



Peel Park

Primary School  
and Nursery

*The Path to Success*

# Peel Park Primary School and Nursery

## Supporting Pupils with Medical Conditions Policy

**Author:** Mrs S Hunt

**Date:** September 2024

## Equality Impact Pro-forma

<b>Person responsible for review:</b> Sara Hunt	<b>Date of review:</b> September 2024
<b>Groups Considered:</b>	
Race/ethnicity	<input checked="" type="checkbox"/>
Disability	<input checked="" type="checkbox"/>
Gender	<input checked="" type="checkbox"/>
Gender orientation	<input checked="" type="checkbox"/>
Pregnancy/maternity	<input checked="" type="checkbox"/>
Religion	<input checked="" type="checkbox"/>
Sexual orientation	<input checked="" type="checkbox"/>
Age	<input checked="" type="checkbox"/>
Please detail any opportunities offered by this policy to eliminate prohibited conduct, promote equality of opportunity, foster good relations or advance equalities.	
None identified in an equalities context	
Having reviewed the implications of any proposed changes to, or confirmation of, the policy, are there any concerns that it could have a differential impact on any of the groups identified above? Detail any steps that should be taken to minimise or eliminate any negative impact on these groups:	
None identified	

## Policy Amendment Summary

Medical Conditions Policy

Date: September 2024

Next review date: September 2025

Summary of amendments since policy introduction:

Date:	Amended by:	Details of amendment
September 2024	Sara Hunt	See notes in red font – these are additions, following the guidance in 'Supporting Pupils in School with Medical Conditions'

## **Introduction**

- Our aim is to ensure that all 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.
  - We recognise that children may require on-going support, medicines or care while in school to help them manage their condition and keep themselves well.
  - At Peel Park Primary School, we receive and fully consider advice from healthcare professionals and listen to and value the views of parents and pupils. We recognise the social and emotional implications associated with medical conditions and will support children and families to achieve the best outcomes possible.
  - Some children with medical conditions may be considered to be disabled under the definition set out by the Equality Act 2010. Some may have special educational needs and may have an Education Health and Care Plan which brings together health and social needs as well as their special educational provision. For these pupils, the school's compliance with the Department for Education (DfE)'s 'Special educational needs and disability code of practice: 0 to 25 years' and the school's Special Educational Needs and Disabilities (SEND) Policy will ensure compliance with legal duties.
  - The Headteacher, Governing Body and staff at Peel Park Primary School endeavour to ensure that children with medical needs receive appropriate care and support in order to play a full and active part in their school life.

## **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's statutory guidance on supporting pupils with medical conditions at school.

## **Roles and Responsibilities**

### **Governing Bodies**

The Governing body will make arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed and implemented. It will ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.

The Governing body will ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. It will also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

The Governing Body will ensure that policies, plans, procedures and systems are properly and effectively implemented.

The Governing Body will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.

## The Headteacher

- The Headteacher ensures that the school's medical policy is developed and effectively implemented. The school staff are aware of the policy and understand their role in its implementation.
- The Headteacher retains overall responsibility for the development of health care plans. However, the day-to-day management of healthcare plans is delegated to the school SENDCo working in partnership with parents, pupils, the school nursing team, other healthcare professionals and, where appropriate, relevant social care professionals.
- The Headteacher ensures that there is a sufficient number of appropriately trained staff to implement this policy. The Headteacher will consider recruitment needs for the specific purpose of ensuring pupils with medical conditions are properly supported.
- The Headteacher, together with the Governing Body, ensures that school staff are appropriately insured and are aware to ensure they are insured to support pupils in this way.
- The Headteacher will consider in each case the nature of the medication to be administered, any potential risks and all relevant information before deciding whether in any particular case medicine can be administered in school. Where there is a concern about whether the school can meet a child's medical needs in school, the Headteacher should seek advice from the school nurse or doctor, the child's GP or other medical advisor. These actions may be delegated to the Assistant Headteacher for SEND.
- The Headteacher will liaise with the SENDCo to monitor the effectiveness of medical provision. This will help identify any further training/ advice needed for staff supporting children with medical conditions. It will ensure sufficient trained members of staff are available to implement the policy and will adapt to any new situations to promote best outcomes for children.

