



**KING EDWARD VI  
CAMP HILL  
SCHOOL FOR GIRLS**

*Educational excellence for our City*

## Supporting pupils with medical conditions policy

<b>Responsible Board/Committee</b>	Full Governing Body
<b>Policy Type</b>	School
<b>Policy Owner</b>	Lyndsey Orr, SENDCo
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### 1. Aims

This policy aims to ensure that:

- › Pupils, staff and Parents/Carers 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 pupils' conditions, 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
- › Assisting with developing and monitoring individual healthcare plans (IHPs)

**The named person with responsibility for implementing this policy is Lyndsey Orr.**

### 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.

It is also based on the Department for Education (DfE)'s statutory guidance on [supporting pupils with medical conditions at school](#).

## 3. Roles and responsibilities

### 3.1 The Governing Board

The governing board has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing board 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 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 (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
- › 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.

First Aiders will make sure student medication is kept in individual student packs.

First Aiders will make the medication available upon request.

All staff have access to the medication cupboard.

School cannot be responsible for reminding students to take medication.

First Aiders or Reception Team will contact Parent/Carer to collect the student if they are too unwell to remain in school.

First Aiders or Reception Team will contact Parent/Carer if a student does not have medication but requires it (eg Piriton).

First Aiders, Reception Team, Head of Year or Senior Leader will contact Parent/Carer if a student says they have a medical condition, but the school is not aware of it.

SENDCO will contact the school nursing service in the case of any pupil who has a medical condition that may require support at school, where required

Staff will not be able to provide virtual learning for students who are unwell or in hospital, in line with our remote learning policy.

Staff will provide work on Google Classroom for students who are absent on long term illness or in hospital, if they are well enough to access work, and if they are no longer supported by hospital education, if requested by the Parent/Carer.

On return from long term absence, the Parent/Carer should organise to meet with a Senior Leader and/or Head of Year and/or SENDCo (whoever is most appropriate), to discuss a return to school and suitable support for a safe return.

### **3.4 Parents/Carers**

Parents/Carers will:

- Complete and sign the Medication Information Form and send it to the school office, with the required medication clearly marked with the student's name and form. The information will then be placed in an individual student pack.
- Provide the school with sufficient and up-to-date information about their child's medical needs, replacing where necessary.
- Dispose of any out of date or unused medication.
- Keep school up to date with their child's medical condition or changes to their Individual Health Plan, putting any changes in writing.
- Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times
- If the child is on long term absence for illness or in hospital for long term absence, students will follow the support from the educational team connected to the hospital and provided by them. Eg. James Brindley School. Lesson work can also be accessed by Google Classroom if this has been requested to the school by Parents/Carers.
- Pain medication such as Paracetamol and Ibuprofen can be stored with First Aiders in individual student packs, if Parents/Carers provide. This must be clearly labelled with the student's name and form. Painkillers are not purchased by the school.
- On return from long term absence, the Parent/Carer should organise to meet with a Senior Leader and/or Head of Year and/or SENDCo (whoever is most appropriate), to discuss a return to school and a suitable support plan for a safe return.
- Discuss any required controlled drugs with the First Aiders at school, and bring this to Reception for secure storage.

### **3.5 Pupils**

Pupils with medical conditions will often be best placed to provide information about how their condition affects them.

Pupils will:

- Carry emergency prescribed medication with them at all times (eg. Epi-pen)
- Request their medication from the office when required. Office staff cannot be responsible for reminding them.
- Administer their own medication.
- Inform parents/carers if they have used their medication or if it needs replacing.
- Be fully involved in discussions about their medical support.
- Comply with their IHPs.
- If on long term absence for illness or in hospital for long term absence, where they are well enough to, students will follow the support from the educational team connected to the hospital and provided by them. Eg. James Brindley School. Lesson work can also be accessed by Google Classroom if this has been requested to the school by Parents/Carers.

### **3.6 External school nursing service 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. They may also support staff to implement a child's IHP.

Healthcare professionals, such as GPs and paediatricians, will liaise with the school's nursing service and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

#### 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/Carers and any relevant healthcare professionals may 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 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 (IHPs)

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

The headteacher has overall responsibility for the further development of the IHPs, which are made by the above team, for pupils with emergency medical conditions. This editing has been delegated to: **Clair Gardner**

Plans will be reviewed if there are any changes updated by the Parent/Carer, if there is evidence that the pupil's needs have changed. Any updates should be in writing from the Parent/Carer.

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/Carers when an IHP would be inappropriate or disproportionate. This will be based on medical evidence.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has SEND but does not have an EHC plan, the SEND will be mentioned in the IHP where appropriate.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The school nursing team, specialist or paediatrician, in conjunction with, where appropriate, the governing board (and the headteacher / Clair Gardner when editing if required), 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/Carers for medication to be self-administered by the pupil during school hours where required, or in an emergency, plans made for the administration of an epi-pen or other medication by prior arrangement and through prior training.
- › 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.

## 7. Managing medicines

Student medication that is stored in the school medication cabinet 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 only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the Parents/Carers.**

Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken.

The school will only accept prescribed medicines that are:

- › In-date
- › Labelled with student's name and form
- › Provided in the original container, as dispensed by the pharmacist, and include instructions for self-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 request access to them immediately from the front office. 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/Carers to arrange 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.

If a student is prescribed controlled drugs, this should be discussed by the parent/carer with the school, to ensure any required training is organised and carried out.

All controlled drugs are to be handed in to Reception by the parent/carer.

All controlled drugs are to be 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 IHPs, where appropriate.

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, where appropriate, and inform Parents/Carers 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/Carers
- › Ignore medical evidence or opinion (although this may be challenged)
- › 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 (where medical proof is received at [absence@kechg.org.uk](mailto:absence@kechg.org.uk))
- › Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively, where suggested by a medical team
- › 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 Parents/Carers 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

## 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/Carer arrives, or accompany the pupil to hospital by ambulance.

The school will ensure that students with an emergency medical condition, disability or temporary medical disability, will have a Personal Emergency Evacuation Plan (PEEP) where required, to ensure safe evacuation in an emergency.

**The named person with responsibility for implementing this PEEP is Kristin Bunting.**

## 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 receipt of or review of IHPs.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the headteacher / 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
- › Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures
- › Fulfil the requirements in the IHPs

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 understand their role in implementing this policy, 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 emergency medicine administered to pupils.

IHPs are stored by relevant staff, and relevant information shared with staff through the SEND/Inclusion list so staff are aware. This may be shared through a SEND Pupil Passport or Health Passport if the student does not have SEND.

## **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 details of the school's insurance policy can be obtained upon request via email, to [head@kechg.org.uk](mailto:head@kechg.org.uk)

## **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 headteacher in the first instance. If the headteacher cannot resolve the matter, they will direct Parents/Carers 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
- › Health and safety
- › Remote learning
- › Safeguarding
- › School information report
- › Special Educational Needs and Disabilities policy



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

