

St. Mary's Catholic Primary School Chiswick
"Living and learning, inspired by our faith"

SUPPORTING PUPILS WITH MEDICAL CONDITIONS POLICY



February 2023

CHR Sanku

Chair of Governors

Next Review Date: January 2025

1. Aims

1.1. 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

1.2. The Governing Body 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 healthcare plans (IHPs)

1.3. The named person with responsibility for implementing this policy is the Headteacher

2. Legislation and statutory responsibilities

2.1. This policy meets the requirements of:

- [Section 100 of the Children and Families Act 2014](#), which places a duty on Governing Bodies to make arrangements for supporting pupils at their school with medical conditions.
- The Department for Education's statutory guidance: [Supporting pupils at school with medical conditions](#).

3. The Governing Body

3.1. The Governing Body has ultimate responsibility to make arrangements to support pupils with medical conditions.

3.2. The Governing Body will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

4. The Headteacher

- 4.1. The Headteacher will make sure all staff are aware of this policy and understand their role in its implementation.
- 4.2. The Headteacher will 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.
- 4.3. The Headteacher will take overall responsibility for the development of IHPs.
- 4.4. The Headteacher will make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- 4.5. The Headteacher will ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

5. Staff

- 5.1. 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.
- 5.2. 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.
- 5.3. Teachers will take into account 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.

6. Parents

- 6.1. Parents will provide the school with sufficient and up-to-date information about their child's medical needs.
- 6.2. Parents will be involved in the development and review of their child's IHP and may be involved in its drafting.
- 6.3. Parents will carry out any action they have agreed to as part of the implementation of the IHP e.g. provide medicines and equipment

7. Pupils

- 7.1. 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 Individual Health Plans. They are also expected to comply with their Individual Health Plans.

8. School and Other Healthcare Professionals

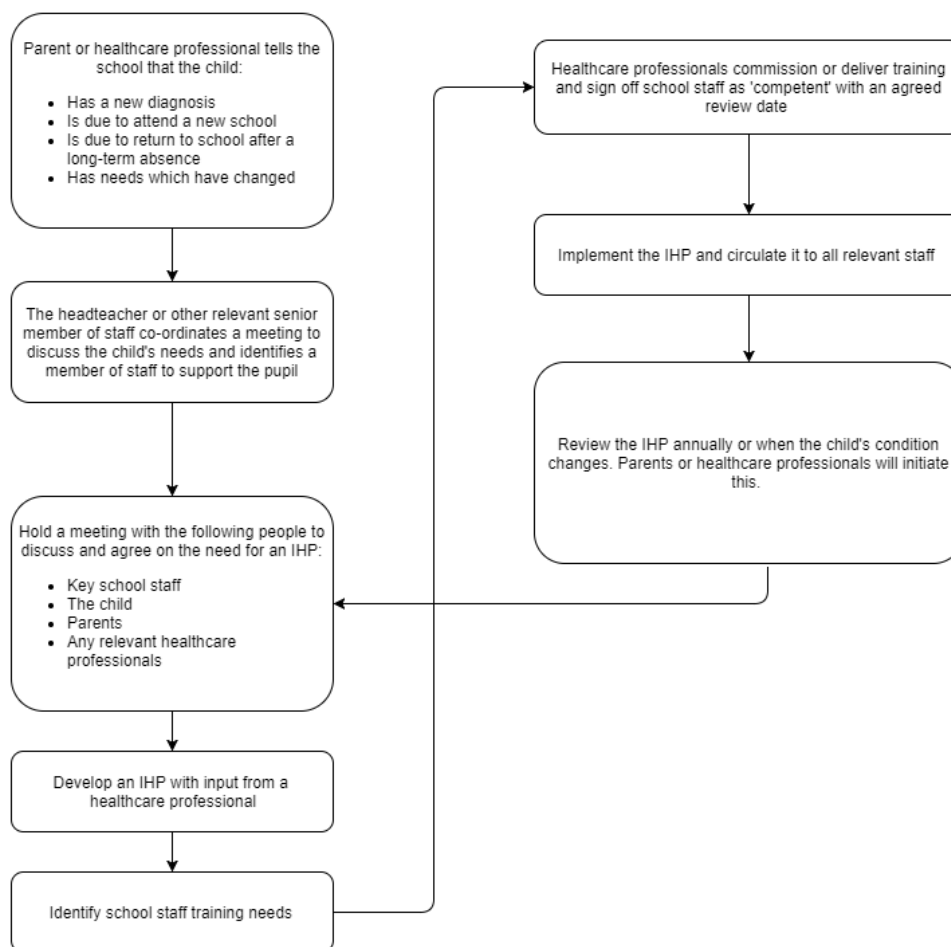
- 8.1. Our SENCO & First Aiders will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts at St Mary's Catholic Primary School, wherever possible.
- 8.2. Healthcare professionals, such as GPs and paediatricians, will liaise with the school's nurses and notify them of any pupils identified as having a medical condition.

9. Equal Opportunities

- 9.1. St Mary's Catholic Primary 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.
- 9.2. St Mary's Catholic Primary 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.
- 9.3. 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.

10. Being Notified That a Child has a Medical Condition

- 10.1. 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 healthcare plan.
- 10.2. 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.



11. Individual Healthcare Plans (IHPs)

- 11.1. The Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions.
- 11.2. Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.
- 11.3. Plans will be developed with the pupil's best interests in mind and will set out what needs to be done, when and by whom.
- 11.4. 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 not a consensus, the Headteacher will make the final decision.
- 11.5. Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as specialists or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

- 11.6. IHPs will be linked to, or become part of, any statement of special educational needs (SEN) or education, health and care (EHC) plan. If a pupil has SEN but does not have a statement or EHC plan, the SEN will be mentioned in the IHP.
- 11.7. The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed.
- 11.8. The Governing Body and the Headteacher 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

12. Managing Medicines

- 12.1. 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.

- 12.2. Pupils will not be given medicine containing aspirin unless prescribed by a doctor.
- 12.3. Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed.
- 12.4. The school will only accept prescribed medicines that are in-date, labelled and .provided in the original container, as dispensed by the pharmacist, including instructions for administration, dosage and storage.
- 12.5. The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.
- 12.6. All medicines will be stored safely.
- 12.7. Medicines will be returned to parents to arrange for safe disposal when no longer required.

13. Controlled Drugs

- 13.1. [Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations \(2001\)](#) and subsequent amendments, such as morphine or methadone.
- 13.2. 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 school office and only named staff have access.
- 13.3. Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

14. Unacceptable Practice

- 14.1. 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 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

15. Emergency Procedures

- 15.1. 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.
- 15.2. 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.

16. Training

- 16.1. Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.
- 16.2. 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.
- 16.3. 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.
- 16.4. Training will be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils. Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures. Fulfil the requirements in the IHPs

17. Record Keeping

- 17.1. The Governing Body will ensure that written records are kept of all medicine administered to pupils. Parents will be informed if their pupil has been unwell at school.
- 17.2. IHPs are kept in a readily accessible place which all staff are aware of.

18. Liability

- 18.1. The School Business Manager has in place the appropriate level of insurance through Maeven Public Sector and it appropriately reflects the school's level of risk.

19. Complaints

- 19.1. Parents with a concern about how their child's medical condition has been handled should discuss this directly with the Headteacher in the first instance.
- 19.2. If the Headteacher cannot resolve the matter, they will direct parents to the school's complaints procedure.