

# ***TWEEDDALE PRIMARY SCHOOL***

## **POLICY FOR SUPPORTING CHILDREN WITH MEDICAL CONDITIONS**

### **Review of the Policy**

This policy provides guidance on teaching and learning at Tweeddale Primary School. It reflects the views of teaching staff and was agreed by the Local Governing Body on **10/03/21** .

The policy will be reviewed by the Head Teacher annually and by the governing body in **March 2024** or earlier if required. The implementation of the policy is the responsibility of the staff and will be monitored by the Head Teacher, Senior Management and individual curriculum coordinators.

Signed.....  
Headteacher

Date.....

Signed.....  
Chair of Governors

Date.....

## **Tweeddale Primary School**

### **Supporting Pupils with Medical Conditions Policy**

Tweeddale Primary School will ensure that pupils with medical conditions receive appropriate care and support at school. All pupils have an entitlement to a full time curriculum, or as much as their medical condition allows. This policy has been developed in line with the Department for Education's statutory guidance released in December 2015 – "Supporting pupils at school with medical conditions" under a statutory duty from section 100 of the Children and Families Act 2014. The statutory duty came into force on 1st September 2014.

The school will have regard to the statutory guidance issued. Our policy and practice will comply with that guidance.

The September 2019 Ofsted inspection framework places a clear emphasis on meeting the needs of pupils with SEN and Disabilities, also including those pupils with medical conditions. However, while working to ensure we meet the requirements of the inspection framework, our primary goal is the well-being of the child.

#### **1) Key roles and responsibilities**

a) The Local Authority (LA) is responsible for:

- i. Promoting cooperation between relevant partners regarding supporting pupils with medical conditions.
- ii. Providing support, advice /guidance and training to schools and their staff to ensure Individual Healthcare Plans (IHP) are effectively delivered.
- iii. Working with schools to ensure pupils attend full-time or make alternative arrangements for the education of pupils who need to be out of school for fifteen days or more due to a health need and who otherwise would not receive a suitable education.

b) The Governing Body of Tweeddale Primary School is responsible for:

- i. Ensuring arrangements are in place to support pupils with medical conditions.
- ii. Ensuring the policy is developed collaboratively across services, clearly identifies roles and responsibilities and is implemented effectively.

- iii. Ensuring that the Supporting Pupils with Medical Conditions Policy does not discriminate on any grounds including, but not limited to, protected characteristics: ethnicity/national/ origin, religion or belief, sex, gender reassignment, pregnancy & maternity, disability or sexual orientation.
- iv. Ensuring the policy covers arrangements for pupils who are competent to manage their own health needs.
- v. Ensuring that all pupils with medical conditions are able to play a full and active role in all aspects of school life, participate in school visits / trips / sporting activities, remain healthy and achieve their academic potential.
- vi. Ensuring that relevant training is delivered to a sufficient number of staff, who will then have responsibility for supporting children with medical conditions, and that those staff are signed off as competent to do so.
- vii. Ensuring that staff have access to appropriate information, resources and materials.
- viii. Ensuring written records are kept of any and all medicines administered to pupils.
- ix. Ensuring the policy sets out procedures in place for emergency situations.
- x. Ensuring the level of insurance in place reflects the level of risk.
- xi. Handling complaints regarding this policy as outlined in the school's Complaints Policy.

c) The Headteacher is responsible for:

- i. Ensuring this policy is effectively developed and reviewed with partner agencies and ensuring that staff are aware of their responsibilities arising from this policy.

d) The Assistant Headteacher/SENDCo is responsible for:

- i. The day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and Procedures of Tweeddale Primary School.
- ii. Liaising with healthcare professionals regarding the training required for staff.
- iii. Identifying staff who need to be aware of a child's medical condition.
- iv. Developing Individual Healthcare Plans (IHPs).
- v. Ensuring a sufficient number of members of staff are trained in order to implement the IHPs and deliver those plans in normal, contingency and emergency situations.
- vi. When necessary to meet the requirements of an IHP, facilitating the recruitment of additional staff. Ensuring more than one staff member is identified, to cover holidays/ absences and emergencies.
- vii. Liaising with the School Business Manager to ensure the correct level of insurance is in place for teachers who support pupils with medical conditions.
- viii. Continuous two way liaison between the school nurse or other medical service and school in the case of any child who has or develops an identified medical condition.
- ix. Ensuring confidentiality and data protection regarding children with medical conditions.
- x. Assigning appropriate accommodation for medical treatment/care.

