

SUPPORTING PUPILS WITH MEDICAL CONDITIONS POLICY

Name of Responsible Manager / Headteacher:	Mr John D F Martin
Policy Owner:	Mrs T Lund
Date of Policy Approval by Governing Body:	September 2023
Date of last Policy Review:	October 2025
Date of next Policy Review:	October 2026

Aims

This policy aims to ensure that:

- Pupils, staff and parents 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
- Developing and monitoring individual healthcare plans (IHPs)

The named person with responsibility for implementing this policy is Mrs T Lund.

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's statutory guidance on supporting pupils with medical conditions at school.

Roles and responsibilities

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.

The Headteacher and Inclusions Manager

The headteacher and inclusions manager 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
- 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

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 consider 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.

Parents

Parents will:

- Provide, in writing, 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 be involved in its drafting

- 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

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

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. 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 nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

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.

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: Being notified a child has a medical condition

See Appendix 1a: Model letter inviting parents to contribute to individual healthcare plan (IHP) development

Individual healthcare plans (IHPs)

The Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to the **Inclusions Manager**.

See Appendix 2: Individual Healthcare Plan (IHP) Form

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 IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no 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.

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.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing board, the Headteacher and the Inclusions Manager, 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 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 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

Managing medicines on School Premises

The administration of medicines is the overall responsibility of the parents/carers. Where clinically possible, medicines should only be prescribed in dose frequencies which enable them to be taken outside of school hours. 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' **written** consent. Forms are available at the school office or can be downloaded or completed online from the school website. **See Appendix 3: Parents Agreement for Administration of Medicine in School**
- Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.
- Anyone giving a pupil any medication (for example pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed.

The school will only accept and administer 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.

There is a documented tracking system to record all medicines received in and out of the school premises. The tracking system used in The Children's Services Medication Tracking Form and is managed in a spreadsheet.

The name of the child, dose, expiry and shelf life dates will be checked before medicines are administered.

On occasions where a child refuses to take their medication, the parents will be informed at the earliest available opportunity.

Children who are able to use their inhalers themselves are encouraged to carry it with them. If the child is too young or immature to take personal responsibility for their inhaler, staff should make sure that it is stored in a safe but readily accessible place, and clearly marked with the child's name.

We will only administer non-prescribed medicines on a written request from the parent if they are in a clearly marked identifiable packaging and only on a short-term basis. Where the school have concerns they will seek further guidance.

Any homeopathic remedies to be administered will require a letter of consent from the child's doctor and will be administered at the discretion of the headteacher.

Emergency medicine will be stored in a safe location but not locked away to ensure they are easily accessible in the case of an emergency. Types of medicine include:

- Inhalers for asthmatics
- Injections of adrenaline for acute allergic reactions
- Injections of Glucagon for diabetic hypoglycaemia

Sanitary products will be stored in the medical room and given to pupils, who have started or are on their periods, when required. Staff will liaise with parents/carers where necessary if a pupil starts their period whilst at school. This will be treated in a discrete manner and with reassurance.

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 pupil has been prescribed a controlled drug, this will 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.

Storage

All medication other than emergency medication will be stored safely in a locked cabinet, where the hinges cannot be easily tampered with and cannot be easily removed from the premise.

Where medicines need to be refrigerated, they will be stored in the office refrigerator in a clearly labelled container. Children may not have access to the office at any time.

Children will be made aware of where their medicines are at all times and be able to access them immediately where appropriate. Where relevant, they should know who holds the key to the storage facility.

Medicines such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to children and not locked away. We will also ensure that they are readily available when outside of the school premises or on school trips.

Storage of medication whilst off site will be maintained at a steady temperature and secure. There will be appropriately trained staff present to administer day-to-day and emergency medication and copies of individual health care plans will be taken off site to ensure appropriate procedures are followed.

Disposal

It is the responsibility of the parents/carers to dispose of their child's medicines. It is our policy to return any medicines that are no longer required including those where the date has expired to the parents/carers. Parents/carers will be informed of this when the initial agreements are made to administer medicines. Medication returned to parent/ carers will be documented on the tracking medication form.

Sharps boxes will be in place for the disposal of needles. Collection and disposal of these will be by the parent who will remove them from site.

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 and it will be reflected in their IHPs.

Pupils will be allowed to carry their own medicines and relevant devices if needed. 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 and inform parents so that an alternative option can be considered, if necessary.

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. **See Appendix 4: Prescribed Medicines Record Sheet**

Parents will be informed if their pupil has been unwell at school.

IHPs are kept in a readily accessible place which all staff are aware of.

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; or 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 IHPs
- 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
- 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, 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 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 to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

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.

