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## INTRODUCTION

The School has a duty to make arrangements to support students with medical conditions (*Section 100, Children and Families Act 2014*). The statutory guidance requires the Trust Board to ensure that students with medical conditions are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential, including participation in school trips and physical education.

This policy has been developed with regard to the Department of Education's statutory guidance 'Supporting Pupils with Medical Conditions, December 2015'.

### Key points:

1. The school will liaise with, and take advice, from medical professionals with regard to the needs of any individual student; it will work closely with parents/carers and students to support full access to education.
2. All students must receive a full time education, unless this would not be in their best interests because of their health needs.
3. The key focus is the needs of each individual student, and how their medical condition impacts on their school life. Some students 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 children with SEND, this guidance should be read in conjunction with the Special educational needs and disability (SEND) code of practice.
4. Arrangements should show an understanding of how medical conditions impact on a student's ability to learn, as well as increase their confidence and promote self-care.
5. Staff training should ensure that the school can provide the educational support students need and appropriate support for their medical condition.
6. No student with a medical condition should be denied admission, or prevented from taking up a place in school on the grounds that arrangements for their medical condition have not been made. However, in line with safeguarding duties, where admission or attendance would place others at unnecessary risk (e.g. infectious diseases) then the student does not have to be accepted in school.



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## 1. KEY ROLES & RESPONSIBILITIES

**The Trust Board** is responsible for ensuring:

- the school policy clearly identifies roles and responsibilities;
- the school's policy, plans, procedures and systems are developed and effectively implemented.
- arrangements are in place to support individual students with medical conditions in school;
- staff are properly trained to support students' needs.

**The Headteacher** is responsible for ensuring:

- the school's policy is developed and effectively implemented.
- procedures are in place for completion of Health Care Plans as needed;
- relevant staff are aware of students' medical needs; Cover staff and Supply teachers receive and have access to the relevant information.
- relevant staff are trained to the necessary level of competence
- commitment to supporting students to access full-time education and related opportunities.
- relevant school staff are appropriately insured by the school.

**Parents/Carers are responsible for:**

- providing the school with sufficient and up to date information about their child's medical needs;
- contributing to the IHCP;
- carrying out action agreed as part of this plan (e.g: provision of in date medicines or other equipment and ensuring that they or another nominated adult is contactable).

**The (Public Health) School Nurse (PHSN) is responsible for:**

- Providing public health advice and Level 1 & Level 2 mental health support for the school and students in dealing with various conditions.

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- advising on Health Care Plans for the individual in consultation with the parents/carers, the student, the school and any Specialist Nurse, GP or Medical consultant.
  - liaising with other medical professionals as necessary on safeguarding concerns.

This service is sometimes provided by a Specialist Nurse i.e diabetic nurse who is able to provide specialist advice and training relating to individual specific conditions

### **Robert Mays Lead First Aider is responsible for:**

- drawing up IHCP's in consultation with the parents/carers, the student, the PHSN,
- familiarity with IHCP's, Hospital Care Plans, Vulnerable Person Risk Assessments or existing medical conditions and ensuring their response to emergencies is in line with these and school policies.
- Awareness of medical needs of students, ensuring these are recorded and communicated;
- liaising with parents/carers, school staff and year teams regarding needs, conditions and any medical action and/or medical support needed.
- notifying relevant staff when a medical condition is diagnosed for a student in the school's care.
- ensuring competency training and first aid training is up to date and any additional needs flagged up to the Health & Safety Coordinator and Chief Financial Officer.

### **Students:**

- need to alert the school to any medical concerns during the school day, contribute to the IHCP and follow agreed arrangements for medication or other support put in place.

### **School staff are responsible for:**

- awareness of any IHCP's which includes what to do in the instance of a medical need or emergency;
- supporting students with medical conditions to access full education and related opportunities.
- making reasonable adjustments to include these students in lessons.

### **First aiders are responsible for:**

- ensuring their training is up to date, and any additional training needs are discussed with the Lead First Aider or Health and Safety Coordinator.
- familiarity with IHCP's, Hospital Care Plans, Vulnerable Person Risk Assessments or existing medical conditions and ensuring their response to emergencies is in line with these and school policies.

### **Local authorities are responsible for**

- promoting cooperation between relevant partners, the school and staff regarding supporting students with medical conditions.
- making alternative arrangements for the education of students who need to be out of school for fifteen days (consecutive or cumulative) or more due to a medical condition.

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### 2. IDENTIFICATION OF STUDENTS WITH HEALTH CONDITIONS

The school gathers information from parents/carers on any medical conditions as part of the entry information. Parents/carers are asked to inform the school of any changes or concerns as soon as they are known. The school procedure, when notification is received, is as follows: The school...