e) Staff members are responsible for:

- i. Implementing the actions identified in Individual Health Plans (IHPs), to support children with medical conditions.
- ii. Familiarising themselves with the procedures detailing how to respond when a pupil with a medical condition needs help.
- iii. Liaising with the Assistant Headteacher/SENDCo to assess the effectiveness and appropriateness of IHPs.

- iv. Knowing where controlled drugs are stored and where the key is held.
- v. Taking account of the needs of pupils with medical conditions when planning and delivering lessons.
- vi. Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, with particular specialist training if they have agreed to undertake a medication responsibility. A first-aid certificate is not sufficient.
- vii. Allowing inhalers, adrenalin pens and blood glucose testers to be held in an accessible location, following DfE guidance.

f) School nurses are responsible for:

- i. Collaborating on developing an IHP in anticipation of a child with a medical condition starting school.
- ii. Notifying the school when a child has been identified as requiring support in school due to a medical condition at any time in their school career.
- iii. Supporting staff to implement an IHP and then participate in regular reviews of the IHP. Giving advice and liaison on training needs.
- iv. Liaising locally with lead clinicians to ensure appropriate support. Liaising with the Assistant Headteacher/SENDco in identifying training needs and providers of training.

g) Parents and carers are responsible for:

- i. Keeping the school informed about any new medical condition or changes to their child/children's health.
- ii. Participating in the development and regular reviews of their child's IHP.
- iii. Completing a parental consent form to administer medicine or treatment before bringing medication into school.
- iv. Providing the school with the medication their child requires, keeping it up to date and collecting left-over medicine.
- v. Carrying out actions assigned to them in the IHP with particular emphasis on their, or a nominated adult, being contactable at all times.

h) Pupils are responsible for:

- i. Providing information on how their medical condition affects them.
- ii. Contributing to their IHP.
- iii. Complying with the IHP and self-managing their medication or health needs including carrying medicines or devices, if judged competent to do so by a healthcare professional and agreed by parents.

## **2) Training of staff**

- a) Newly appointed teachers, supply or agency staff and support staff will receive training on the 'Supporting Pupils with Medical Conditions' Policy as part of their induction.
- b) The clinical lead for each training area/session will be named on each IHP.
- c) No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the condition and signed off as competent.
- d) Tweeddale Primary School will keep a record of medical conditions supported, training undertaken and a list of teachers qualified to undertake responsibilities under this policy. They will notify Health & Safety and other appropriate LBS officers.

### **3) Medical conditions register**

- a) A medical conditions register will be kept and updated and reviewed regularly by the Assistant Headteacher/SENDCo. Class teachers will have a list for the pupils in their class.
- b) Supply staff and support staff will have access on a need-to-know basis. Data sharing principles will be adhered to.
- c) For pupils with identified medical conditions, key stage transition points meetings will take place in advance of transferring to enable parents, the receiving school and health professionals to prepare a new IHP and, if appropriate, to train staff at the new setting in advance of the child's arrival.

### **4) Individual Healthcare Plans (IHPs)**

- a) Individual Healthcare Plans (IHPs) will be developed as a collaboration between the pupil, parents/carers, Assistant Headteacher/SENDCo and medical professionals.
- b) IHPs will be easily accessible to all relevant staff, including supply/agency staff, whilst preserving confidentiality. The Information Commissioner's Office (ICO) advise that staffrooms are not an appropriate location for displaying full IHPs, as they may be used by visitors, parent helpers etc. If parents consent, a photo and specific instructions may be displayed. Printed information will be kept in a lockable filing cabinet and electronic information will be password protected. However, in the case of conditions with potential life-threatening implications, appropriate information will be clearly available and accessible to everyone.
- c) IHPs will be reviewed when a child's medical circumstances change. A request for information about changes in medical circumstances will be part of the school's annual data update request to parents.
- d) Where a pupil has an Education, Health and Care Plan, the IHP will be linked to it or become part of it.
- e) Where a child is returning from a period of hospital education or alternative provision or home tuition, the LA /AP provider and school will liaise to ensure that the IHP identifies the support the child needs to reintegrate.
- f) A risk assessment will be carried out as part of the IHP process. For children with a temporary medical condition such as a broken leg, a risk assessment will be carried out without the need for an IHP.

