



## **Supporting pupils with medical conditions policy**

Senior Leader responsible	Miss S Manning
Date approved by LGB	18/07/2024
Next review date	Summer 2025

## 1. 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)

## 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 school with medical conditions.

It is also based on the Department for Education (DfE)'s statutory guidance on supporting pupils with medical conditions at school.

## 3. Roles and responsibilities

### 3.1 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.

### 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 individual healthcare plans (IHPs), including in contingency and emergency situations
- 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

### **3.3 Health care practitioner**

- Ensure that all staff who need to know are aware of a child's condition
- Take responsibility for the development of IHPs (as delegated by Headteacher)
- 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

### **3.4 Parents**

Parents 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 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
- Complete a medication form (if not included in an IHP)

### **3.5 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.

Pupils must arrive at First Aid at the correct time to take their medicine. It is their responsibility to ensure that they arrive to take their medicine at the right times. The First Aid staff will not take the medicine to the pupil unless this has been agreed, or is part of an IHP or deemed necessary at the time.

### **3.6 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.

### **4. 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.

### **5. Medication**

#### **5.1 Procedure to be followed when a pupil has prescribed medicines**

If a pupil needs to take any form of medication at school his/her parents/ carers need to complete a medication form (available from Reception or the school website under the "Information for you" section, Appendix 1 and 2). This needs to be brought into Reception with the medicine. Each item of medication must be delivered to the Headteacher or Authorised Person, in normal circumstances by the parent, in a secure and labelled container as originally dispensed by the pharmacist. Each item of medication must be clearly labelled with the following information:

- Pupil's name.
- Name of medication.
- Dosage.
- Frequency of administration.
- Date of dispensing.
- Storage requirements (if important).
- Expiry date.

The school will not accept items of medication in unlabelled containers.

In most cases the pupils' medicine must be left at the First Aid office. The only exceptions to this are: if the pupil has asthma and uses an inhaler, if they have diabetes and use the Novopen regime, or if they have an allergy and use an auto-injector.

The medication will be stored in a locked cabinet or the fridge, and administered appropriately. The pupil must arrive at First Aid at the correct time to take his/her medicine. It is their responsibility to ensure that they arrive to take their medicine at the right times. The First Aid staff will not take the medicine to the pupil unless it is part of an agreed plan. The school will keep records, which they will have available for parents to see if they wish.

*Appendix 1, 2 and 3*

## **5.2 Procedure when a pupil has a medical condition/ Healthcare Plans (IHP)**

Pupils with a medical condition will have an NHS Healthcare plan (IHP) or an intermediary Neatherd Healthcare plan. Medication details will be held on this record instead of the standard forms (Appendix 1 and 2). Procedures for the administration of medicines will be as above. All pupils suffering from Asthma should have a Norfolk County Council Asthma Record Care Plan. It is the duty of the Health Care Practitioner to ensure that this plan is set up and shared with relevant staff. A briefing document/medical exit card is also made where necessary for supply teachers. Any key changes to the pupil's daily routine at Neatherd will be summarised on the sticky note feature on the young person's MIS profile.

Healthcare plans (IHPs) and reviews may be initiated in consultation with the parent by the Health Care Practitioner or a healthcare professional involved in providing care to the young person. Pupils should be involved where possible.

The healthcare plan should contain:

- Information about the medical condition
- The pupil's resulting needs
- The support that will be put in place
- Who will provide that support and when and where the support will take place.
- Which members of staff need to be informed
- Arrangements for school trips
- What to do in an emergency

## **5.3 Specialist Resource Base**

If a pupil in the SRB needs to take any form of medication at school his/her parents/ carers need to complete a medication form (available from Reception or the school website under the "Information for you" section, Appendix 1). This needs to be brought into Reception with the medicine. Medication for the SRB is stored in a locked cabinet in the SRB office. It must be clearly labelled, as above. A member of the SRB staff will administer the medication and record it on the relevant form (Appendix 2), also stored in the locked medicine cabinet.

#### **5.4 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.

A pupil who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another pupil to use. All other controlled drugs are kept in a secure cupboard in the first aid room 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.

#### **5.5 Non – Prescribed Medicines**

The school does allow pupils to carry paracetamol or ibuprofen provided they are for their own use and their parents/ carers have given permission for this. They must not give their tablets to anyone else to take.

#### **5.6 Refusing Medication**

If a child refuses to take medication staff will not force them to do so. The refusal will be recorded and the parents informed. If necessary the school will call the emergency services.

#### **5.7 Safe Storage of Medicines**

The school will only store and administer medicine that has been prescribed for an individual child. Medicines will be stored strictly in accordance with product instructions; this includes medicines that need to be refrigerated. Children will be informed where their own medicines are stored.

