



Supporting Pupils with Medical needs

Approved

June 2025

Date of review

June 2027

Trust Lead

Education Director

Signed:

Chief Executive Officer

M Bullett _____

Chair of Trustees

Chris Schwenner

Aims

This policy aims to ensure that:

- Pupils, staff and parents understand how our school will support pupils with medical conditions
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and inclusion
- Pupils, staff and parents understand how our school will support pupils to return to school following a period of ill health at the earliest time without putting other pupils at risk

The school will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of a pupil's condition, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- Providing covering staff with appropriate information about the policy and relevant pupils
- Developing and monitoring Individual Healthcare Plans (IHPs)
- Making sure liaison happens between home and school so that all information regarding medical conditions and / or ill health is known

The Head Teacher is responsible for implementing this policy.

Medical Conditions

Legislation and statutory responsibilities

This policy meets the requirements under Section 100 of the Children and Families Act 2014 which places a duty on those with responsibility for the governance of the school to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the DfE's statutory guidance: Supporting pupils at school with medical conditions.

Roles and responsibilities

The Board of Trustees

The Board of Trustees has ultimate responsibility for making arrangements to support pupils with medical conditions. The board will ensure that staff receive suitable training and are competent before they are responsible for supporting children with medical conditions.

Head Teacher

The Head Teacher will:

- Make sure all staff are aware of the policy and understand their role in its implementation
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all Individual Healthcare Plans (IHPs), including contingency and emergency situations
- Take overall responsibility for the development of IHPs for conditions including but not limited to epilepsy, emergency medication, asthma and diabetes
- Make sure all staff are aware of pupils' conditions
- Monitoring IHPs
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- Contact the school nursing service in the case of any pupil who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

Staff

All staff will:

- Work collectively and collaboratively to support pupils with medical conditions during school hours
- Undertake training and demonstrate competency before being able to directly support pupils with medical conditions, including the administration of medicines
- Have the right to opt out of training and direct support of pupils with medical conditions if they do not feel confident to do so
- Know what to do and how to respond accordingly when they become aware that a pupil with a medical condition needs help
- Take into account the needs of pupils with medical conditions that they teach

Families

Families will:

- Provide the school with sufficient up-to-date information about their child's medical needs
- Be involved in the development and review of their child's IHP
- Carry out any action they have agreed to as part of the implementation of the IHP e.g. provide labelled medicines and equipment

Pupils

Pupils (where appropriate) will:

- Have their views taken into account when creating IHPs, including information about how their condition affects them
- Be expected to comply with their IHPs

School nurses and other healthcare professionals

School nurses will:

- Notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible

Healthcare professionals, such as GPs and paediatricians will:

- Liaise with the school nurse and notify them of any pupils identified as having a medical condition

