

## **Trust Policy**

# Supporting Pupils with Medical Conditions

Approver: Trustees Review Cycle: Triennial

Revision History			
Date	Version	Short Description of Changes	Approved by:
June 24	V1.0	Policy adopted	Trustees

#### This Policy Applies To:

Secondary Schools
Primary Schools
Centralised Trust Employees
Trustees & Governors

POLY093 - Supporting Pupils with Medical Conditions - v1.0			Organisation: Coast and	Page
Date: 23/05/2024	Version: v1.0	Review Date: May 2027	Vale Learning Trust	0 of 21

#### **Document Management Information**

Applicable to:	All schools	
Development and Consultation:	Developed in consultation with Delta Academies Trust	
Dissemination:	Available on staff hub, staff notified via SendMy and staff news. Available to the school community via Trust website. Parent's should be notified it has been updated.	
Implementation:	To be used in the planning and delivery of support to learners with Medical Conditions.	
Training:	Inline with the requirements of supporting individual learners. All staff are expected to complete Asthma, Epilepsy and Epi-Pen training, on induction and every 3 years.	
Review Frequency:	Triennially	
Based on:	Delta Academies Trust Policy	
Policy Author:	Trust Compliance Officer	
Executive Policy Owner:	Chief Executive Officer	
Approval by:	Trustees	
Version:	V1.0	
Approval Date:	23 May 2024	
Next Review Due:	May 2027	

If you require this policy in a more accessible format please contact the Trust Compliance Officer on compliance@coastandvale.academy

Executive summary text for current policy version:

This replaces the School Medical Policy (POLY074 – Appendix 2), which should be withdrawn.

Schools should use the appendices in this document to support the administration of medications.

Co	ntents	
1	Statement of intent	3
2	Key points	3
3	Definitions	3
4	Key roles and responsibilities	4
5	Training of staff	5
6	The role of the learner	5
7	Individual Healthcare Plans (IHCPs)	6
8	Managing medicines on school premises	6
9	Record keeping	7
10	Day trips, residential visits and sporting activities	7
11	Emergencies	7
12	Avoiding unacceptable practice	8
13	Insurance	8
14	Complaints	8
15	Monitoring and review	8
16	Glossary	9
Appe	endix 1 – Individual Healthcare Plan implementation procedure	10
Appe	endix 2 – Individual Healthcare Plan template	11
Appe	endix 3 – Parental agreement for a school to administer medicine template	13
Appe	endix 4 – Record of medicine administered to an individual child template	15
Appe	endix 5 – Record of medicine administered to all children template	18
Appe	endix 6 – Staff training record – administration of medicines	19
Appe	endix 7 – Contacting emergency services	20
Appe	endix 8 - Model letter inviting parents to contribute to Individual Healthcare P	lan
deve	elopment	21

Page 2 of 21

#### 1 Statement of intent

1.1 Coast and Vale Learning Trust (the Trust) is committed to ensuring that all learners 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.

#### 2 Key points

- 2.1 Children and young people with medical conditions are entitled to a full education and have the same rights of admission to school as other learners. This means that no learner with a medical condition should be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made.
- 2.2 Learners at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.
- 2.3 Local Governing Committees (LGCs) must ensure that arrangements are in place in schools to support learners at school with medical conditions.
- 2.4 LGCs should ensure that school leaders consult health and social care professionals, learners and parents to ensure that the needs of learners with medical conditions are effectively supported.
- 2.5 Some learners with medical conditions may be disabled. Where this is the case LGCs must comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision.
- 2.6 The focus should be on the needs of each individual learner and how their medical condition impacts on their school life.
- 2.7 The Trust is responsible for ensuring the correct level of insurance is in place for teachers who support learners in line with this policy.

#### 3 Definitions

"Medication" is defined as any prescribed or over the counter medicine.

"Prescription medication" is defined as any drug or device prescribed by a doctor.

"Staff member" is defined as any member of staff employed at a Trust School, including teachers.

For further information on the matters contained in this policy please see the DfE statutory guidance <a href="https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3">https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3</a>

POLY093 - Supporting Pupils with Medical Conditions - v1.0			Organisation: Coast and	Page
Date: 23/05/2024	Version: v1.0	Review Date: May 2027	Vale Learning Trust	3 of 21

#### 4 Key roles and responsibilities

#### 4.1 The LGC is responsible for:

- overseeing the overall implementation of the Supporting Pupils with Medical Conditions Policy and procedures at the school;
- ensuring that the Supporting Pupils with Medical Conditions Policy does not discriminate on any grounds including, but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation;
- handling complaints regarding this policy as outlined in the Trust's Complaints Policy;
- ensuring that all learners with medical conditions are able to participate fully in all aspects of school life;
- ensuring that staff members who take on responsibility to support learners with medical conditions receive appropriate and up to date training.