### **5) Transport arrangements**

- a) Where a pupil with an IHP is allocated school transport the school will invite a member of LBS Transport team to arrange for the driver or escort to participate in the IHP meeting. The transport arrangements will be part of the IHP and the Transport team will receive a copy. The Transport team will ensure that current operator has the appropriate information and has passed this on to the driver/escort. When there is a change of operator, the Transport team will ensure that the new operator receives the relevant information. The Transport team will also ensure that operators are aware of and comply with data security.
- b) For some medical conditions, the driver/escort will require appropriate training. Where this is the case, this will form part of the IHP travel arrangements planning and will be included in the specification to tender for that pupil's transport.

## **6) Education Health Needs (EHN) referrals**

- a) All pupils of compulsory school age who, because of illness lasting 15 days or more, would not otherwise receive a suitable full-time education, are provided for under the local authority's duty to arrange educational provision for such pupils.
- b) In order to provide the most appropriate provision for the condition the EHN team accepts referrals where there is a medical diagnosis from a medical consultant.

## **7) Medicines**

- a) Unless it would be detrimental to the child's health, medicines should be prescribed in frequencies that allow the pupil to take them outside of school hours.
- b) If this is not possible, parents/carers of the child must complete and sign a parental consent to administration of medicine form prior to staff members administering any medication.
- c) No child will be administered any prescription or non-prescription medicines in school without written parental consent, except in exceptional circumstances. A detailed record of the medication and circumstances will be made in this event.
- d) Where a pupil is prescribed medication by a healthcare professional without their parents'/carers' knowledge, every effort will be made to encourage the pupil to involve their parents while respecting their right to confidentiality.
- e) No child under 16 years of age will be given medication containing aspirin without a doctor's prescription.
- f) Medicines MUST be in date, labelled, and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered.
- g) A maximum of four weeks' supply of the medication may be provided to the school at one time.
- h) Medications will be securely stored in the School Office.
- i) Any medications left over at the end of the course will be returned to the child's parents.
- j) A written record will be kept of all medication administered to children.
- k) Pupils will never be prevented from accessing their medication.
- l) Posters and other relevant information about pupils' medical conditions will be on display in the staff room
- m) Tweeddale Primary School cannot be held responsible for side effects that occur when medication is taken correctly.
- n) If a pupil refuses to comply with their health procedure, staff will not force, or attempt to force, the pupil to comply. At the earliest opportunity, parents will be informed of the refusal. The refusal will be logged in the IHP and will be part of the IHP review.

## **8) Emergencies**

- a) Medical emergencies will be dealt with under the school's emergency procedures, which will be communicated to all relevant staff so they are aware of signs and symptoms.
- b) Pupils will be informed in general terms of what to do in an emergency, for example, to tell a teacher.
- c) If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents arrive.

## **9) Day trips, residential visits and sporting activities**

- a) Unambiguous arrangements should be made and be flexible enough to ensure pupils with medical conditions can participate in school trips, residential stays, sports activities and not prevent them from doing so unless a clinician states it is not possible.
- b) Risk assessments for day trips, residential visits and sporting activities will include planning for pupils with medical conditions. Consultation with parents, healthcare professionals, etc. regarding day trips, residential visits and sporting activities will be in addition to the normal day to day IHP requirements for the school day. The risk assessments will be attached to the 'Evolve' visit record.

