



Supporting Pupils with Medical Needs

1 Introduction

Priory Primary School values the abilities and achievements of all its pupils, and is committed to providing for each pupil the best possible environment for learning. We actively seek to remove the barriers to learning and participation that can hinder or exclude individual pupils, or groups of pupils.

Many children, at some point during their time at school, will have a medical condition which may affect their potential to learn and their participation in school activities. For most, this will be short term; perhaps finishing a course of medication or treatment; other children may have a medical condition that, if not properly managed, could limit their access to education.

This includes giving careful attention to the needs of pupils with lifelong medical conditions, so that they are properly supported to access the same education opportunities as other pupils, including school trips and physical education.

This policy includes managing the **administration of medicines**, and the policy and procedures for **first aid**. The school makes every effort to ensure the wellbeing of all children, staff and adults on site.

2 Aims of this policy and practice

- To ensure that children with medical conditions, in terms of both physical and mental health, 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
- To establish a positive relationship with parents and carers, so that the needs of the child can be fully met
- To work in close partnership with health care professionals, staff, parents and pupils to meet the needs of each child
- To ensure any social, emotional and mental health needs are met for children with medical conditions
- To minimise the impact of any medical condition on a child's educational achievement

3 Legislation and Statutory Responsibilities

The Children and Families Act 2014 places a duty on governing bodies to make arrangements for supporting pupils at school with medical conditions. This policy is also based on the DfE's statutory guidance: Supporting pupils at school with medical conditions.

4 Roles and Responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. Partnership working between staff, healthcare professionals, and parents and pupils will be critical.



4.1 The Governing Body

The governing body has ultimate responsibility to make arrangements to support pupils with medical conditions. 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.

4.2 The Headteacher

- 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
- Liaise with health professionals to receive IHPs and be involved in their reviews
- 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 child's medical needs and that this information is kept up to date
- Ensure that all staff who need to be aware of a child's medical condition are fully informed

4.3 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 take into account the needs of pupils with medical conditions that they teach. They will be expected to work towards/complete targets and actions identified within the Individual Healthcare Plan (IHP) or the SEN Education, Health and Care Plan (EHCP).

All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

4.4 Parents

- 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 with the medical / health care professionals leading their child's care
- Carry out any action they have agreed to as part of the implementation of the IHP e.g. provide medicines and equipment



4.5 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.

4.6 School Nurse 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.

Healthcare professionals, such as GPs and paediatricians, will liaise with the schools nurses and notify them of any pupils identified as having a medical condition.

5 Being notified that a child 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 IHP.

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.

6 Individual Health Care Plans (IHPs)

The Headteacher has overall responsibility for the delivery of IHPs for pupils with medical conditions. This has been delegated to Natasha Wilde, SENDCo and Inclusion Teacher.

Plans will be drawn up in partnership with the school and parents, but will be led by the 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.

Plans should be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed. However, as the IHP is developed by the medical or health care professional, it is not in the school's control to ensure this is achieved. Nevertheless, the school undertakes to advise and prompt when deadlines are approaching and / or not met.

Not all pupils with a medical condition will require an IHP. We will be advised by a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence.

IHPs will be linked to, or become part of, any Education, Health and Care plan (EHCP). If a pupil has SEN but does not have a statement or EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The Headteacher and the SENDCo / Inclusion Lead, will consider the following when deciding what information to request on an 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

7 Managing Medicines

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

The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents.

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

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.

The school will only accept prescribed medicines that are:

- In-date
- Labelled (medicine and name of pupil)
- 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. Medicines that require refrigeration must be kept in a clearly labelled container in the staffroom fridge. The temperature of the fridge must be checked daily. 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 and not locked away.

7.1 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 school office and 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.

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 parents and it will be reflected in their IHPs.

Pupils are allowed to access their own medicines and relevant devices wherever possible. When out of school (such as a school trip) staff will carry pupils' individual medicine bag and pupils are informed which staff member is carrying their medicines / inhalers. Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered, if necessary.

7.3 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 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

8 Specific Policy at Priory Primary

8.1 Staff

There is no legal duty which requires staff to administer medication. However, staff may administer medication to children provided that the parent/carer has completed an Administration of Medication Form available in the school office. We will not administer non-prescription medicines.

Administration of medicines is witnessed by two members of school staff and signed appropriately.

8.2 First Dose at Home

Occasionally, a child will show an adverse reaction to a new course of treatment and for this reason the school will not take responsibility for administering the first prescribed dosage.

8.3 Requesting School to Administer Medicines

Medication should only be requested to be administered if it needs to be administered during school time. Where the dosage is 3 three times a day it is usually acceptable that these doses are given at home – before school, immediately after school and just before bedtime.

Medication and the request form should be handed to staff by parents/carers, never the child. Medicines should always be provided with the prescriber's instructions.