#### 4.2 The Headteacher is responsible for:

- the day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and procedures in the school;
- ensuring implementation of the policy is developed effectively with partner agencies;
- ensuring that information and teaching support materials regarding supporting learners with medical conditions are available to members of staff with responsibilities under this policy;
- ensuring that written records of any and all medicines administered to **individual** learners and across the school population;
- making staff aware of this policy;
- liaising with healthcare professionals regarding the training required for staff;
- making staff, who need to know, aware of a learner's medical condition;
- ensuring Individual Healthcare Plans (IHCPs) are developed;
- ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHCPs in normal, contingency and emergency situations;
- ensuring a named staff member, who has received appropriate training, is responsible for administering injections.

#### 4.3 Staff members are responsible for:

- taking appropriate steps to support learners with medical conditions;
- where necessary, making reasonable adjustments to include learners with medical conditions in lessons;
- administering medication, if they have agreed to undertake that responsibility;
- undertaking training to achieve the necessary competency for supporting learners with medical conditions, if they have agreed to undertake that responsibility;
- familiarising themselves with procedures detailing how to respond when they become aware that a learner with a medical condition needs help.

#### 4.4 School nurses are responsible for:

- notifying the school when a learner has been identified as requiring support in school due to a medical condition;
- liaising locally with lead clinicians on appropriate support.

#### 4.5 Parents and carers are responsible for:

- keeping the school informed about any changes to their child/children's health:
- completing a parental agreement for school to administer medicine form before bringing medication into school;
- providing the school with the medication their child requires in the original packaging which is labelled with the learner's name and details and keeping it up to date;
- collecting any leftover medicine at the end of the course or year;
- discussing medications with their child/children prior to requesting that a staff member administers the medication;
- where necessary, developing an Individual Healthcare Plan (IHCP) for their child in collaboration with the Headteacher, other staff members and healthcare professionals.

#### 5 Training of staff

- 5.1 Teachers and support staff will receive the Supporting Pupils with Medical Conditions Policy as part of their new starter induction. As a minimum this will be:
  - Epilepsy updated every 3 years
  - Epi-pen (allergy) updated every 3 years
  - Asthma updated every 3 years
- 5.2 Teachers and support staff will receive regular and on-going training as part of their CPD.
- 5.3 There must be a named clinical lead for this training.
- 5.4 No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the responsibility.
- 5.5 No staff member may administer drugs by injection unless they have received training in this responsibility.
- 5.6 The Headteacher will ensure a record of training undertaken and a list of teachers and support staff qualified to undertake responsibilities under this policy is maintained.

#### 6 The role of the learner

- 6.1 Learners who are competent will be encouraged to take responsibility for managing their own medicines and procedures.
- 6.2 Where possible, learners will be allowed to carry their own medicines and devices (inhalers). Where this is not possible, their medicines will be located in

POLY093 - Supporting Pupils with Medical Conditions - v1.0			Organisation: Coast and	Page
Date: 23/05/2024	Version: v1.0	Review Date: May 2027	Vale Learning Trust	5 of 21

- an easily accessible location and they will be made aware of which staff can access this.
- 6.3 If learners refuse to take medication or to carry out a necessary procedure, parents will be informed so that alternative options can be explored.
- 6.4 Where appropriate, learners will be encouraged to take their own medication under the supervision of a teacher or allocated member of support staff.

#### 7 Individual Healthcare Plans (IHCPs)

- 7.1 Where necessary, an Individual Healthcare Plan (IHCP) will be developed in collaboration with the learner, parents/carers, Headteacher, Special Educational Needs Coordinator (SENCO) and medical professionals.
- 7.2 IHCPs will be easily accessible whilst preserving confidentiality.
- 7.3 IHCPs will be reviewed at least annually or when a learner's medical circumstances change, whichever is sooner.
- 7.4 Where a learner has an Education, Health and Care plan or special needs statement, the IHCP will be linked to it or become part of it.
- 7.5 Where a learner is returning from a period of hospital education, alternative provision or home tuition, we will work with the LA and education provider to ensure that the IHCP identifies the support the learner needs to reintegrate into the school.

#### 8 Managing medicines on school premises

- 8.1 Where possible, it is preferable for medicines to be prescribed in frequencies that allow the learner to take them outside of school hours.
- 8.2 If this is not possible, prior to staff members administering any medication, the parents/carers of the learner must complete and sign a consent form.
- 8.3 No learner will be given any prescription or non-prescription medicines without written parental consent except in exceptional circumstances.
- 8.4 Where a learner is prescribed medication without their parents'/carers' knowledge, every effort will be made to encourage the learner to involve their parents while respecting their right to confidentiality.
- 8.5 No learner under 16 years of age will be given medication containing aspirin without a doctor's prescription.
- 8.6 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.