All emergency medicines, such as asthma inhalers and adrenaline pens "auto-injectors", will be readily available to children and will not be locked away.

#### **5.8 Outside of school building procedures**

Should a situation arise outside of the school building, in a PE lesson or during community time then the standard emergency procedure will be followed. A member of staff or a pupil will be sent to get first aid assistance from a fully trained member of staff- all PE staff are first aid trained. The PE department will follow their Accident Procedure.

## 5.9 Offsite visits

The school will make every effort to continue the administration of medication to a pupil whilst on trips away from the school premises, even if additional arrangements might be required. It is the parent and pupil's responsibility to ensure that the correct medication is taken with them and that the staff are fully aware of the medication required. A risk assessment with emergency instructions for staff is produced for every off-site trip. There may be occasions when it may not be possible to include a pupil on a school trip if appropriate supervision cannot be guaranteed but every step will be taken to ensure that this is not the case.

## 6. 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
- 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 with a known medical condition 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

## **7. 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.

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.

## **8. Training**

Any specific training required by staff on the administration of medication (e.g. adrenaline via an "epi-pen") will be provided by the School First Aid Instructors. Staff will not administer such medicines unless they have been trained to do so. The school will keep records of all staff trained to administer medicines and carry out other medical procedures. Training will be updated as appropriate.

## **9. 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. 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.

## **10. 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.

## **11. Complaints**

Parents with a complaint about the school's actions in regard to their child's medical condition should discuss these directly with the Health Practitioner in the first instance. If the Health Practitioner cannot resolve the matter, they will direct parents to the school's complaints procedure.

## **12. Policy Compliance and Evaluation**

This policy statement will be monitored and evaluated regularly by the Assistant Headteacher: Pupil Development.

## **13. 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
- Pupils with Health needs who cannot attend school

**14. Other relevant legislation:**

The Health and Safety at work act 1971

The Medicines Act 1968

The Special Needs and Disability Code of Practise

Section 19 of the Education Act 1996

**Appendix 1**



**Dereham Neatherd High School**  
**Medication At School Record Form**

Medication At School Record Form	
Name of Child:	
Name of Medicine:	
Date Start:	
Date Stop:	
Dosage & Method:	
Times to be administered:	
Special Storage Requirements: (If YES Specify)	Yes / No (delete as appropriate) Fridge / Locked medication cabinet
Child To Self-Administer:	Yes / No (delete as appropriate)
Teacher Supervision Required	Details will be recorded of dose time & date
Teacher To Administer Medication	Yes / No (delete as appropriate)
Is packaging original / used	Yes / No
Is information leaflet enclosed	Yes / No
Procedures to take in an Emergency	
<b>CONTACT DETAILS</b> Name: Daytime Telephone No: Relationship to Pupil:	..... ..... ..... .....
<b>Declaration</b>  I hereby give permission for medicine to be given to my child in accordance with the details above.  ..... Signature <span style="margin-left: 200px;">Name (block capitals)</span> <span style="margin-left: 100px;">Date</span>	

**Appendix 2**

**Issue of Medication Record Form**

Medication	Date	Time	Dose	How Taken	Expiry Date	Staff Initials	Date replacement medication requested

**Appendix 3**

**FIRST AID INCIDENT FORM – Dereham Neatherd High School**

Date of incident	AVPU	Awake/Alert	Y/N
Time of incident		Verbal	Y/N
Arrival at first aid		Pain	Y/N
		Unresponsive	Y/N



Name of person injured	Year and Form	Staff/visitor Witness statement Yes / No Notify Reception/SLT/Site/ Cleaning/PSO/Attendance
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Where incident happened	Activity being undertaken	Described what happened to cause injury/illness
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Injuries/illness	Body part affected	Left	Right	Temperature
Mental Health	Arm/Elbow/Wrist/Hand/Fingers			Time
Headache /Migraine/ Temperature	Shoulder/neck/chest			Temp
Vomiting/ Nausea	Back – lower / upper			Time
Head injury	Abdomen/hips/pelvis			Temp
Cut/Graze/Bump/Bruise/Burn	Legs/thighs/knee/ankle/foot/toes			Time
Nosebleed	Head			Temp
Assault/fight/malicious action	Eyes/ears/nose/mouth			Time
Asthma/Medical condition				Temp
Allergy/hayfever				Time
Other				Temp

Describe treatment given with reasons

Name of First Aider..... Signature of first aider .....

Phone call home	Mum/Dad/Carer/Other
Back to lessons	Mobile
Head Injury Sticker	Landline
Paracetamol consent	Work
Went home	Voicemail left
Advised GP / A&E	Text sent
Paramedics called	Email sent
Time	Time

