



The William Amory  
Primary School  
Supporting Pupils  
with Medical  
Conditions Policy

## **Introduction:**

The William Amory Primary School is an inclusive school and provides all pupils with medical conditions, both physical and mental health, with the same opportunities as other pupils at our school, enabling them to play a full and active role in school life, remain healthy and achieve their academic potential. We will provide support for a child's medical condition and will always do this in consultation with appropriate health and social care professionals, pupils and parents to ensure the needs of children with medical conditions are effectively supported.

We recognise that pupils with long term and complex medical conditions may require ongoing support, medicine or care while at school to help them manage their condition. Other pupils may require monitoring and interventions in emergency circumstances. The focus is on individual children's needs and how their medical condition impacts on their school life. Sometimes it may be necessary for the school to work flexibly and may, for example, involve a combination of attendance at school and additional support from alternative provision.

## **Definition:**

Pupils' medical needs may be broadly summarised as being of two types:

- (a) Short-term**, affecting their participation in school activities whilst they are on a course of medication.
- (b) Long-term**, potentially limiting their access to education and requiring extra care and support.

## **Aims:**

- To support pupils with medical conditions so that they have full access to education, including physical education and educational visits
- To effectively manage and provide appropriate support so that any possible impact on the child's educational attainment and emotional and general wellbeing are limited
- To work together with health professionals and other support services to ensure that children with medical conditions receive a full education
- To ensure that school staff involved in the care of children with medical needs are fully informed and adequately trained by a relevant professional in order to administer support or prescribed medication
- To comply fully with the Equality Act 2010 for pupils who may have disabilities or special educational needs and with Section 100 of the Children and Families Act 2014.
- To write, in association with healthcare professionals, Individual Healthcare Plans where necessary

- To respond sensitively, discreetly and quickly to situations with a medical condition that requires support
- To keep, monitor and review appropriate records

### **Entitlement:**

The William Amory Primary School provides full access to the curriculum for every child wherever possible. This may mean special arrangements for particular pupils so that they can access their full and equal entitlement to all aspects of the curriculum and school life.

Pupils with medical conditions have the same right of admission as other children and cannot be refused or excluded on medical grounds alone. **However we must ensure the safety of all pupils in our care and may refuse to accept a child in school at times where it would pose a risk to other children's health, for example infectious diseases.**

### **Procedures For When We Are Notified That A Child Has A Medical Condition:**

The school will liaise and meet with parents, the child and relevant health professionals who will fully inform the school beforehand of the child's condition, its management and implications for the school life of that individual. An Individual Healthcare Plan will be drawn up if appropriate. Any support or additional arrangements will be made to meet the child's medical condition including any staff training needs that are identified.

Arrangements will be put into place to cover transition of a child from another setting when the school is notified that a child is starting the school with a medical condition. These may vary according to each child's needs and existing Healthcare Plan.

Support and arrangements will always be in place for the start of a new school term or in other cases, such as a new diagnosis or a child moving to our school mid-term, every effort will be made to ensure that arrangements are in place within two weeks.

### **Individual Healthcare Plans:**

- The Senco/Headteacher is responsible for developing Individual Healthcare Plans which are used to help the school ensure that we are effectively supporting children with medical conditions.
- The school, healthcare professional and parents agree, based on evidence, when a healthcare plan is necessary or when a healthcare plan would be inappropriate.

- The Individual Healthcare Plan will be initiated, drawn up and reviewed in consultation and in partnership with the parents, a member of school staff and a healthcare professional, usually a school nurse or member of a relevant medical team ie Diabetic nurse. Pupils are involved as appropriate.
- The aim of Individual Healthcare Plan is to capture the steps which a school should take to help the child manage their condition and overcome any potential barriers to getting the most from their education.
- Where a child has a special educational need identified in a statement or EHC plan, the Individual Healthcare Plan will be linked to or become part of that statement or EHC plan.
- The responsibility for ensuring the healthcare plan is finalised and implemented is with the school. All Individual Healthcare Plans will be reviewed annually or earlier if evidence is presented that the child's needs have changed.
- Where a child is returning to school following a period of hospital education or alternative provision we will ensure that the individual Healthcare Plan identifies the support the child will need to reintegrate effectively.
- Individual Healthcare Plans are devised with the child's best interests in mind, ensuring that an assessment of risk to the child's education, health and social well-being is managed minimising disruption. When deciding on the information to be recorded on Individual Healthcare Plans, the following will be considered:
  - The medical condition, it's triggers, signs, symptoms and treatments
  - Pupil's resulting needs, including medication, time, facilities, equipment, dietary requirements, environmental issues
  - Specific support for the pupil's educational, social and emotional needs, for example, how absences will be managed, additional support in catching up lessons
  - Level of support needed including in emergencies
  - Who will provide this support, their training needs, cover arrangements when they are unavailable
  - Who in school needs to be aware of the child's condition
  - Arrangements for written permission from parents for medication to be administered by a member of staff

- Separate arrangements required for school trips or other school activities outside of normal school timetable eg risk assessments needed
- What to do in an emergency including who to contact and contingency arrangements

See Template A for Individual Healthcare Plan

If appropriate and with parent's permission, Individual Healthcare Plans will have photographs on and will be displayed in the office, staff room and child's classroom. All staff including supply and peripatetic will be made aware of children's needs.