- 8.7 A maximum of four weeks supply of the medication may be provided to the school at one time.
- 8.8 Controlled drugs may only be taken on school premises by the individual to whom they have been prescribed. Passing such drugs to others is an offence.
- 8.9 Medications will be stored safely and securely. Learners should know where their medicines are at all times and be able to access them immediately. Where relevant, they should know who holds the key to the storage facility.
- 8.10 Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to learners and not locked away. This is particularly important to consider when outside school premises e.g. on school trips.
- 8.11 Any medications left over at the end of the course will be returned to the learner's parents.
- 8.12 The Trust cannot be held responsible for side effects that occur when medication is taken correctly.

#### 9 Record keeping

- 9.1 Written records must be kept of any medication administered to learners. Recommended templates are provided in the appendices supporting this document.
- 9.2 Parents should be informed if their child has been unwell at school.

#### 10 Day trips, residential visits and sporting activities

- 10.1 The school will actively support learners with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.
- 10.2 The school will make arrangements for the inclusion of learners in such activities with any reasonable adjustments unless evidence from a clinician such as a GP states that this is not possible.
- 10.3 For detailed procedures to be followed, please refer to the Inclusion section in the Trust's Educational Visits. Please note that the Trust requires a risk assessment to be carried out so that planning arrangements take account of any steps needed to ensure that learners with medical conditions are included in planned learning outside the classroom. This will require consultation with parents and learners and advice from the relevant healthcare professional to ensure that learners can participate safely.

#### 11 Emergencies

11.1 Medical emergencies will be dealt with under the school's emergency procedures.

POLY093 - Supporting Pupils with Medical Conditions - v1.0			Organisation: Coast and	Page
Date: 23/05/2024	Version: v1.0	Review Date: May 2027	Vale Learning Trust	7 of 21

- 11.2 Where an Individual Healthcare Plan (IHCP) is in place, it should detail:
  - What constitutes an emergency;
  - What to do in an emergency.
- 11.3 Learners will be informed in general terms of what to do in an emergency such as telling a teacher.
- 11.4 If a learner needs to be taken to hospital, a member of staff will remain with the learner until their parents arrive.

#### 12 Avoiding unacceptable practice

- 12.1 The school understands that the following behaviour is unacceptable:
  - Assuming that learners with the same condition require the same treatment.
  - Ignoring the views of the learner and/or their parents.
  - Ignoring medical evidence or opinion.
  - Sending learners home frequently or preventing them from taking part in activities at school
  - Sending the learner to the medical room or school office alone if they become ill.
  - Penalising learners with medical conditions for their attendance record where the absences relate to their condition.
  - Making parents/carers feel obliged or forcing parents/carers to attend school to administer medication or provide medical support.
  - Creating barriers to learners with medical conditions participating in school life, including in school trips.
  - Refusing to allow learners to eat, drink or use the toilet when they need to in order to manage their condition.

#### 13 Insurance

- 13.1 Teachers who undertake responsibilities within this policy are covered by the Trust's public liability insurance.
- 13.2 Full written insurance policy documents are available to be viewed at the school.

#### 14 Complaints

14.1 Any complaints about the operation of this policy will be dealt with in accordance with the Trust's Complaints Policy. This can be found on the school website.

#### 15 Monitoring and review

15.1 This policy will be reviewed every three years or more frequently, if the relevant legislation changes.

### 16 Glossary

EHC Educational Health Care

EHCP Educational Health Care Plan

IHCP Individual Healthcare Plan

LGC Local Governing Committee

SEN Special Educational Needs

SENCO Special Educational Needs Co-Ordinator

#### Appendix 1 – Individual Healthcare Plan implementation procedure

• Parent/Carer or healthcare professional informs school that learner has medical condition or is due to return from long-term absence, or that needs have 1 changed. •Headteacher or senior member of school staff to whom this has been delegated co-ordinates meeting to discuss learner's medical needs and identifies member of school staff who will provide support to the learner. • Meeting held to discuss and agree on the need for IHCP to include key school staff, child, parent/carer and relevant healthcare professionals. 3 • Develop IHCP in partnership with healthcare professionals and agree on who leads. 4 •School staff training needs identified. 5 •Training delivered to staff - review date agreed. 6 •IHCP implemented and circulated to relevant staff. •IHCP reviewed annually or when condition changes. Parent/carer or healthcare professional to initiate. (Back to 3.) 8

POLY093 - Suppo	POLY093 - Supporting Pupils with Medical Conditions - v1.0			Page
Date: 23/05/2024	Version: v1.0	Review Date: May 2027	Vale Learning Trust	10 of 21

## Appendix 2 – Individual Healthcare Plan template

Name of School Individual Health Care Plan		
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 facilities, equipment or devices, environm	of child's symptoms, triggers, signs, treatments, ental issues etc.	