Where a child has an individual healthcare plan, this will clearly define what constitutes an emergency and provide a process to follow. All relevant staff will be made aware of the emergency symptoms and procedures. We will ensure other children in the school know what to do in the event of an emergency i.e. informing a teacher immediately if they are concerned about the health of another child.

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

When local emergency services are called, staff will give precise details **see Appendix 5: Contacting emergency services**

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 IHPs. 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 Inclusions Manager. 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 IHPs
- 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.

A staff training record will be updated with the type of awareness training undertaken, the date of the training and the competent person providing the training.

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 are:

Hampshire County Council self-insure and, as part of the Insurance SLA, provide an indemnity to staff that administer or are required to administer medication or a medical procedure to pupils. This indemnification requires the School to have the parents/guardian's permission and for the member of staff to have received training on the administration of the medication or medical procedure.

The Insurance cover requires Schools to have considered the specific training needed for staff looking after pupils with specific medical conditions and also any general procedures / training required to everyday and/or periodic medical issues.

Complaints

Parents with a complaint about their child's medical condition should discuss these directly with the class teacher in the first instance. If the class teacher cannot resolve the matter, they will direct parents to the phase leader. Unresolved issues at this point will be referred to the Inclusions Manager. If parents have a complaint about the provision in place for their child's medical condition and the Inclusions Manager cannot resolve the matter, the parents should follow the school's complaints procedure, available on the school website.

Monitoring arrangements

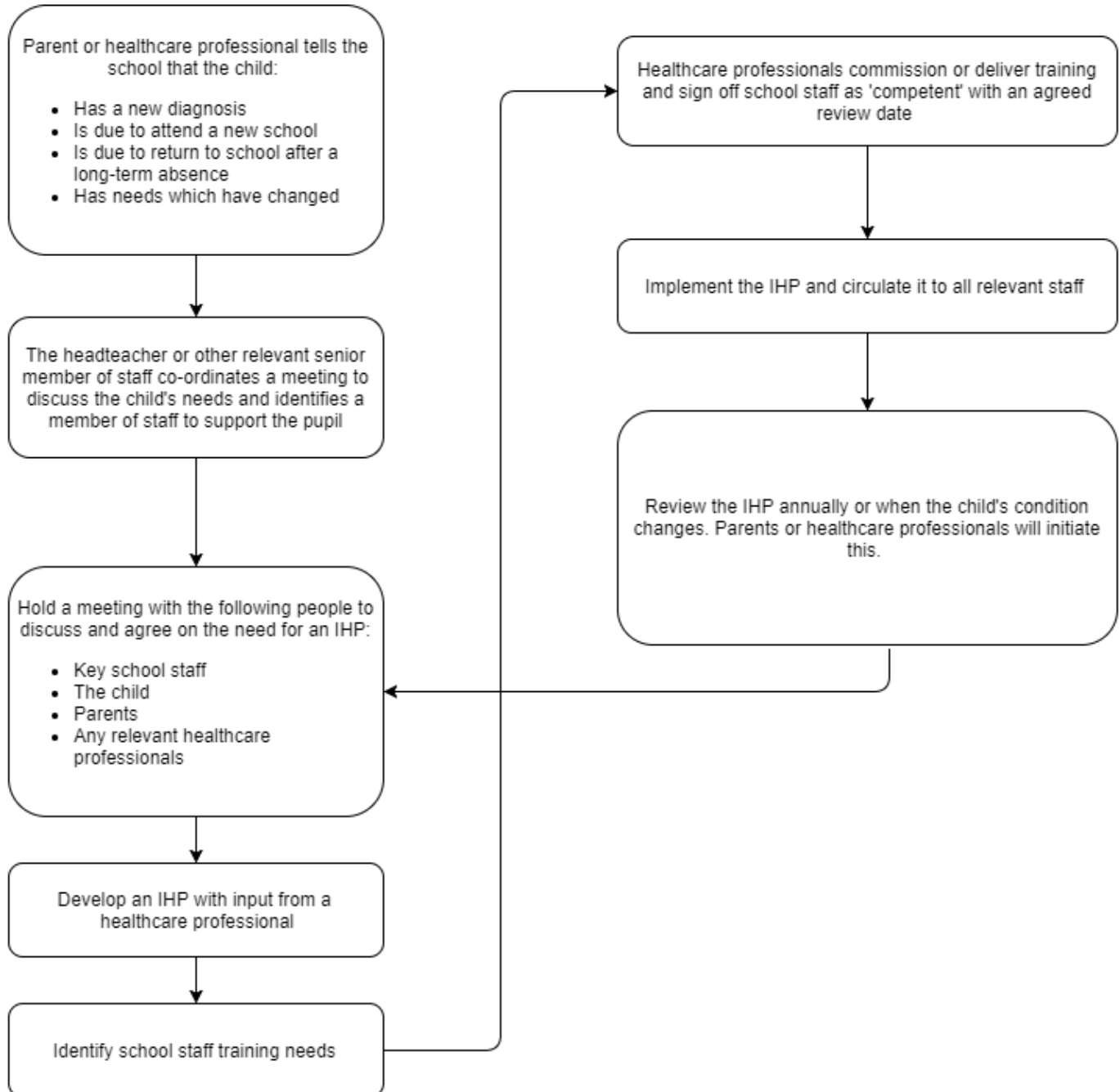
This policy will be reviewed and approved by the governing board annually, or earlier if a child with complex medical needs joins the school.