8.4 Storing Medicines

Priory Primary School will only store, supervise and administer medicine that has been prescribed for an individual child. Where a child needs two or more prescribed medicines, each should be in a separate container. Staff should never transfer medicines from their original containers. Medicines are stored safely in the school office and in the refrigerator if required. All emergency medicines, such as asthma inhalers and adrenaline pens are readily available to the child.

Children should know where their own medicines are stored but only access through an adult.



8.5 Disposal of Medicines

Staff should not dispose of medicines. Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. They should also collect medicines held at the end of each term. This includes asthma medication. If parents do not collect all medicines, they should be taken to a local pharmacy for safe disposal.

8.6 Safety Management of Medicines

The storage of medicines must ensure that the risks to the health of others are properly controlled as set out in the Control of Substances Hazardous to Health Regulations 2002 (COSHH).

8.7 Hygiene and Infection Control

All staff should be aware of normal precautions for avoiding infections and follow basic hygiene procedures e.g. basic hand washing. The medical room has full access to protective disposable gloves and care is taken with spillages of blood and body fluids.

8.8 Sporting Activities

Some children may need to take precautionary measures before or during exercise. Staff supervising such activities should be aware of relevant medical conditions and any preventative medicine that may need to be taken and emergency procedures.

8.9 Educational Visits

We actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities but are mindful of how a child's medical condition will impact on their participation. Arrangements will always be made to ensure pupils with medical needs are included in such activities unless evidence from a clinician such as a GP or consultant states that this is not possible.

A risk assessment will be completed at the planning stage to take account of any steps needed to ensure that pupils with medical conditions are included. This will require consultation with parents and pupils and advice from the school nurse or other healthcare professional that are responsible for ensuring that pupils can participate. A copy of the child's health care plan should be taken with the child on an Educational Visit.

The class teacher must also ensure that medication such as inhalers and epi-pens are taken on all school trips and given to the responsible adult that works alongside the child throughout the day. A First Aid kit must be taken on all school trips.

From Sept 2022: An emergency inhaler will be carried by staff on school trips; there will also be an emergency inhaler left in school.

A trained first aider should attend all school trips especially when a child with a specific medical need is going. The party leader must ensure that all necessary medicines are taken on the trip. This will mean checking the medical requirements of the class and ensuring that any child with a specific medical condition has access to prescribed medicine whilst on the trip. First Aid trained staff administering medication to children on school trips should follow the guidelines above.



8.10 After-School Clubs

It is the responsibility of school clubs (from outside providers) to liaise with parents/carers and to send home a medical form for completion. The school must ensure that all clubs know how to obtain medical assistance.

9 Emergency Procedures

In emergency situations, where possible, the procedure identified on a child's Healthcare Plan will be followed. When this is not available, a qualified First Aider will decide on the emergency course of action. If it is deemed a child needs hospital treatment as assessed by the First Aider the following procedures must take place:

1. Stabilise the child
2. Dial 999
3. Contact parent/carer
4. Notify Head Teacher

The most appropriate member of staff accompanies child to hospital with all relevant health documentation and clear explanation of the incident if witness does not attend.

10 Staff Training

Any member of staff providing support to a pupil with medical needs must have received suitable training. It is the responsibility School Nurse to lead on identifying with other health specialists and agreeing with the school, the type and level of training required, and putting this in place.

Training must be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual healthcare plans. A first-aid certificate does not constitute appropriate training in supporting children with medical conditions.

They will need to understand the specific medical conditions they are being asked to deal with, their implications and preventative measures.

It is important that all staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing this policy.

Parents can be asked for their views and may be able to support school staff by explaining how their child's needs can be met but they should provide specific advice, nor be the sole trainer.

11 Record Keeping

The governing board, delegating to the Head teacher, will ensure that written records are kept of all medicine administered to pupils. Parents will be informed if their child has been unwell at school.



12 Liability and Indemnity

The governing board, delegating to the Head teacher, will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

The details of the school's insurance policy are:

RPA (Department for Education scheme; cover includes Employers' liability (£50m), Public liability (£50m), Officials' indemnity (£5m) and Libel & Slander (£5m). Also covered for all school offsite standard activity and hazardous activity trips.

13 Complaints

Parents with a complaint about their child's medical condition should discuss these directly with the headteacher, Mrs Fraser, in the first instance. If the headteacher cannot resolve the matter, she will direct parents to the school's complaints procedure.

14 Monitoring

This policy will be reviewed and approved by the governing board every two years.

15 Links to other policies

This policy is to be read in conjunction with our:

- Accessibility plan
- Complaints Procedure
- Equality Information and Objectives
- First Aid policy
- Health and Safety policy
- Child Protection and Safeguarding policy
- Special Educational Needs information report and policy

This Policy has been reviewed and adopted by the Governing Body on:		
Date:	23 rd May 2022	
Signed:	<i>C Stebbings</i>	(Chair of Governors)