Kent Catholic Schools' Partnership
'Academies in Christ'
Part of the Archdiocese of Southwark

Knowledge-rich, skills-led learning for all
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Serving everyone in our community
Partnership of love, ambition, joy and peace

Supporting pupils with medical conditions

Policy, Procedure and Guidance

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1. Purpose

This policy sets out how each school in the Kent Catholic Schools' Partnership ("the Trust") will fulfil its statutory duty to make arrangements for supporting children and young people with medical conditions at each school. The policy follows guidance published by the DfE in 2015 'Supporting pupils at school with medical conditions', and for our primary schools, the Early Years Foundation Stage (EYFS) statutory framework.

This policy applies to pupils with an ongoing medical condition. Minor, short term or one-off medical problems are covered by each school's First aid policy.

2. Aim

The aim of this policy is to ensure that all children and young people with medical conditions, in terms of both physical and mental health, are properly supported in the school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

3. Objectives

The objectives of the Trust in supporting the children and young people in its schools with medical conditions are:

- Ensuring that arrangements are in place to support pupils with medical conditions;
- To focus on the needs of each individual child or young person and how their medical condition impacts their school life;
- To develop and maintain a good understanding of how medical conditions can impact on a child or young person's ability to learn;
- To provide support and advice for all staff working with children and young people with medical conditions;
- To develop and maintain a partnership approach and high levels of engagement with parents;
- To ensure access to the curriculum for all children and young people.

4. Equal Opportunities

The Trust is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. Schools will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.
Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

5. Procedures to be followed when notification is received that a pupil has a medical condition

Each school in the Trust will ensure that the correct procedures are followed whenever notification is received that a pupil has a medical condition. The procedures will include any transitional arrangements between schools, the process to be followed upon reintegration or when a pupil's needs change and arrangements for any staff training and support.

For children and young people starting at one of the Trust's schools, arrangements will be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or children moving to a school mid-term, every effort will be made to ensure that arrangements are put in place within two weeks.

In making the arrangements, the school will:

- Take into account that many of the medical conditions that require support in schools will affect quality of life and may be life-threatening with some instances more obvious than others;
- Focus on the needs of each individual child or young person and how their medical condition impacts on their school life;
- Ensure that arrangements give parents, carers and the child or young person confidence in the school's ability to provide effective support for medical conditions in the school;
- Show an understanding of how medical conditions impact on a child or young person's ability to learn, as well as increase their confidence and promote self-care;
- Ensure that arrangements are clear and unambiguous about the need to support actively children or young people with medical conditions to participate in trips and visits, or in sporting activities and not prevent them from doing so, making 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;
- Ensure that staff are properly trained to provide the support that children and young people need.

The school does not have to wait for a formal diagnosis before providing support to a child or young person. In cases where a child or young person's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on the available evidence. This would normally involve some form of medical evidence and consultation with parents/carers. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place. This will normally be led by the Headteacher.

Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. For children with Special Educational Needs (SEN), this policy should be read in conjunction with the Special Educational Needs and Disability Code of Practice and the school SEN Policy and report.

5.1 EYFS only – obtaining information about medicines

The school will:

- For new starters, send a form to all parent/carers of pupils after their place at the school has been confirmed, but before their first school year starts, to confirm any medicine(s) their child needs. Where a pupil has a new diagnosis and/or a pupil has moved to the school mid-term, we will send a form and put arrangements in place within 2 weeks
- Send a reminder to parents/carers at the start of each year in a newsletter, as well as a form to complete, if their child requires certain medicine(s)

Parents/carers are requested to proactively inform us, by either phone call to the school or by email if their child's medical needs change during the school year.