- consults with medical professionals in instances where conditions require immediate intervention or special arrangements to ensure the safety and support of the student.
- makes arrangements for any staff training or support
- makes every effort to ensure that arrangements are put in place within two weeks
- is not to wait for a formal diagnosis before providing support to pupils

### 3. NOTIFYING STAFF

The student's medical information is recorded and maintained on SIMS. A list and photographs of students with allergies, requiring auto-injectors is provided to the School Kitchen. This information is also shared with all staff through a google document and discussions with individual departments regarding specific student allergies will take place as necessary. In the event of any significant change, relevant staff are informed.

This information is also provided for any school trips or visits, together with advice on actions to be taken in the event of any problem.

Staff are informed of any incidents or infectious illnesses, which could affect staff health (e.g. German measles).

### 4. TAKING PART IN THE FULL RANGE OF SCHOOL ACTIVITIES

Where there are concerns about a student taking part in an activity, a risk assessment will be carried out to identify controls that can be implemented to minimise risk and support full involvement. If the risk cannot be reduced to an acceptable level despite medical advice being sought and all reasonable steps being taken, then the student's safety is placed as the first consideration.

The Headteacher will ensure that teachers are aware of how a pupil's medical condition will impact on their participation in any off-site activity/trip and will ensure that there is enough flexibility for all children to participate according to their own abilities within reasonable adjustments. The school will consult with parents, pupils and relevant healthcare professionals to ensure that pupils can participate safely.

Pupils and parents are responsible for ensuring medicines such as asthma inhalers, blood glucose testing meters and auto-injectors are readily available when participating in offsite activities/trips.

The Headteacher will endeavour to have appropriately trained staff present to administer emergency medication or where pupils are not able to self-administer. Copies of IHCP's will be taken off site to ensure appropriate procedures are followed. Where it is not possible for trained staff member to be present, parents will be asked to accompany their pupil on the offsite visit.

### 5. INDIVIDUAL HEALTH CARE PLANS (IHCP)

Plans are agreed with parents, students and health professionals; these are reviewed annually. In the event of any concern raised by parent or where there is a change in the medical information or seriousness of the condition. The Lead First Aider monitors the plans and circulates to relevant staff. IHCP's are easily accessible in SIMS and are printed off for the emergency services in the event of any emergency call.

The Lead First Aider usually completes these forms with the parents/carers and the student and include:

- Medical condition, its triggers, signs, symptoms and treatments
- Students' resulting needs
- Level of support needed, together with any self-medication and monitoring arrangements
- Who will provide support, and the training needs etc., together with any cover arrangements
- Who in the school needs to be aware of the student's condition and the support required
- Arrangements for written permission from parents for medication to be administered by a member of staff or self-administered. Arrangements for school trips or other extra-curricular activities that ensure the student can participate
- Where confidentiality issues are raised by the parent/carer/student, those to be entrusted with the information
- Emergency arrangements, including contact and contingency.

Specific support for the student's educational, social and emotional needs (e.g. catching up, how absences will be managed, extra time arrangements for examinations, counselling sessions etc.) is arranged by the Pastoral team and Year Heads. Given the need to be flexible and to react quickly, this is not formalised on the IHCP, but kept separately by the Year Head. The school is responsive to any raised concerns.

Any reintegration to school after hospital or alternative provision may need additional support, arrangements for which are kept with the IHCP for the duration of the reintegration or added to the IHCP if a long term requirement.

Where a student is competent to manage their own health needs and medicines, this is both encouraged and recorded in the IHCP. Where immediate access is needed, these medicines are carried with the student; otherwise these are held in the First Aid Room.

### 6. STAFF TRAINING

The First Aiders will receive First Aid training and a range of other training relevant to the medical needs of the students and staff. On occasions, it is necessary that other school staff, in contact with the student, may need emergency training e.g. Auto-injectors. Awareness training for staff accompanying off site visits and trips is allocated through the IHASCO online training system.

Awareness and guidance training on the policy will be cascaded to all staff through Department meetings, with emphasis on their role and responsibilities. Changes to the policy will be communicated via Staff Bulletin and the policy is published on the school's website. Records of induction training will be recorded on the Health and Safety training matrix - which is shared with the HR Officer and CPD Director

Key staff including first aiders and/or those with specific responsibilities for students with medical needs will receive Competency and Awareness training to ensure that they are suitably competent and confident in their ability to support the student including preventative and emergency measures. Competency and Awareness training for specific medical needs will be scheduled wherever possible. Records of staff competency training undertaken will be maintained (e.g. date, provider) on the Health and Safety training matrix and the IHASCO reporting suite.

Where certain prescription medicines or health care procedures are required, appropriate training **MUST** be given first; a first aid certificate in itself does not count as appropriate training. Training for specific conditions will be provided e.g. Epilepsy, Diabetes, Asthma and Allergies.

### 7. FEELING UNWELL AT SCHOOL

Where students with medical conditions feel unwell at school, staff should follow the advice given. This generally falls into the alternatives below:

- send for the First Aider immediately, letting them know the student's name so they can bring any necessary items OR
- send the student to the First Aider, ensuring they are accompanied by a suitably responsible individual.

