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1. Aims

This policy aims to ensure that:

- Pupils, staff and parents/carers understand how the Federation will support pupils with medical conditions
- Pupils with medical conditions are properly supported 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 so that someone is always available to support pupils with medical conditions
- Providing supply teachers with appropriate information about this policy and relevant pupils
- Developing and monitoring individual healthcare plans (IHPs)

The named person with responsibility for implementing this policy is the Executive Headteacher, Mr Carl Rogers.

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 schools with medical conditions.

It is also based on the Department for Education's statutory guidance, Supporting pupils at school with medical conditions.

3. Roles and responsibilities

3.1 The governing body

The governing board has ultimate responsibility for making arrangements to support pupils with medical conditions. It will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting pupils with medical conditions.

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
- Ensure that a sufficient number of trained staff are available to implement this policy and deliver all IHPs, including in contingency and emergency situations
- Ensure that all staff who need to know are aware of a pupil's condition
- Take overall responsibility for the development of IHPs, delegating day-to-day coordination appropriately to the Head of School and/or SENCO
- Make sure that staff are appropriately insured and know that they are insured to support pupils in this way
- Contact the school nursing service where a pupil may require support at school but has not yet been brought to the attention of the school nurse
- Ensure systems are in place for obtaining information about a pupil's medical needs and keeping it up to date

3.3 Heads of School and SENCOs

Heads of School and SENCOs will support the Executive Headteacher by coordinating arrangements at their school, contributing to the development and review of IHPs, ensuring relevant information is shared securely with staff, and monitoring that agreed support is in place.

3.4 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, although they will not be required to undertake a medical procedure or administer medicine without appropriate agreement, information and training.

Staff who take on responsibility for supporting pupils with medical conditions will receive sufficient and suitable training and achieve the necessary level of competency before doing so. Teachers will take account of the needs of pupils with medical conditions whom they teach. All staff will know how to respond when a pupil with a medical condition needs help.

3.5 Parents/carers

Parents/carers 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 contribute to its drafting
- Carry out actions agreed as part of the IHP, including providing medicines and equipment, and ensure they or another nominated adult can be contacted

3.6 Pupils

Pupils with medical conditions will often be best placed to explain how their condition affects them. They will be involved, as far as appropriate, in discussions about their medical support needs and the development of their IHP, and will be expected to follow agreed arrangements.

3.7 School nurses and other healthcare professionals

The school nursing service should notify the school when a pupil has been identified as having a medical condition requiring support in school, before the pupil starts wherever possible. School nurses may support staff to implement an IHP. Other healthcare professionals, such as GPs, specialists and paediatricians, may liaise with the school nursing service and advise on developing IHPs.

4. Equal opportunities

The Federation will actively support pupils with medical conditions to participate in school trips, visits and sporting activities and will not prevent them from doing so because of their condition.

Each school will consider reasonable adjustments needed to enable full and safe participation. Risk assessments will take account of necessary arrangements, in consultation with the pupil, parents/carers and relevant healthcare professionals.

5. Being notified that a child has a medical condition

When a school is notified that a pupil has a medical condition, it will follow the process in Appendix 1 to decide whether an IHP is required. The school will make every effort to put arrangements in place within two weeks, or by the beginning of the relevant term for pupils who are new to the school.

6. Individual healthcare plans (IHPs)

The Executive Headteacher has overall responsibility for the development of IHPs. Day-to-day coordination may be delegated to the relevant Head of School and/or SENCO.

Plans will be reviewed at least annually, or earlier where the pupil's needs change. They will be developed in the pupil's best interests and will set out what needs to be done, when and by whom.

Not every pupil with a medical condition will require an IHP. The school, parents/carers and an appropriate healthcare professional will agree whether a plan would be appropriate and proportionate. If agreement cannot be reached, the Executive Headteacher will make the final decision, taking account of the available medical evidence.

Plans will be developed in partnership with the school, parents/carers and a relevant healthcare professional, such as the school nurse, specialist or paediatrician. The pupil will be involved wherever appropriate. IHPs will be linked to, or form part of, an education, health and care (EHC) plan where one exists. Where a pupil has special educational needs but no EHC plan, those needs will be reflected in the IHP.

The level of detail will depend on the complexity of the condition and the support required. The following will be considered:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication, dose, side effects, storage, treatments, time, facilities, equipment, testing, access to food and drink, dietary requirements and relevant environmental issues
- Specific support for educational, social and emotional needs, including management of absence, rest periods and support to catch up
- The level of support required, including in emergencies, and arrangements for monitoring any self-management
- Who will provide support, their training needs, confirmation of proficiency where necessary, and cover arrangements

- Who needs to know about the condition and required support
- Written permission for staff administration or pupil self-administration during school hours
- Separate arrangements for trips and activities outside the normal timetable, including risk assessments
- Confidentiality arrangements and the people entrusted with information
- Emergency actions, contacts and contingency arrangements

7. Managing medicines

Prescription medicines will be administered at school only when it would be detrimental to the pupil's health or attendance not to do so and the school has written parental/carers consent. The exception is where medicine has been prescribed without the knowledge of the parents/carers.

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

The school will accept prescribed medicines only when they are:

- In date
- Labelled
- Provided in the original container, as dispensed by the pharmacist, with instructions for administration, dosage and storage

Insulin may be accepted in an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Pupils will know where their medicines are and be able to access them immediately. Medicines and devices such as inhalers, blood-glucose testing meters and adrenaline auto-injectors will always be readily available and not locked away. Medicines no longer required will be returned to parents/carers for safe disposal.

7.1 Controlled drugs

Controlled drugs are prescription medicines controlled under the Misuse of Drugs Regulations 2001 and subsequent amendments. A pupil prescribed a controlled drug may possess it where competent to do so, but must not pass it to another pupil. Other controlled drugs will be held securely, with access limited to named staff. They will remain accessible in an emergency, and records will be kept of doses administered and the amount held.

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 reflected in the IHP. Pupils will be allowed to carry their own medicines and devices wherever possible.

Staff will not force a pupil to take medicine or undergo a necessary procedure if they refuse. Staff will follow the IHP and inform parents/carers so that an alternative can be considered where necessary.

7.3 Unacceptable practice

Staff will use professional judgement and consider each case individually with reference to the pupil's IHP. It is generally unacceptable to:

- Prevent pupils from readily accessing and using their inhalers, medicines or devices when needed
- Assume that every pupil with the same condition requires the same treatment
- Ignore the views of the pupil or parents/carers
- Ignore medical evidence or opinion, although it may be appropriately challenged
- Send pupils home frequently for reasons associated with their medical condition, or prevent them from remaining for normal activities including lunch, unless specified in the IHP
- Send an unwell pupil to the school office or medical room unaccompanied or accompanied by an unsuitable person
- Penalise pupils for attendance where absence is related to their medical condition, such as hospital appointments

- Prevent pupils from drinking, eating or taking toilet or other breaks needed to manage their condition
- Require parents/carers, or make them feel obliged, to attend school to administer medication or provide medical support, including toileting support
- Prevent participation, or create unnecessary barriers to participation, in any aspect of school life, including trips, for example by requiring a parent/carer to accompany the pupil
- Administer, or ask pupils to administer, medicine in school toilets

8. Emergency procedures

Staff will follow the school's normal emergency procedures, including calling 999 when appropriate. Each IHP will clearly define what constitutes an emergency and the action to take. If a pupil needs hospital treatment, a member of staff will stay with the pupil until a parent/carer arrives or accompany the pupil to hospital by ambulance.

9. Training

Staff responsible for supporting pupils with medical needs will receive suitable and sufficient training. Training needs will be identified during the development or review of IHPs, and staff providing support will be included in relevant discussions.

Relevant healthcare professionals will identify the type and level of training required and agree this with the Executive Headteacher or delegated senior leader. Training will be kept up to date and will:

- Ensure staff are competent and confident in supporting the pupil
- Fulfil the requirements of the IHP
- Help staff understand the specific conditions, their implications and preventative measures

Healthcare professionals will confirm staff proficiency in a medical procedure or in providing medication where appropriate. All staff will receive awareness training so that they understand this policy and can recognise and respond quickly when a problem occurs. New staff will receive this information during induction.

10. Record keeping

The governing board will ensure that written records are kept of medicines administered to pupils for as long as those pupils attend the school, in accordance with applicable records-management requirements. Parents/carers will be informed if their child has been unwell at school. IHPs will be kept securely but readily accessible to staff who need them.

11. Liability and indemnity

The governing board will ensure that appropriate insurance is in place and reflects the Federation's level of risk. The Federation will confirm that liability cover extends to staff administering medication and will arrange any additional cover required for particular healthcare procedures before those procedures are undertaken.

12. Complaints

Parents/carers with concerns about the school's support for their child's medical condition should discuss them with the relevant Head of School in the first instance. If the concern cannot be resolved, the Executive Headteacher should be contacted. Formal complaints will be considered under the Federation's complaints procedure.

13. Monitoring arrangements

This policy will be reviewed annually, or earlier if statutory guidance changes, and approved by the governing board.

14. Links to other policies

This policy links to the following Federation policies and information:

- Accessibility Plan
- Complaints Policy
- Equality information and objectives
- First Aid Policy
- Health and Safety Policy
- Safeguarding and Child Protection Policy
- SEND Information Report and SEND Policy
- Educational Visits Policy

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

