the Deputy Headteacher (Safeguarding and Inclusion) who oversees the First Aid Team.

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 IHCP. It will be agreed with the parents/carers and if appropriate, a healthcare professional, when an IHCP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the Deputy Headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents/carers and if appropriate, a relevant healthcare professional, such as the GP, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHCPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has special educational needs (SEN) but does not have an EHC plan, the SEN will be mentioned in the IHCP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The Deputy Headteacher and the Lead Health Administrator, will consider the following when deciding what information to record on IHCPs. They may also discuss some of the below with pastoral and SEND colleagues:

- › 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, 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 Deputy Headteacher for medication to be administered by a member of staff, or self-administered by the pupil, during school hours
- › Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments
- › Where confidentiality issues are raised by the parent/carer or pupil, the designated individuals to be entrusted with information about the pupil's condition
- › What to do in an emergency, including who to contact and contingency arrangements

7. Managing medicines

Prescription 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/carers' written consent

The person administering the medicine will keep a written record. Parents/carers will always be informed on the same day the medicine has been administered, or as soon as reasonably possible.

The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents/carers.

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 recommended and maximum dosages for the pupil's age, and when the previous dosage was taken.

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 taken to a pharmacy for safe disposal when no longer required.

7.1 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. This is likely to apply to pupils aged 16 and over. 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.

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/carers and it will be reflected in their IHCPs.

Pupils will be allowed to carry their own medicines and relevant devices where necessary and appropriate. This will be discussed with parents/carers and the pupil themselves. Pupils will only be allowed to carry their own medicines where this has been discussed and agreed and recorded on their IHCP.

Pain relief must not be carried by pupils, unless agreed on an individual basis and recorded on the pupil's IHCP. This applies to all year groups.

IHCPs will include procedures for staff to follow if a pupil refuses to carry out a necessary procedure or take medicine.

IHCPs may also include a witnessed medication consumption protocol. This will be determined on an individual basis according to the needs of the pupil and with prior discussion and agreement with the pupil, key staff and the parents/carers. Where it is decided that a witnessed medication protocol is necessary, it should be accompanied by a risk assessment. Care should always be taken by staff to ensure that witnessed medication consumption is done in an age-appropriate way for the pupil, which is calm and respectful.

7.3 Unacceptable practice

Although school staff will use their discretion and judge each case on its merits with reference to the pupil's IHCP, they will keep in mind that it is not generally acceptable practice 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

- 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 IHCPs
- Send an ill pupil to the school office or medical room unaccompanied or with someone unsuitable (e.g. a fellow pupil who is not old or responsible enough)
- Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupil, including with toileting issues. No parent/carer should have to give up working because the school is failing to support their child's medical needs
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents/carers to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

8. Emergency procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHCPs will clearly set out what constitutes an emergency and will explain what to do.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent/carer arrives or accompany the pupil to hospital by ambulance.

9. Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHCPs. 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 the Deputy Headteacher and Lead Healthcare Administrator. 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 IHCPs
- Help staff to have an understanding of the specific medical conditions they are being asked to support with, their implications and preventative measures

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 that 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 for as long as these pupils are at the school. Parents/carers will be informed if their child has been unwell at school.

IHCPs are kept in a readily-accessible and secure place that 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.

The school is insured through the Department for Education's Risk Protection Arrangement (RPA), which provides liability cover for staff supporting pupils at school with medical conditions.

12. Complaints

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

13. Monitoring arrangements

This policy will be monitored by the Deputy Headteacher (Safeguarding and Inclusion).

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

14. Links to other policies

This policy links to the following policies:

- Complaints
- Equality information and objectives
- First Aid
- Health and safety
- Safeguarding and Child Protection
- Special educational needs information report and policy