POLY093 - Supporting Pupils with Medical Conditions - v1.0			Organisation: Coast and	Page
Date: 23/05/2024	Version: v1.0	Review Date: May 2027	Vale Learning Trust	11 of 21

Name of medication, dose, method of administration, when to be taken, side effects,
contra-indications, administered by/self-administered with/without supervision.
Location of where the medication is stored.
Name of staff members with access to the medication store.
Daily care requirements
Specific support for the pupil's educational, social and emotional needs
Arrangements for school visits/trips etc
Arrangements for school visits/trips etc.
Other information. Is a Personal Emergency Evacuation Plan required? PEEP  Date completed
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

#### Appendix 3 – Parental agreement for a school to administer medicine template

The school will not give your child medicine unless you complete and sign this form, and the school has a policy that the staff can administer medicine.

#### Name of School Medicine Administering Form

Date for review to be initiated by	
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	
Medicine	
Name/type of medicine (as described on the container)	
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	I 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	Add name of 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/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

POLY093 - Suppo	orting Pupils with Medical (	Conditions - v1.0	Organisation: Coast and	Page
Date: 23/05/2024	Version: v1.0	Review Date: May 2027	Vale Learning Trust	13 of 21

Signature(s)	Date
(Parent)	_
Signature(s)	
Date	
(Academy)	

## Appendix 4 – Record of medicine administered to an individual child template

### Name of school Record of Medicine Administered to an Individual Child

Name of child			
Date medicine provided by	parent		
Group/class/form			
Quantity received			
Name and strength of medi	icine		
Expiry date			
Quantity returned			
Dose and frequency of med	dicine		
Where medication is store has access.	ed and who		
Staff signatureSignature 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			
		1	1

POLY093 - Suppo	orting Pupils with Medical	Conditions - v1.0	Organisation: Coast and	Page
Date: 23/05/2024	Version: v1.0	Review Date: May 2027	Vale Learning Trust	15 of 21

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

POLY093 - Suppo	orting Pupils with Medical (	Conditions - v1.0	Organisation: Coast and	Page
Date: 23/05/2024	Version: v1.0	Review Date: May 2027	Vale Learning Trust	16 of 21

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

POLY093 - Suppo	orting Pupils with Medical (	Conditions - v1.0	Organisation: Coast and	Page
Date: 23/05/2024	Version: v1.0	Review Date: May 2027	Vale Learning Trust	17 of 21

## Appendix 5 – Record of medicine administered to all children template

Name of	school						
Date	Child's Name	Time	Name of Medicine	Dose Given	Any Reactions	Signature of Staff	Print Name

POLY093 - Suppo	orting Pupils with Medical (	Conditions - v1.0	Organisation: Coast and	Page
Date: 23/05/2024	Version: v1.0	Review Date: May 2027	Vale Learning Trust	18 of 21

## Appendix 6 – Staff training record – administration of medicines

Name of school/setting:	
Name:	
Type of training received:	
Para Marking and the L	
Date of training completed:	
Training provided by:	
Profession and title:	
confirm that [add name of member of sta	aff] has received the training detailed above and is
	tment. I recommend that the training is updated by
add name of member of staff].	
Troiper's ciapature	
Trainer's signature	
Date	
confirm that I have received the training	
	ng detailed above.
confirm that I have received the training	ng detailed above.
Staff signature	ng detailed above.
	ng detailed above.
Staff signature	ng detailed above.

#### **Appendix 7 – 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.

- · Your telephone number add phone number
- Your name
- Your location as follows: add full address
- The satnav postcode (if different from the postal code). Add postcode
- The exact location of the patient within the school
- The name of the child and a brief description of their symptoms / details of any medication given (e.g. EPI Pen)
- The best entrance to use and state that the crew will be met and taken to the patient

Put a completed copy of this form by the phone.

## Appendix 8 – Model letter inviting parents to contribute to Individual Healthcare Plan development

**Dear Parent** 

#### Re: 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 with the school, parents/carers, learners, 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 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 [INSERT]. 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 include [add details of team]. 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 add name of other staff lead] would be happy for you contact me/them [DELETE AS NECESSARY] by email or to speak by phone if this would be helpful. Yours sincerely

Name of Headteacher