## SENDCo Responsibilities

- The SENDCo will liaise with the Headteacher regarding medical care needs across school as well as any pertinent changes to this policy as well as healthcare plans.
- The SENDCo will ascertain when a healthcare plan would be required, following the flowchart in Annex A 'Supporting Pupils at School with Medical Conditions'. The school acknowledges that not all children will require an individual healthcare plan, but that these will be essential where conditions fluctuate or where there is a high risk that an emergency intervention will be needed. They will also be useful when medical conditions are long-term and complex.
- The SENDCo will liaise with relevant health care professionals such as paediatricians, school nurses and GPs to ensure that information and advice is accurate and up-to-date.
- In addition to ensuring that healthcare plans are discussed with parents and relevant healthcare professionals involved with the child, the SENDCo will ensure that the healthcare plans are shared with all relevant staff so that all pertinent information is known.
- Update health care plans annually along with asthma care plans.
- Ensure that there is appropriate training and/ or other support measures so that staff feel comfortable and confident with implementing a healthcare plan and/or administering any medication.
- Ensure that all healthcare plans and medical registers are collated in a class medical file. Additionally, a whole school medical file is established.
- A one-page profile of each class' medical care needs will be established to ensure that medical information can be distributed, shared and understood. This will ease the conveyance of information when supply/ cover teachers are teaching or when there are supply/ cover learning support assistants in the classroom.
- The SENDCo will ensure that any healthcare plans are passed on to other schools at all points of transition. Where pupils are attending a new school for transition days prior to an official start, the healthcare plan will be shared with the new setting in advance of this. All medical care needs will be passed on to receiving schools.

## School Staff

- Supporting pupils with medical conditions is not the sole responsibility of one person. All school staff may be asked to provide support for pupils with medical conditions, including the administering of medicines although they cannot be required to do so.
- School staff will ensure that they read and adhere to this policy. A copy is kept in each class medical file.
- Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach.
- School staff undertaking medical duties will receive sufficient training and support to undertake medical tasks and will achieve the necessary level of competency before they take on responsibility to support children with medical needs. This may be through formal training or it may be through discussions with parents and/or health care professionals depending upon the circumstances.
- Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.
- Staff should not give prescription medicines or undertake healthcare procedures without appropriate training/ support.
- The SENDCo is responsible for arranging staff training and ensuring that all relevant staff are made aware of the child's medical condition. Risk assessments will be carried out for school trips, residential visits and other school activities.
- Where a child is returning to school following a period of hospital education or alternative provision, school staff will work closely with parents, pupils and other partners to ensure a smooth and successful reintegration.
- Staff in school can seek advice and support from the school nursing team to write healthcare plans and review them. Staff in school will seek advice from the school nursing team regarding any appropriate training. Specialist healthcare professionals may provide advice on developing healthcare plans and support in schools for pupils with particular conditions (E.g. asthma, epilepsy and diabetes.)
- Class teachers are responsible for maintaining confidentiality which includes securely storing written information in Health Care Plans.

## Pupils

- Pupils should be consulted as to how their medical condition affects them and should be fully involved in discussions as much as possible about their medical support needs. This will include encouraging pupils who are competent in managing their own medicines and procedures as reflected in their health care plans. As often as possible, pupils will be invited to join implementation and reviews of their healthcare plans.
- Where appropriate, pupils will be encouraged to self-administer their own medication under staff supervision. Parents/ carers of pupils under 16 will be asked to confirm in writing their consent to this. The Headteacher must approve pupils carrying and administering their own medication. In deciding whether to permit this, the Headteacher will take into account the nature of the medication, the age of the pupil and the safety of other pupils. This can be done through delegation to the Assistant Headteacher for SEND and any decisions will be reflected in the child's Individual Health Care Plan. Pupils will be allowed to carry their own medicines and relevant devices wherever possible, but this will be subject to a Risk Assessment.
- Children, who can take their medicines themselves or manage procedures, may require an appropriate level of supervision. If it is not appropriate for a child to self-manage, relevant staff should help to administer medicines and manage procedures for them.
- 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 plan and inform parents so that an alternative option can be considered, if necessary.
- All pupils are to be sensitive to the needs of pupils with medical conditions.

## Parents

- Parents should provide school with the most up-to-date information about their child's medical needs.
- Parents should work in partnership with the school and health care professionals to develop and review the healthcare plan.
- Parents should carry out any actions identified on their child's healthcare plan and/or medical requirements. E.g. provide medications and equipment and ensure they or another nominated adult are contactable at all times.
- Parents will ensure they adhere to the following school guidelines:
  - Provide complete written and signed instructions for any prescribed medication as without this, school cannot administer them.
  - Where a pupil's medical needs change, written information must be provided and school may ask to seek advice and confirmation from medical professionals where deemed appropriate.
  - Keep their children at home if acutely unwell or infectious for the recommended period of time.
  - Provide reasonable quantities of medication at a time.
  - Where the pupil travels on school transport with passenger assistants, parents should ensure they have written instructions relating to any medication sent with the pupil.
  - Renew any medication when supplies are running low and ensure that the medication is within the expiry date.
  - Deliver medication to school in a secure and labelled container as originally dispensed. Each item of medication must be clearly labelled with the child's name; name of medication; dosage; frequency of administration; date of dispensing; storage requirements; expiry date.
  - Notify the school in writing if the child's medical needs have changed or have ceased.