Links to other policies

This policy links to the following policies:

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

Appendix 1: Being notified a child has a medical condition



Appendix 1a: Model letter inviting parents to contribute to individual healthcare plan (IHP) development

<Insert date>

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Dear Parent,

Thank you for informing us of your child's medical condition. A copy of the school's policy for supporting pupils at school with medical conditions can be found on our website -> <https://www.castlehillprimary.net/our-school/policies>

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support your child's needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people e.g. Class Teacher, PTP, a member of the Office Team]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. We are more than happy for you contact the school by email or give us a call if this would be helpful.

Yours sincerely

Mrs T Lund
Inclusions Manager

Appendix 2: Individual Healthcare Plan (IHP) Form

Name of school	Castle Hill Primary School
Child's name	
Group/class/form	
Date of birth	DD/MM/YYYY
Child's address	
Medical diagnosis or condition	
Date	
Review date	

Family Contact Information

Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

Clinic/Hospital Contact

Name	
Phone no.	

G.P.

Name	
Phone no.	

Who is responsible for
providing support in school

Describe **medical needs** and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Medication - Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for **school visits/trips** etc

Other information

Describe what constitutes an **emergency**, and the action to take if this occurs

Who is responsible in an emergency *(state if different for off-site activities)*

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

IHP Agreement

	Class Teacher / School Contact	Parent / Guardian
Print Name		
Signature		
Date		

Appendix 3: Parents Agreement for Administration of Medicine in School

Castle Hill Primary School **will not** give your child medicine unless you complete and sign this form and the school has a policy that the staff can administer medicine. Once completed please return to the school office.

Date for review to be initiated by			
Name of School	Castle Hill Primary School		
Name of Child			
Date of Birth			
Year Group & Class			
Medical Condition/ Illness			
Medicine Type (as described on container)			
Name of Medicine (as described on container)			
Expiry Date			
Dosage and Method			
Time to Administer Medicine			
Course finish date:			
Special Precautions/ Other Instructions			
Are there any side effects that the School need to know about?			
Self-Administered? Yes/ No			
Procedure to take in an emergency			
N.B Medicines must be in the original container as dispensed by the Pharmacy. Without the original container we cannot administer the medicine.			

Parental Consent	
Name of Carer/ Parent	
Daytime Telephone Number	
Relationship to Pupil	
Home Address	
The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to the school staff administering medicine in accordance with the Supporting Pupils with Medical Conditions Policy. I will inform the school immediately in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.	
Carer/ Parent Signature	
Dated	



Appendix 4: Prescribed Medicines Record Sheet

Pupil's Full Name	Pupil's Date of Birth	Pupil's Class	Month/Year
			MM/YYYY
Medicine Name	Strength	Dosage	When to Administer / Times to Administer

* All medicine administered should be administered as per the **child's Individual Care Plan (ICP)** & in line with the **doctor's prescription on the original packaging**. Please check you are administering medicine in line with their plan.

* Any temporary variation to the administration should be put **in writing** to admin@chis.net – verbal instructions will not be accepted.

* Please **notify Admin** whenever prescribed medicine is administered so that a message can be sent to the parents via PupilAsset on the same day as it was administered.

* If a child **refuses** their medication record 'refused' in the amount column & inform the Admin, so this can be communicated to the parents/carers.

[illegible]

Appendix 5: Contacting emergency services

1. Request an ambulance – dial 9-999
2. Where possible, make this phone call in close proximity of the patient in case you need to answer any specific questions.
3. Speak clearly and slowly and be ready to repeat the information if asked.
4. Ask for an ambulance and be ready with the information below:
 - a. School telephone number: 01256 473777
 - b. Your name
 - c. School location:
Castle Hill Primary School
Greenbank Campus: Winklebury Way, Basingstoke, Hants. RG23 8BN.
Rooksdown Campus: Park Prewett Road, Basingstoke, Hants. RG24 9XA.
5. State the school postcode
6. Provide the exact location of the patient within the school setting
7. Provide the name of the child and a brief description of their symptoms
8. Provide the child's DoB
9. Reiterate to Ambulance Control the best entrance for them to use and state that the crew will be met and taken to the patient