### **Roles and Responsibilities In Supporting Children With Medical Conditions:**

Supporting a child with a medical condition is not the responsibility of one person. We will work cooperatively and collaboratively with staff within the school and with outside agencies, as the needs and circumstances of the child dictate.

- **The Governing Body Has Responsibility For And Must Ensure That:**
  - Arrangements are in place to support pupils with medical conditions in school
  - This policy is being implemented and monitored
  - A pupil with medical conditions is supported to enable the fullest participation possible in school life
  - Sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions
- **The Headteacher Will Have Responsibility For And Ensure That:**
  - All staff are aware of the policy and understand their role in implementing it
  - Sufficient staff are suitably trained to deliver against all Individual Healthcare Plans, including in contingency and emergency situations
  - All relevant staff will be made aware of the child's condition
  - Cover arrangements will be put in place to cover for staff absence, to ensure that someone is always available
  - Supply teachers will be briefed
  - Arrangements will be put in place for educational visits, and other school activities outside the normal timetable including risk assessments
  - Individual Healthcare Plans will be monitored

- Staff liaise with the school nurse in respect of a child who has a medical condition

- **School Staff Roles And Responsibilities**

Any member of staff may be asked to provide support to pupils with medical conditions, including the administration of medicines, although they cannot be required to do so. School staff will have training before they take on responsibility to support children with medical conditions. Any member of staff should know what to do and be able to respond accordingly when they become aware that a pupil with a medical condition needs help.

- **School nurse Role and Responsibility**

- The school nursing team is responsible for notifying the school when a child has been identified as having a medical condition which will require support in school.
- The school nurse supports school staff with writing Individual Healthcare Plans and provides advice and liaison, for example on training

- **Pupil role**

Pupils will be as fully involved in discussions about their medical support needs and contribute as much as possible to their Individual Healthcare Plan as appropriate for their age and awareness.

- **Parents Role**

The prime responsibility for a child's health lies with the parent. Parents must notify the school of their child's condition and will be involved in the development and review of their child's Individual Healthcare Plan. They should provide the school with sufficient and up-to-date information about their child's condition and must carry out any action they have agreed to as part of its implementation.

### **Staff Training and Support**

Training needs for staff will be assessed by looking at the current and anticipated needs of pupils already on roll. It may be possible to determine training needs by early information relating to a child about to be admitted to the school. All members of staff providing support to a child with medical needs will have to be trained beforehand or, in the case of an existing pupil with a new diagnosis, as soon as possible. This will be recorded on Template B

The relevant healthcare professional normally leads on identifying and agreeing with the school the type and level of training required and how this can be obtained. All

staff will be made aware of the specific needs of each child with a medical condition and trained staff will be competent and confident enough to deliver support.

Parents will also be asked to provide relevant and adequate information to school staff about their child's condition to enable appropriate support and training.

### **The Child's Role in Managing their Own Medical Needs**

At The William Amory Primary School the children who require medication or other procedures will be supervised in administering them or receive them from a relevant member of staff. If a child refuses to take medicine or carry out a medical procedure, staff will not force him/her to do so but will follow inform parents so that alternative options can be considered.

### **Managing Medicines on School Premises**

All medicines must be prescribed by a doctor and will only be administered at school when it would be detrimental to a child's health or school attendance not to do so. The exception to this is travel sickness tablets during educational visits. Where clinically possible we ask parents that medicine doses are taken out of school (for example when the doses are less than 4 times daily). Where this is not possible, the following applies:

- Written permission must be given by a parent for prescription medicines to be given in school see Template D (information on Template C)
- We 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 exception to this is insulin which must be in-date but will generally be provided to schools inside an insulin pen or pump, rather than in its original container. Parents must provide adequate insulin and equipment ie needles and must check these regularly.
- If a child needs travel sickness tablets for an educational visit, parents must provide a written consent note.
- All medicines are stored safely in the first aid cabinets or kept in the fridge if necessary. Asthma inhalers, blood glucose testing and adrenaline pens are stored where they are readily available. Children who need to access their medicines such as inhalers immediately will be shown where they are kept in the classroom. On educational visits, medicines will also be available and they will be looked after by a relevant adult.
- A record of any medicines administered in school is kept, stating the child's name, what and how much was administered, when and by whom.

- When medicine is no longer required they are returned to the parent for disposal. Parents must provide a sharps box for the disposal of needles and other sharps.
- If a controlled drug has been prescribed, it will be kept securely and stored in a non-portable container. Named staff only have access to such medication. The school will keep a record of doses administered, when and by whom.