6. Individual healthcare plans

Overview

The Headteacher has overall responsibility for the development of Individual Healthcare Plans (IHPs) for pupils with medical conditions, the Headteacher may delegate this responsibility to another appropriate and named staff member and identified in their job description. IHPs exist to document a child or young person's medical needs and the provision being made for those needs. They are a tool to ensure that the school meets the needs of the child or young person by providing clarity about what needs to be done, when and by whom. They also set out the procedures to follow in an emergency, and the arrangements to be followed during day trips, residential visits and sporting activities. They are written with input from all the relevant parties including healthcare professionals and parents.

IHPs will be developed with the child or young person's best interests in mind and will ensure that the school assesses and manages risks to the child or young person's education, health and social well-being and minimises disruption. IHPs will be reviewed at least annually or earlier if evidence is presented that the child or young person's needs have changed.

Not all children or young people with a medical condition will require an IHP. The school, healthcare professionals and parent should agree, based on evidence, when an IHP would be inappropriate or disproportionate. If a consensus cannot be reached, the Headteacher is best placed to take a final view.

What should be included on an IHP

When deciding what information should be recorded on an individual healthcare plan, the following should be considered:

- 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 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 (some children will be able to take responsibility for their own health needs) including in emergencies. If a child is self-managing their medication, this should 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 child'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 child's condition and the support required
- Arrangements for written permission from parents and the head teacher 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 child can participate, e.g. risk assessments
- Where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition
- What to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

Process for developing IHPs

The flowchart at Appendix 1 summarises the process for identifying and agreeing the support a child or young person needs, and developing an IHP.

7. Roles and responsibilities

Board of Directors

The Trust's Board of Directors remains legally responsible and accountable for fulfilling its statutory duty and has responsibility for:

- Ensuring that there is a policy in place for supporting pupils with medical conditions that is reviewed regularly

Headteacher

The Headteacher of each school has responsibility for:

- Ensuring that this policy is fully implemented within the school and readily accessible to parents and school staff
- Development and monitoring of IHPs
- Ensuring that the school works positively and in close partnership with parents and children/young people in supporting their medical needs
- Ensuring all staff are aware of the policy and understand their role in its implementation
- Ensuring that all staff (including supply teachers) who need to know are aware of the child or young person's condition

- Ensuring that sufficient trained numbers of staff are available to implement the policy and deliver against all the individual health care plans, including in contingency and emergency situations
- Ensuring that appropriate risk assessments are in place for school visits, holidays, and other activities outside of the normal timetable
- Contacting the school nursing service in the case of any child who has a medical condition that may require support at the school
- **For our children in the Early Years Foundation Stage**, implement systems for obtaining information about a child's needs for medicines and keeping this information up to date.

Local Governance Committee

The Local Governance Committee has responsibility for:

- Ensuring that they receive an annual update from the Headteacher, which covers the following:
    - Ensuring that arrangements are in place in the school to support pupils with medical conditions
    - Ensuring that Individual Health Care Plans are reviewed at least annually
    - How this policy is implemented appropriately within the school
    - Ensuring that sufficient staff have received suitable training and are competent before they take on responsibility to support children or young people with medical conditions
    - Ensuring 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
    - Ensuring that systems are in place for obtaining information about a child's medical needs and that this is kept up to date.
- The LGC should work with the Headteacher to determine the development of provision, including establishing a clear picture of the resources available in the school.

School staff

School staff have responsibility for:

- Providing support to pupils with medical conditions, including the administering of medicines (although they cannot be required to do so)
- (For Teachers) Taking into account the needs of pupils with medical conditions that they teach
- Undertaking sufficient and suitable training and achieving the necessary level of competency before they take on responsibility to support children and young people with medical conditions
- Knowing what to do and responding accordingly when they become aware that a pupil with a medical condition needs help.

School nurses and other healthcare professionals

School Nurses will:

- Notifying the school when a child or young person has been identified as having a medical condition which will require support in the school. This will be before the pupil starts school, wherever possible.
- Supporting staff in the implementation of a child's individual healthcare plan, including provision of advice and liaison, for example on training (although they would not usually have an extensive role in ensuring that the school is taking appropriate steps to support children or young people with medical conditions)

Healthcare professionals, such as GPs and paediatricians, will liaise with the school's nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

Children and young people

Pupils with medical conditions have responsibility for:

- Providing information about how their condition affects them
- Being fully involved in discussions about their medical support needs
- Contributing as much as possible to the development of, and compliance with, their IHPs.

