



## Supporting pupils with medical conditions policy

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### 1. Aims

This policy aims to ensure that:

- Pupils, staff and parent / 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 Trustees will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupil's condition, 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 Medical Risk Assessments)

**The named persons with responsibility for implementing this policy are Simon Eccles and Steph Lea – Headteachers.**

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

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

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

### **3. Roles and responsibilities**

#### **3.1 The trustees**

The trustees have ultimate responsibility to make arrangements to support pupils with medical conditions. The trustees 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 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 IMRAs including in contingency and emergency situations
- › Take overall responsibility for the development of IMRAs
- › 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 pupil'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 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.

#### **3.4 Parent / carers**

Parent / carers will:

- › Provide the school with sufficient and up-to-date information about their pupil's medical needs
- › Be involved in the development and review of their child's IMRA and may be involved in its drafting
- › Carry out any action they have agreed to as part of the implementation of the IMRA e.g. provide medicines and equipment

#### **3.5 Pupils**

Pupils at Spa Bermondsey and Spa Camberwell with medical conditions are often not best placed to provide information about how their condition affects them. They will be involved as much as possible in decisions relating to their medical support needs. Given the communication difficulties associated with their autism they may find this challenging. IMRAs will be completed for all pupils with medical needs. These will be completed and agreed with relevant medical professionals, parent / carers and carers and members of the SMT.

#### **3.6 School nurses and other healthcare professionals**

EHCPs will indicate when a pupil has been identified as having a medical condition that will require support in school. This will often be before the pupil starts school, wherever possible.

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.

#### **4. Equal opportunities**

The trust 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 trust 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 parent / carers/carers and any relevant healthcare professionals will be consulted.

#### **5. Being notified that a pupil 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 Individual Medical Risk Assessments.

The school will make every effort to ensure that arrangements are put into place immediately.

See Appendix 1.

#### **6. Individual Medical Risk Assessments**

The headteacher has overall responsibility for the development of Individual Medical Risk Assessments (IMRA) for pupils with medical conditions. This has been delegated to the Deputy and Assistant headteachers in each school.

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 individual medical risk assessment. It will be agreed with a healthcare professional and the parent / carer / carer when an individual medical risk assessment would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parent / carer 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.

Individual medical risk assessments will be linked to any EHCP and will include all the relevant information indicated on the IMRA.

The level of detail in the plan will depend on the complexity of the pupil's condition and how much support is needed. Where necessary pupils will also have a **Medical Care Plan** coordinated by the school nursing service and other relevant medical specialists.

Information will be kept on:

- 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

- › 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 parent / carers 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 / carer /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 parent / carers' written consent

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

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

Anyone giving a pupil any medication will first check maximum dosages and when the previous dosage was taken. Parent / carers will always be informed.

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. These will be stored securely in the reception office.

Medicines will be returned to parent / 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](#) .

Any pupil requiring controlled drugs will be following a Care Plan coordinated by relevant external medical professionals and the headteacher. All medication is stored securely in the reception office and only named staff have access.

All medication, including any 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 parent / carers and it will be reflected in their individual medical risk assessments.

## **7.3 Unacceptable practice**

School staff should always follow the IMRA. Staff will not:

- › 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 parent / carers
- › Ignore medical evidence or opinion (although this may be challenged)
- › Send pupils 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 IMRA.
- › If the pupil becomes ill, send them to the school office or medical room unaccompanied
- › Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- › Require parent / 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 pupil'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 parent / carers to accompany their pupil
- › 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' IMRAs and relevant care plans 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 IMRAs and Care Plans. 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 Headteacher. 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 IMRA and / or Care Plan.
- › 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.

## 10. Record keeping

The trustees will ensure that written records are kept of all medicine administered to pupils. Parent / carers will be informed if their pupil has been unwell at school. Records will also be kept on CPoms / Behaviour Watch.

IMRAs are kept in a readily accessible place which all staff are aware of. These include: Sharepoint Risk Assessment Folders, Pupil Files, Class Folders.

## 11. Liability and indemnity

The trustees will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

Spa Education Trust is insured through the Department for Education's risk protection arrangement (RPA). The cover is as follows:

• Material damage	Reinstatement value of the property
• Business interruption	£10 million any one loss
• Employers' liability	Unlimited
• Third party liability	Unlimited
• Governors' liability	£10 million any one loss and any one membership year
• Professional indemnity	Unlimited
• Employee and third-party dishonesty	£500,000
• Money	Various, including cash on premises or in transit £5,000
• Personal accident	Death and capital benefits £100,000
• Legal expenses	£100,000 any one loss and any one membership year
• Cultural assets	£10,000 on any one cultural asset or £250,000 any one multiple loss

Section 4 (xi) of the policy states that staff are covered while *'undertaking medical procedures and provision of prescribed medicines subject to adherence with the statutory guidance on supporting pupils at school with medical conditions, December 2015 or similar amending statutory guidance'*.

## 12. Complaints

Parent / carers with a complaint about their child's medical condition should discuss these directly with the Headteacher. If the headteacher cannot resolve the matter, they will direct parent / carers to the school's complaints procedure.

## 13. Monitoring arrangements

This policy will be reviewed and approved by the trustees every 2 years.

## 14. 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 pupil has a medical condition**