Written records will be kept of all medicines administered to children (Templates D and E) and parents will be informed if their child has been unwell at school.

### **Emergency Procedures**

A child's Individual Healthcare Plan will clearly identify what constitutes an emergency and the action to be taken, including ensuring that all relevant staff are aware of emergency symptoms and procedures. It may be necessary to inform other pupils in general terms so they can inform a member of staff immediately if they think help is needed.

If a child is taken to hospital, staff should accompany the child if the parent is not present. Accurate information about the child will be provided to the emergency services at the call out stage, during any first response stage or subsequent move to hospital.

### **Educational Visits and Sporting Activities**

The school will consider how a child's medical condition will impact on their participation in educational visits and sporting activities. We will encourage all children to participate according to their ability and make any necessary, reasonable adjustments; unless evidence from a clinician such as a GP states that this is not possible. We will carry out a risk assessment to try and ensure that children with medical needs are able to participate fully and safely on trips. We will consult with parents, pupils and get advice from relevant healthcare professionals to ensure that pupils can participate safely.

### **Unacceptable Practice**

While school staff will use their professional discretion in supporting individual pupils, it is unacceptable to:

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary
- Assume that every child with the same condition requires the same treatment
- Ignore the views of the child or their parents: or ignore medical advice or opinion (although this may be challenged)



- Send children with medical conditions home frequently for reason associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their care plan
- If the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- Penalise children for their attendance record if their absences are related to their medical condition, eg hospital appointments
- Prevent pupils from eating, drinking or taking a toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Require parents to attend school to administer medication or provide medical support to their child, including with toileting issues.
- Prevent children from participating in any aspect of school life, including trips

### **Liability and Indemnity**

Appropriate insurance is in place and reflects the level of risk. The insurance covers staff providing support to pupils with medical conditions as per their Individual Healthcare Plans.

### **Complaints**

Should parents/carers be unhappy with any aspect of their child's care at The William Amory Primary School they should discuss their concerns with the school.

This will be with the child's class teacher in the first instance.

If this does not resolve the problem or allay concerns, the problem should be brought to the Headteacher.

In the unlikely event of this not resolving the issue, the parents/carers may make a formal complaint using The William Amory Primary School complaints procedure.

# Template A: individual healthcare plan

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

## Family Contact Information

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

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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

## Template B: staff training record – administration of medicines

Name of school/setting	
Name	
Type of training received	
Date of training completed	
Training provided by	
Profession and title	

I confirm that [name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated [name of member of staff].

Trainer's signature \_\_\_\_\_

Date \_\_\_\_\_

**I confirm that I have received the training detailed above.**

Staff signature \_\_\_\_\_

Date \_\_\_\_\_

Suggested review date

## Template C: Information to parents regarding short-term medication

### MEDICINES IN SCHOOL (Short Term Illness)

The storage and administration of medicines in school is subject to stringent Health and Safety Regulations.

If medication is to be taken less than 4 times daily we expect that parents/carers will organise for it to be taken outside of school hours. When this is not possible parents can request that we administer the medication as per the conditions below.

The William Amory Primary School will only administer medicines subject to the following conditions:-

- 1. The medicine has been prescribed by a doctor/dentist**
2. The medicine must be delivered to and collected from school each day by the parent (or other responsible adult) so that it can be stored securely in the medical cabinet or as appropriate. It **MUST NOT** be kept by child. (Inhalers are kept accessible in the classroom.)
3. The medicine must be labelled with the date and name of the child in the container in which it was dispensed. In order to conform to statutory regulations on drugs and medicines, the label should include the name and strength of the drug, dosage, quantity and the name and telephone number of the supplying pharmacist.
4. The correct measuring spoon is provided.
5. The school request/authorisation form is completed and brought into school at the same time.

**NB** Medicine is usually administered prior to lunch at 12.00 noon unless another time is necessary. **We do not give medicine during lesson times unless it is an emergency.**

Parents must contact the school if a pupil needs to take medicine/drugs on a long term basis eg. for asthma, diabetes. Appropriate long term arrangements will then be made.

# Template D: Parental agreement for school to administer medicine

## MEDICINES IN SCHOOL

If your child has been ill but your doctor states that he/she is well enough to return to school, but still needs to take drugs or medicine please:-

- Bring the medicine into school and collect yourself. DO NOT send with your child.
- Give medicine to the class staff or office staff so that it can be locked away.
- Make sure the medicine is clearly labelled with the contents/owners name and dosage.
- Complete the request/authorisation form and bring into school at the same time.

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The William Amory Primary School

### Medicine Form

Child's Name ..... Class .....

Dosage Instructions  
.....

In consideration of you allowing me to bring my child's medicine to school so that it can be administered to him/her, I hereby indemnify all Members of Staff of the School and their employers against all claims arising through the administration of the medicine.

Signed ..... Date.....  
(Parent /Carer)

Name ..... (Please print)

Date	Dosage Given	Signature	Date	Dosage Given	Signature