Other pupils have responsibility for being sensitive to the needs of those with medical conditions.

Parents

Parents have responsibility for:

- Providing the school with sufficient and up to date information about their child's medical needs
- Being involved in the development and review of their child's IHP
- Carrying out any actions they have agreed to as part of the implementation of the IHP (for example, providing medicines and equipment and ensuring they or another nominated adult are contactable at all times).

8. Staff training and support

All staff who are required to provide support to pupils for medical conditions will receive suitable and sufficient training to do so. The type and level of training needed will be identified by the healthcare professional during the development or review of the individual healthcare plan. Training will be kept up to date.

Training should 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 set out in individual healthcare plans. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

Staff must not give prescription medicines or undertake healthcare procedures without suitable and sufficient training (updated to reflect any individual healthcare plans). A first aid certificate does not constitute appropriate training in supporting children with medical

conditions. Healthcare professionals, including the school nurse, can provide confirmation of proficiency of staff in a medical procedure, or in providing medication.

All staff will receive induction training and regular whole school awareness training so that all staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing the policy. The Headteacher will seek advice from relevant healthcare professions about training needs, including preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.

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 will be asked for their views. They should provide specific advice, but should **not** be the sole trainer.

9. The child or young person's role in managing their own medicines

The Trust and its schools aim to develop independence in pupils and to prepare them for adult life. Consequently, if it is deemed, after discussion with the parents, that a child or young person is competent to manage their own health needs and medicines, the school will encourage them to take responsibility for managing their own medicines and procedures. This will be reflected within the IHP.

Where possible and appropriate, children and young people should be allowed to carry their own medicines and relevant devices or will be able to access their medicines for self-medication quickly and easily (these will be stored in a secure facility to ensure that the safeguarding of other children is not compromised). The school also recognises that children and young people who can take their medicines themselves or manage procedures may require an appropriate level of supervision. No access is given to the storage facility without adult supervision. If a child or young person is not able to self-medicate then relevant staff should help to administer medicines and manage procedures for them.

Note: Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to children and not locked away. This is particularly important to consider when outside of school premises e.g. on school trips.

If a child or young person refuses to take medicine or carry out a necessary procedure, staff should not force them to do so but instead follow the procedure agreed in the IHP. Parents should be informed, outside of the review, so that alternative options can be considered.

10. Managing medicines on school premises and record keeping

Prescription and non-prescription medicines will only be administered at the 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 under 16 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
- 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. 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.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

11. 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.

12. Emergency procedures

The Headteacher will ensure that arrangements are in place for dealing with emergencies for all school activities wherever they take place, including school trips within and outside the UK, as part of the general risk assessment process.

Where a pupil has an individual healthcare plan, this should define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other pupils in the school should know what to do in general terms, such as informing a member of staff immediately if they think help is needed.

If a pupil needs to be taken to hospital, staff should stay with the pupil until the parent arrives, or accompany a pupil taken to hospital by ambulance.

13. Day trips, residential visits and sporting activities

We will actively support pupils with medical conditions to participate in day trips, residential visits and sporting activities by being flexible and making reasonable adjustments unless there is evidence from a clinician such as a GP that this is not possible.

We will always conduct a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions can be included safely. This will involve consultation with parents/carers and relevant healthcare professionals and will be informed by Health and Safety Executive (HSE) guidance on school trips.

14. Other issues for consideration

Where a pupil uses home-to school transport arranged by the LA and they also have a medical condition which is life-threatening, we will share the pupil's individual healthcare plan with the local authority.