Where a student is required to be taken to hospital, a member of staff will stay with the student until a parent/carer arrives, this includes accompanying them to hospital by ambulance if necessary (taking any relevant medical information, care plans etc.). An ambulance procedure is in place where it is necessary to contact the emergency service, which is circulated to all first aiders, and a copy held in the emergency response bag.

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### 8. MANAGING MEDICINES ON SCHOOL PREMISES

#### Prescribed medicines

Where possible, parents are encouraged to ask for medicines to be prescribed in dose frequencies, which enable them to be taken outside of school hours. The school will not give prescription medicines to any student, under 16, without their parent's /carers written consent, except in exceptional circumstances, where verbal confirmation may be provided by a parent. Where the medicine has been prescribed to the student without the knowledge of the parents we will make every effort to encourage the student to involve their parents while respecting their right to confidentiality. Written records will be maintained of medication administered to individual students. These will then be added to the student's electronic record on SIMS.

Prescribed medicines will only be accepted by Robert May's School if they are in date, labelled, provided in the original container as dispensed by the pharmacist and include instructions for administration, their dosage and storage. Insulin is the exception, which must still be in date but will generally be inside an insulin pen or a pump, rather than its original container. The name of the student, dose, expiry and shelf life dates will be checked before medicines are administered. On occasions where a student refuses to take their medication the parents will be informed at the earliest available opportunity.

Students who use their own inhalers and auto-injectors themselves are encouraged to carry them. An Emergency asthma inhaler and 2 x auto-injectors are held in the First Aid Room and written permission is required from parents for their use. The school applies the Department of Health Guidance on the use of emergency salbutamol inhalers in schools. These Inhalers or auto-injectors may only be used by a person who has previously been prescribed their use and where parental permission has been given.

#### Controlled Medicines

Controlled medicines may only be taken, on school premises, by the individual to whom they have been prescribed. Passing such medicines to others is an offence, which will be dealt with under our Behaviour Policy. Controlled medicines will be securely stored in the First Aid Room cabinet which only nominated staff will have access.

Written records will be maintained of all controlled medicines brought into the First Aid Room by students or parents. There may be instances where it is deemed appropriate for a student to administer their own controlled medication. This would normally be at the advice of a medical practitioner and monitoring arrangements will be in place.

#### Non Prescribed Medicines

Non - prescribed medicine, including paracetamol, will not be held by the school nor will it be administered to any student. If the first aider covering the First Aid Room, is placed in a position of being aware that a student wishes to take their own paracetamol, they will telephone the parents to gain verbal permission and check that students have not taken any other paracetamol containing products within the preceding 4 hours. Details of this call including the time of the call, the person permission was received from will be recorded on the First Aid Room log. A child under 16 should never be given medicine containing Aspirin unless prescribed by a doctor.

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### Emergency Medicines

Emergency medicines will be stored in the First Aid room, but not locked away to ensure they are easily accessible in the case of an emergency. All other medication will be stored safely in the locked cabinet or lockable refrigerator. Access will be restricted to the duty first aiders.

Parents will be informed of any medicines left over at the end of the course, and asked to collect. Medication returned to parent/carers will be documented on the tracking medication form. A sharps box is in place in the first aid room for the disposal of needles. Collection and disposal of these is arranged through an authorised company.

### Off site visits and trips

Specific details for the management and control of prescribed and non-prescribed medicines for visits and residential trips - including rescue medications, inhalers, auto-injectors and medications, are included in Robert May's School's Educational Visits Policy.

## 9. UNACCEPTABLE PRACTICE

The school complies with Equalities legislation and does not condone:

- barring access to medically needed equipment or medicine
- treating all students with the same condition in the same way, ignoring individual situations or needs
- ignoring medical condition (though the school will challenge where this is unclear, seems contradictory to other information, etc)
- sending students home because of medical conditions, unless this is clearly a health need
- sending students who report feeling unwell to the first aid room unaccompanied where they have medical conditions, or whether the symptoms indicate any risk
- preventing students from drinking, eating or taking toilet breaks where this is needed to manage their medical condition
- requiring parents/carers to attend school to administer medication or provide medical support
- putting unnecessary barriers in the way of a student participating in any aspect of school life e.g. requiring parents/carers to accompany a student on a school trip.

## 10. INSURANCE

The School is a member of the Department of Education's Risk Protection Arrangement (RPA). This protection arrangement is an alternative to insurance through which the costs of risks that materialise are covered by government funds. The RPA indemnifies school staff provided that they comply with the statutory guidance on supporting students at school with medical conditions, December 2015.





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## 11. COMPLAINTS

In the event of a concern or complaint about the support provided and/or arrangements made for students with medical conditions then parents/carers are encouraged to raise this with the relevant staff members to look for an early resolution.

Where this does not resolve the matter, parents/carers may raise the complaint using the school's complaint policy, addressing their complaint to the Head Teacher.

**Reviewed:** H&S Co-ordinator, Lead First Aider and Chief Financial Officer

**Date:** June 2020

**Approved:** TLW Committee

**Date:** 29<sup>th</sup> June 2020

**Next Review Date:** June 2022