## Local Authority

- Local authorities have a duty to commission school nurses and to promote cooperation between relevant partners with the view to improving the well-being of children. Under Section 10 of the Children Act 2004, they have a duty to promote co-operation between relevant partners – such as governing bodies of maintained schools, proprietors of academies, clinical commissioning groups and NHS England – with a view to improving the wellbeing of children with regard to their physical and mental health, and their education, training and recreation.
- Local authorities provide support, advice and training to ensure that support specified within healthcare plans is delivered effectively.
- Local authorities have a duty to make arrangements when it is clear that a child will be away from school for 15 days or more (whether consecutive or cumulative across the school year because of health needs).
- Local authorities should work with schools to support pupils with medical conditions to attend full-time. Where pupils would not receive a suitable education in a mainstream school because of their health needs, the local authority has a duty to make other arrangements
- Local authorities and clinical commissioning groups (CCGs) must make joint commissioning arrangements for education, health and care provision for children and young people with SEN or disabilities (Section 26 of the Children and Families Act 2014).

## Health Care Professionals, including GPs and paediatricians.

Professionals from Health agencies are responsible for:

- Notifying the school nurse and/or the school when a child has been identified as having a medical condition that will require support at school.
- Providing advice on developing IHPs.

- Providing support in the school for children with particular conditions, e.g. asthma, diabetes and epilepsy, where required.

### **Training**

- The school will ensure that there is a sufficient number of staff trained in First Aid.
- Training for conditions such as asthma is conducted on an annual basis. This was last updated for all staff in September 2023 from the Asthma Care Team. In September 2024, all staff received a briefing update in asthma care from the SENDCo.
- Suitable training will be identified during the development or review of individual healthcare plans. Some staff may already have some knowledge of the specific support needed by a child with a medical condition and so extensive training may not be required.
- The school follows advice from healthcare professionals.
- Training will:
  - Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
  - Fulfil the requirements in the Individual Health Care Plans
  - Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures
- Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.
- All staff will receive the necessary training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs.
- If a member of staff does not feel secure with administering medication, then he/ she should cease to administer the medication and alert the Headteacher and/or SENDCo about this and to request further training support.
- The family of a child will often be key in providing relevant information to school staff about how their child's needs can be met, and parents should be asked for their views. They should provide specific advice, but, depending upon the circumstances, should not be the sole trainer.
- In some cases, written instructions from the parent or on the medication container dispensed by the pharmacist may be considered sufficient, but this is at the discretion of the school, having taken into consideration the training requirements as specified in pupils' individual health care plans.

### **Procedures for managing medicines**

- Medicines should only be administered in school when it would be deemed detrimental to a child's health or school attendance not to do so.
- A child under the age of 16 should never be given medication containing aspirin unless prescribed by a doctor
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- All medicines must be prescribed by a doctor and in the original container. They must be in date, labelled with the child's name, instructions for administration, dosage and storage. The exception to this will be insulin which still must be in date but will generally be available to schools inside an insulin pump or pen, rather than the original container.
- All medicines must be stored safely. Children and staff will know where their medicines are kept and must be able to access them immediately. Healthcare plans, medications and equipment must accompany all children on visits out of school.
- Staff may administer a controlled drug to the child when it has been prescribed by the doctor. A record will be kept and instructions will be followed.

- Medicines no longer required will be returned to parents to arrange for safe disposal. Sharp boxes are available in the medical room. Children with diabetes will also have a sharps box with their diabetes equipment.
- If children refuse to take their medication, staff will not force them to do so, but must inform the child's parents as a matter of urgency on the same day. If a refusal to take medication results in an emergency, the school must seek medical advice as a matter of urgency.

### **Supply Teachers**

- Supply Teachers will be provided with access to this policy;
- Supply Teachers will be informed of all relevant medical conditions of pupils in the class they are providing cover for;
- Supply Teachers will be covered under the school's insurance arrangements.

### **Recording**

- The member of staff administering the medication must record the details of each occasion when medication is administered to a pupil.
- All records of administered medication must be kept in school and securely stored in the child's central file.
- All records of administered medication can be requested by the parent/ carer of the child.
- Parents will be informed if their child has been unwell at school.

### **Emergencies**

- Where a child has an individual healthcare plan, this will clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures.
- Children will be encouraged to support their medical needs such as telling a teacher when they feel unwell.
- School staff should not transport children by car to hospital in an emergency as it is safer to call for an ambulance. This is unless directed to do so by the child's parents and/or medical professional when a delay would be detrimental to the child's well-being. Where a staff member has to transport a child in a car, there will be two members of staff to transport and the car will have appropriate insurance. In these instances, the Headteacher will be informed.
- If a child needs to be taken to hospital, two members of staff should stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.
- Any medical information will be taken to the hospital or given to medical professionals.