## **10) Unacceptable practice**

The following behaviour is unacceptable in Tweeddale Primary School:

- a) Preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- b) Assuming that pupils with the same condition require the same treatment.
- c) Ignoring the views of the pupil and/or their parents or ignoring medical evidence or opinion.
- d) Sending pupils home frequently or preventing them from taking part in activities at school.
- e) Sending the pupil to the medical room or school office alone or with an unsuitable escort if they become ill.
- f) Penalising pupils with medical conditions for their attendance record where the absences relate to their condition.
- g) Making parents feel obliged or forcing parents to attend school to administer medication or provide medical support, including toilet issues.
- h) Creating barriers to children participating in school life, including school trips.
- i) Refusing to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

## **11) Insurance**

- a) Teachers who undertake responsibilities within this policy will be assured by the Headteacher that are covered by the LA/school's insurance.
- b) Full written insurance policy documents are available to be viewed by members of staff who are providing support to pupils with medical conditions. Those who wish to see the documents should contact the Head.

## **12) Complaints**

- a) All complaints should be raised with the school in the first instance.
- b) The details of how to make a formal complaint can be found in the School Complaints Policy.

## **13) Definitions**

- a) 'Parent(s)' is a wide reference not only to a pupil's birth parents but to adoptive, step and foster parents, or other persons who have parental responsibility for, or who have care of, a pupil.
- b) 'Medical condition' for these purposes is either a physical or mental health medical condition as diagnosed by a healthcare professional which results in the child or young person requiring special adjustments for the school day, either ongoing or

intermittently. This includes; a chronic or short-term condition, a long-term health need or disability, an illness, injury or recovery from treatment or surgery. Being 'unwell' and common childhood diseases are not covered.

- c) 'Medication' is defined as any prescribed or over the counter treatment.
- d) 'Prescription medication' is defined as any drug or device prescribed by a doctor, prescribing nurse or dentist and dispensed by a pharmacist with instructions for administration, dose and storage.
- e) A 'staff member' is defined as any member of staff employed at Tweeddale Primary School.

This policy will be reviewed every two years. N.B. governors are free to determine the review cycle.

## Supporting Pupils with Medical Conditions Flowchart

Parent or healthcare professional informs school that child has medical condition or is due to return from long-term absence, or that needs have changed.



Headteacher or delegated SLT member co-ordinates meeting to discuss child's medical needs and identifies member of school staff who will provide support to the pupil.



Meeting held to discuss and agree on the need for IHP to include key school staff, child, parent and relevant healthcare professionals and other medical/health clinician as appropriate (or to consider evidence provided by them).



Develop IHP in partnership. Agree who leads on writing it. Input from healthcare professionals must be provided.



School staff training needs identified.



Healthcare professional commissions and/or delivers training.



Staff signed off as competent - review date agreed.



IHP implemented and circulated to all relevant staff.



IHP reviewed annually or when condition changes. Parent or healthcare professional to initiate.





## Form IHP 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

--

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

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

## Form IHP B: parental agreement for setting to administer medicine

The school will not give your child medicine unless you complete and sign this form.

Date for review to be initiated by	
Name of school/setting	
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

### Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

**NB: Medicines must be in the original container as dispensed by the pharmacy**

### Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s)

Date

## Form IHP C: record of medicine administered to an individual child

Name of school/setting	
Name of child	
Date medicine provided by parent	/
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	/
Quantity returned	
Dose and frequency of medicine	

Staff signature

Signature of parent

Date	/	/	/	/	/
Time given					
Dose given					
Name of member of staff					
Staff initials					

Date	/	/	/	/	/
Time given					
Dose given					
Name of member of staff					
Staff initials					

**C: Record of medicine administered to an individual child (Continued)**

Date

Time given

Dose given

Name of member of staff

Staff initials


Date

Time given

Dose given

Name of member of staff

Staff initials


Date

Time given

Dose given

Name of member of staff

Staff initials


Date

Time given

Dose given

Name of member of staff

Staff initials








## Form IHP E: 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

## Form IHP F: contacting emergency services

**Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.**

**Speak clearly and slowly and be ready to repeat information if asked.**

1. Your telephone number
2. Your name
3. Your location as follows:  
**Tweeddale Primary School**  
**Tweeddale Road**  
**Carshalton**
4. State what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code  
**SM5 1SW**
5. Provide the exact location of the patient within the school setting
6. Provide the name of the child and a brief description of their symptoms
7. Inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
8. Put a completed copy of this form by the phone

## Form IHP G: model letter inviting parents to contribute to individual healthcare plan development

Dear Parent

### DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely,