



## **Supporting Pupils with Medical Conditions Policy**

### **Introduction**

#### **Our Vision**

To

enable each child  
to fulfil their potential  
academically, creatively, emotionally, physically and spiritually  
in a safe, happy and supportive environment.

At Balshaw Lane Primary, we are committed to the provision of an inclusive learning environment for all children. Similarly, we strive to ensure that all children have equal opportunities to participate in all aspects of school life and fulfil their potential. The governors and staff are very keen to promote the wellbeing and academic attainment of any children with medical conditions so that they flourish.

In most cases, a child's medical condition will be notified to the school by the parents. This may be when the child starts school but can also be during any year group. Sometimes the school may notice something which the staff will inform parents about so that medical advice can be sought. As part of our safeguarding focus, we may pursue this with parents if we believe that medical appointments are required but not followed up.

### **Pupils with SEND**

Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. In this case, the governing body will comply with its duties under that Act. Some may also have special educational needs (SEND) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For pupils who have medical conditions that require EHC plans, the school will ensure that these comply with the SEND code of practice.

### **Staff training**

The headteacher is responsible for ensuring that sufficient staff are suitably trained. Training is reviewed regularly and always when staff are informed of a new medical condition. Training for healthcare plans will be specific to the child's needs and may require specialist advice.

Staff must not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect requirements within individual healthcare plans).

Other regular training includes:

- First aid
- Paediatric first aid
- Defibrillator use
- Diabetes training
- Asthma
- EpiPen and anaphylaxis training



## **Staff awareness**

Staff are made aware of a child's condition in a number of ways:

- Discussion when a child starts school/ a condition is discovered
- Training
- Photo information about individual children in the staffroom
- Photo information about individual children in the kitchen, where related to food choices
- Regular updates to staff via staff meetings, TA and welfare staff meetings
- Office staff are made aware for communication with home and for emergency situations

## **Staffing cover**

When a supply teacher is teaching a class, that teacher will be made aware of any medical conditions in the class. They will be asked to read the class information sheet detailing such children. Colleagues (teachers and TAs) will support the supply teacher.

Prior to any trained member of staff leaving school, preparation will be made to cover that role to ensure that there are no gaps in provision.

## **Healthcare plans**

Children with long-term medical conditions will have a supportive healthcare plan, devised with medical professionals and the parents. Usually, the school nurse will draw up the plan initially with the parents. The headteacher is responsible for the development of the plan in school, liaising with colleagues, parents and medical professionals.

Healthcare plans are reviewed at least annually, or earlier if evidence is presented that the child's needs have changed. They are developed with the child's best interests in mind and ensure that the school assesses and manages risks to the child's education, health and social wellbeing, and minimises disruption.

When deciding what information should be recorded on individual healthcare plans, the school will consider the following:

- 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. movement around school
- specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete tests, use of rest periods or additional support in catching up with lessons, counselling sessions;
- the level of support needed including in emergencies. If a child is self-managing their medication, this should 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 child'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 child's condition and the support required;
- arrangements for written permission from parents and the 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 child can participate, e.g. risk assessments;
- where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition; and
- what to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

### **Pupils with allergies**

Pupils with allergies are recorded on a register that all staff, including the catering staff have a copy of. There are photographs of each child who has an allergy in the lunchtime welfare folder, the staff room and the kitchen along with the treatment that each child would require if they are exposed to these allergies.

Any children who have severe allergies that may require the use of a Jext pen or an EpiPen will have their emergency bag containing these with them at all times. The staff who work with these children will have up to date, relevant training provided by the school nurse.

Children with severe allergies will have care plans in place that have been created in cooperation with the child's doctor, parents and school staff. These care plans will be reviewed annually.

In order to support our children with allergies, we will not accept food which has been home-prepared by parents to give out to the children (eg birthday cakes). In non-covid times, we may give out wrapped sweets/chocolate, sent in by parents, for birthdays. Children with allergies may be given a separate treat provided by their parents.

Any food provided by teachers in class will be checked that it meets dietary needs in the class. If necessary, the teacher will have a discussion, with the parents of a child who has an allergy, before the activity eg food technology.

### **Procedure to be followed when notification is received that a pupil has a medical condition**

Transitional arrangements are made when children move from nursery or to high school. This involves a transition meeting with parents, nursery/high school staff and, usually, with a medical professional. The healthcare plan will be reviewed to ensure that it is suitable for the new school. Arrangements should be in place in time for the start of the relevant school term.

If a child is reintegrated following a period of absence or if a pupil's needs change, a similar meeting will be held to ensure that any necessary adaptations are made to the healthcare plan.





In other cases, such as a new diagnosis or children moving to a new school mid-term, every effort should be made to ensure that arrangements are put in place within two weeks.

The school will not wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be made about what support to provide, based on the available evidence. This will normally involve some form of medical evidence and consultation with parents. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place.

In all circumstances, arrangements for any staff training or support will be made.

### **Roles and responsibilities**

Supporting a child with a medical condition during school hours is not the sole responsibility of one person.

- The governing body will oversee the implementation of the policy and ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. The governors will also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.
- The headteacher will ensure that the school's policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. The headteacher will ensure that all staff who need to know are aware of the child's condition. They should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. This may involve recruiting a member of staff for this purpose. The headteacher will have overall responsibility for the development of individual healthcare plans. She will also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way. They should contact the school nursing service in the case of any child 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.
- Parents should provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents are key partners and are involved in the development and review of their child's individual healthcare plan, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.
- Pupils will be involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other pupils will often be sensitive to the needs of those with medical conditions.
- Any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach.



School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of staff knows how to respond accordingly when they become aware that a pupil with a medical condition needs help.

- The parents are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they should do this before the child starts at the school. They may support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training.
- Other healthcare professionals, including GPs and paediatricians, should notify the school nurse when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing individual healthcare plans. Specialist local health teams may be able to provide support in schools for children with particular conditions (e.g. asthma, diabetes, epilepsy).

### **The child's role in managing their own medical needs**

After discussion with parents, children who are competent may be encouraged to take responsibility for managing their own medicines and procedures. This would be reflected within individual healthcare plans.

Children should be able to access their medicines for self-medication quickly and easily. Children who can take their medicines themselves or manage procedures will require an appropriate level of supervision. If it is not appropriate for a child to self-manage, relevant staff should help to administer medicines and manage procedures for them.

If a child refuses to take medicine or carry out a necessary procedure, staff will not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents would be informed so that alternative options can be considered.

### **Managing medicines on school premises**

The school's Medicine Policy is clear about the procedures to be followed for managing medicines and should be read alongside this policy.

### **Record keeping**

Records of administered medicine are kept in the medicine file in the office. A note is also written in the child's planner to indicate that the child has had the medicine.

### **Emergency procedures**

If there is an emergency, the member of staff or the office will phone for an ambulance. In every case, the head/deputy and office will be made aware as soon as possible. Staff will follow any instructions given to them over the phone by the ambulance service. Access into the school grounds will be cleared for the ambulance.

Where a child has an individual healthcare plan, it will clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other pupils in school know what to do in general terms, such as informing a teacher immediately if they think help is needed.

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



### **Day trips, residential visits and sporting activities**

Pupils with medical conditions are supported in order to participate in school trips and visits, or in sporting activities, and so that they are not prevented from doing so.

Preparatory staff discussions will take place before the visit/activity to ensure that any reasonable adjustments are made to support the child. These discussions will normally include parents, either to prepare for adjustments, or to reassure them. If necessary, the school or specialist (eg diabetes) nurse will be consulted for advice beforehand.

The child's needs and any adjustments will be referred to as part of the risk assessment for the visit/activity.

### **Insurance**

The local authority insurance policy provides liability cover relating to the administration of medication.

### **Complaints**

If parents or pupils are dissatisfied with the support provided, they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

The procedures are available on the school's website.

**Signed :** *H Gregson*

**Date:** September 2022

**To be reviewed:** September 2023





## Annex A: Model process for developing individual healthcare plans