### **Educational Visits (including Residential Visits) and Sporting Activities**

- Pupils with medical conditions will be supported to participate in school trips, sporting activities and residential trips.
- School will make its best endeavours to ensure flexibility for all children to participate according to their own abilities and with any reasonable adjustments. School will make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible.
- School will consider what reasonable adjustments will be needed to enable children with medical needs to participate fully and safely on visits. These may include supporting risk assessments so that planning arrangements take account of any steps needed to ensure that pupils with medical



conditions are included. This will require consultation with parents and pupils and any necessary advice from the relevant healthcare professional to ensure that pupils can participate safely.

### **Unacceptable Practice**

Peel Park Primary School follows the Department for Education's guidelines which state that schools must make explicit the following unacceptable practices:

- 1) Preventing children from accessing their medication;
- 2) Assuming every child with the same condition requires the same treatment;
- 3) Ignoring views of the child and parent (although these can be challenged);
- 4) Sending children with medical conditions home frequently or preventing them from staying for normal school activities unless this is specified in the healthcare plans;
- 5) If the child becomes ill, sending them to the school office or medical room unaccompanied or with someone unsuitable;
- 6) Penalising children for their attendance record if absences are related to their medical condition. E.g. hospital appointments;
- 7) Preventing children from eating, drinking or taking toilet breaks whenever they need in order to manage their medical condition effectively;
- 8) Requiring parents to attend school to administer medication or to provide medical support to their child, including with toilet issues;
- 9) Preventing children from participating in any aspect of school life.

### **Individual Healthcare Plans**

- Individual Healthcare plans ensure that the focus remains on the individual child's needs and consider how their medical condition impacts upon their school life.
- Individual Healthcare plans provide clarity of what actions need to be taken, when they need to be carried out and whose responsibility these actions are.
- An Individual Healthcare Plan will include information on triggers, signs, symptoms and treatments as well as the level of support a child needs.
- Individual Healthcare plans may also include information regarding how the child's medical condition impacts upon their social and emotional health and measures which the school is able to implement to meet these additional needs.
- Individual Healthcare Plans will include information regarding 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
- Individual Health Care Plans will include information on what constitutes an emergency and what actions need to be followed in an emergency.
- Individual Health Care Plans will be reviewed at least annually or earlier if the child's needs change.
- Individual Health Care Plans will be kept securely to protect confidentiality.
- Where a pupil has SEND, information regarding this will be noted in the Individual Healthcare Plan.
- Where a pupil has a healthcare plan prepared by a clinician, the information will contribute to a Individual Healthcare Plan in school.
- When the school is notified that a child has a medical condition, the school SENDCo will meet with parents and healthcare professionals. Decisions will be made as quickly as possible regarding transition arrangements, staff training or support and these actions will be kept under review according to the needs of the individual child. Where a child is returning from a period of hospital education, alternative provision or home tuition, the school will work with the LA and education provider to ensure that their IHP identifies the support the child will need to reintegrate.

### **Infectious Diseases**

Infectious Diseases Children who have an infectious childhood illness may return to school after the period in which they may pass on the infection to other children and staff has elapsed. Children with vomiting and /or diarrhoea must not return to school until they have been symptom free for 48hrs. (See Local Authority Guidelines on Childhood Infection Diseases)

### **Liability and Indemnity**

The school is insured via Zurich.

### **Complaints**

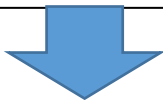
Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure. Making a formal complaint to the Department for Education should only occur if it comes within scope of section 496/497 of the Education Act 1996 and after other attempts at resolution have been exhausted.

### **Monitoring arrangements**

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

## **Appendix 1: Being notified a child has a medical condition**

Parent of Healthcare Professional informs school that a child has been newly diagnosed, or is due to attend a new school, or is due to return to school after a long-term absence, or that needs have changed.



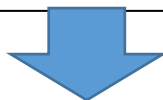
Headteacher, or senior member of school staff to whom this has been delegated, co-ordinates meeting to discuss the child's medical support needs and identifies member of school staff who will provide support to the pupil.



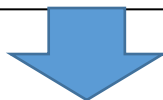
Meeting to discuss and agree on need for an Individual Healthcare Plan to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence from them.)



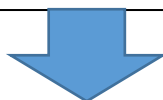
Develop the Individual Healthcare Plan in partnership – agree who leads on writing it. Input from the healthcare professional must be provided.



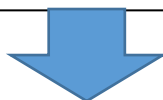
School staff training needs are identified.



Healthcare professional commissions/ delivers training and staff signed off as competent – review date is agreed.



The Individual Healthcare Plan is implemented and circulated to all relevant staff.



The Individual Healthcare Plan is reviewed annually or when the child's condition changes. Parent or healthcare professional to initiate.