15. Unacceptable practice

Although staff in each school in the Trust should use their discretion and judge each case on its merits with reference to the child or young person's IHP, it is not generally acceptable practice to:

- Prevent children or young people from easily accessing inhalers and medication and administering their medication when and where necessary
- Assume that every child or young person with the same condition requires the same treatment
- Ignore the views of the child/young person or their parents; or ignore medical evidence or opinion (although this may be challenged)
- Send children or young people with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- If the child or young person becomes ill, send them to the medical room unaccompanied or with someone unsuitable
- Penalise children or young people for their attendance record if their absences are related to their medical condition e.g. hospital appointments
- Prevent children or young people from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively
- Require parents, or otherwise make them feel obliged, to attend the school to administer medication or provide medical support to their child, including toileting issues
- Prevent children or young people from participating, or create unnecessary barriers to children or young people participating in any aspect of school life, including school trips e.g. by requiring parents to accompany the child.

16. Record keeping

Headteachers will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parents will be informed if their pupil has been unwell at school. IHPs are kept in a readily accessible place which all staff are aware of.

Headteachers should ensure that written records conform with the Department for Education templates attached at Appendix 2.

16.1 EYFS settings only: Recording information about medicines

The school will:

- Enter each's pupil's medicine need in the school's system
- Update the school's records when parents/carers of pupils inform the school of changes to their child's needs
- Keep a record of changes, labelling the most recent record for each child
- Make sure all staff have access to records so that they are informed about pupils' medical needs

Securely hold this information digitally in accordance with the UK GDPR.

17. Liability and indemnity

The Trust ensures that all schools are appropriately insured in the administration of medical care to children and young people. However, this is conditional on the member of staff having received an appropriate level of training and that there is written permission from the parent/carer for medicines or medical care to be administered. Individual insurance cover may need to be arranged for particular healthcare procedures, advice must be sought from the Trust Office.

The Trust is a member of the Department for Education's risk protection arrangements (RPA).

18. Complaints

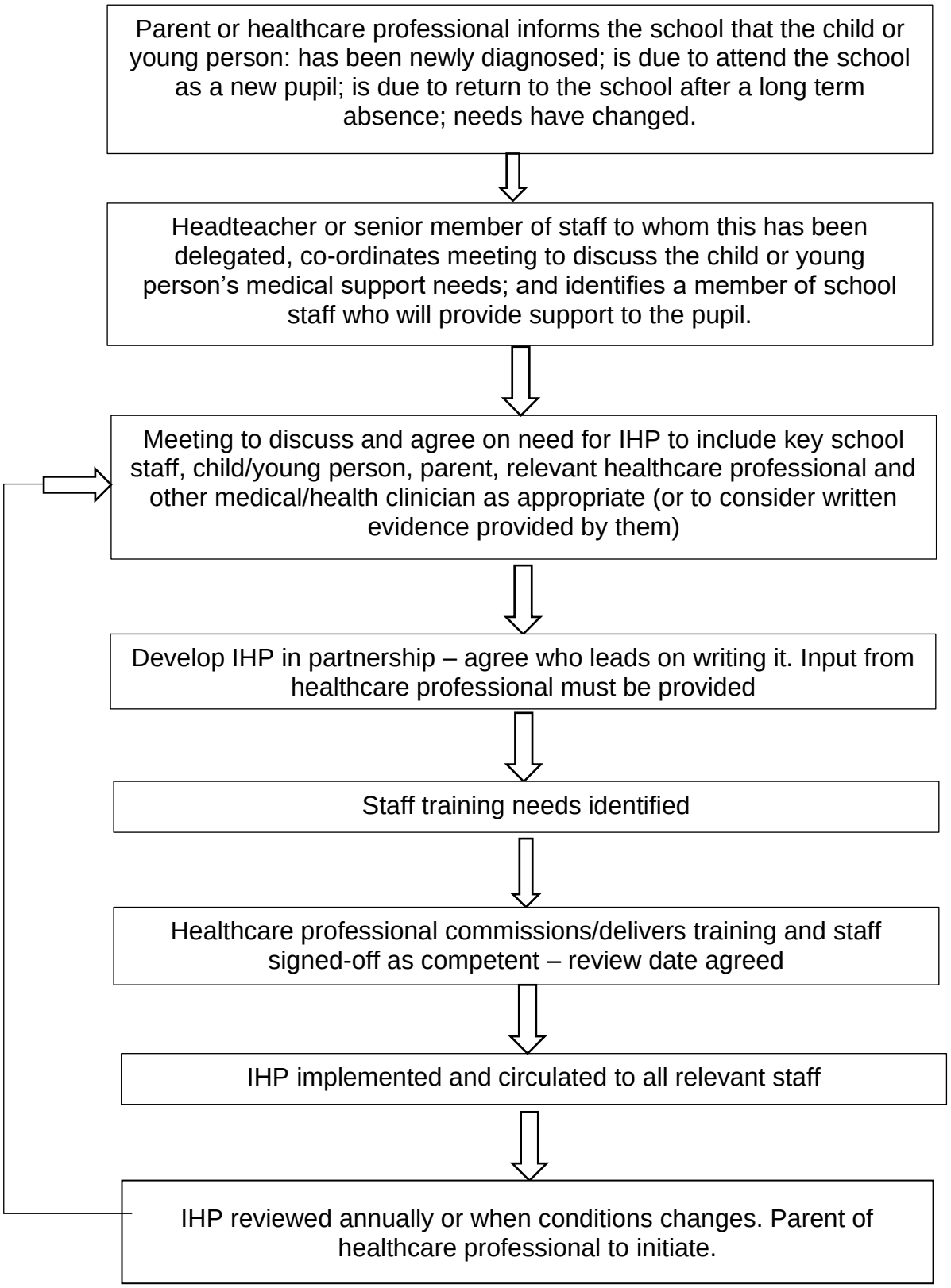
Parents/carers with a complaint about the school's actions in regard to their child's medical condition should discuss these directly with the Headteacher or SENCO in the first instance. If the Headteacher or SENCO cannot resolve the matter, they will direct parents to the Trust and Schools Complaint policy.

19. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Allergy management policy
- Equality information and objectives
- First aid
- Health & safety
- Safeguarding
- Special educational needs information report and policy
- Trust and school complaints

Appendix 1


Parent or healthcare professional informs the school that the child or young person: has been newly diagnosed; is due to attend the school as a new pupil; is due to return to the school after a long term absence; needs have changed.
Headteacher or senior member of staff to whom this has been delegated, co-ordinates meeting to discuss the child or young person's medical support needs; and identifies a member of school staff who will provide support to the pupil.
Meeting to discuss and agree on need for IHP to include key school staff, child/young person, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them)
Develop IHP in partnership – agree who leads on writing it. Input from healthcare professional must be provided
Staff training needs identified
Healthcare professional commissions/delivers training and staff signed-off as competent – review date agreed
IHP implemented and circulated to all relevant staff
IHP reviewed annually or when conditions changes. Parent of healthcare professional to initiate.

Department for Education

Appendix 2 - Templates

Supporting pupils with medical conditions

May 2014

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Appendix 2 – Templates

In response to requests from stakeholders during discussions about the development of the statutory guidance for supporting pupils with medical conditions, we have prepared the following templates. They are provided as an aid to schools and their use is entirely voluntary. Schools are free to adapt them as they wish to meet local needs, to design their own templates or to use templates from another source.

Template 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

Template B: parental agreement for setting to administer medicine

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

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 *(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 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/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.

Signature(s) _____ Date _____

Template 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			

Template D: record of medicine administered to all children

Name of school/setting	

Date	Child's name	Time	Name of medicine	Dose given	Any reactions	Signature of staff	Print name

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Template 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 _____

Template 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 [insert school/setting address]
4. state what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code
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

Template 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 the 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

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