Equal Opportunities

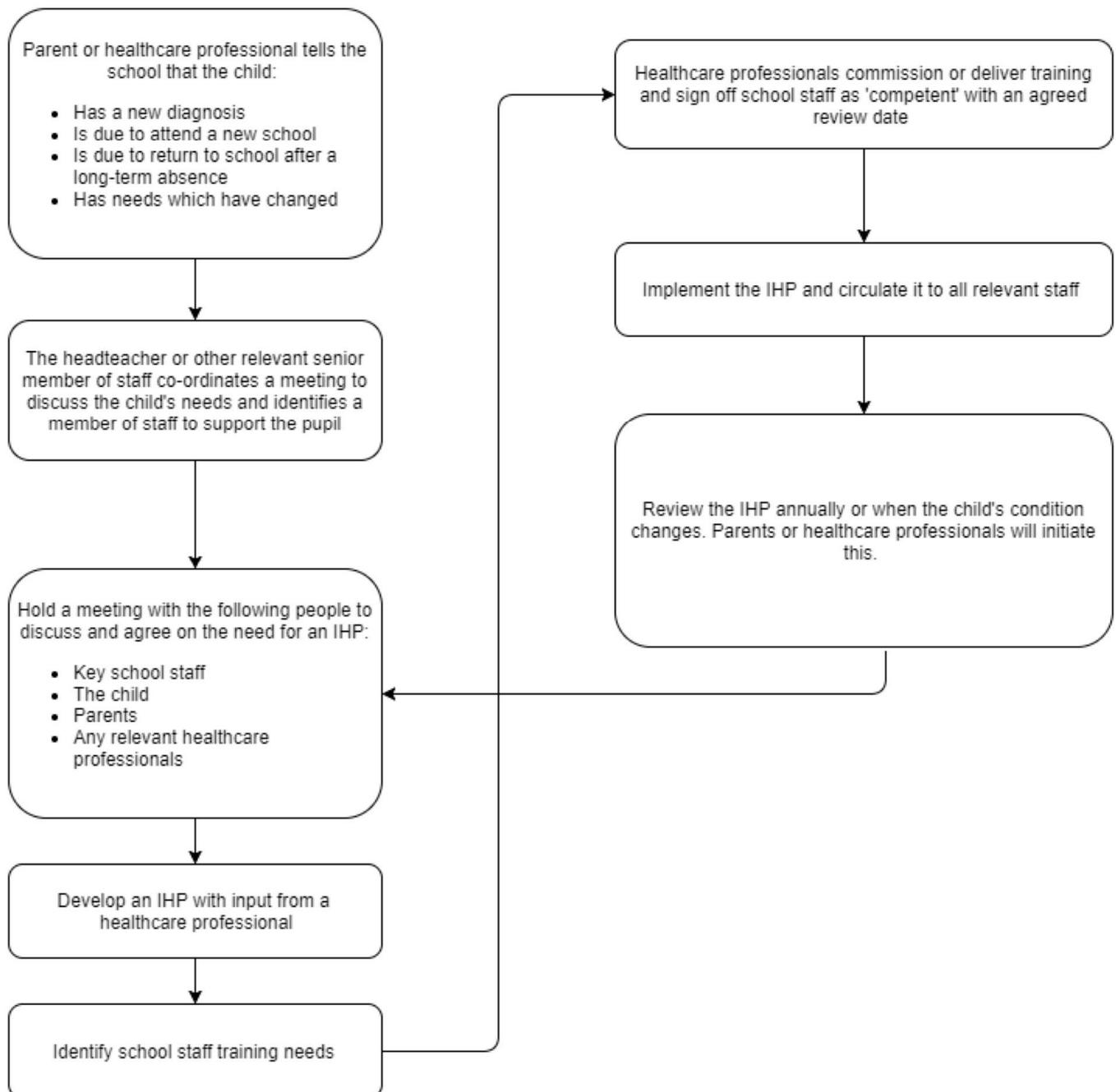
Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in other activities, and not prevent them from doing so, by considering reasonable adjustments that need to be made in order to facilitate this.

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.

Being notified that a child has a medical condition

When the school is notified that a pupil has a medical condition, the process outline here will be followed to decide whether the pupil requires an IHP. The school will make every effort to ensure that arrangements are put in place within two weeks, or by the beginning of the relevant term for pupils who are new to our school.

Pupils with medical needs flowchart



Individual healthcare plans

The Head Teacher has overall responsibility for the development of IHPs for pupils with medical conditions. Plans will be reviewed annually, or earlier if there is evidence that the pupil's needs have changed.

Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all pupils with a medical condition will require an IHP. It will be agreed with the relevant healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the Head Teacher will make the final decision.

Plans will be drawn up in partnership with the school, parents, and a relevant healthcare professional, such as the school nurse, specialist, or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

Information from IHPs will be identified, as necessary, on the pupil's education, health and care (EHC) plan.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The following details will be considered when deciding what information to record on an IHP:

- 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 consideration
- Specific support for the pupil's educational, social and emotional needs. For example, how seizure absences will be managed, use of rest periods or additional support in catching up with lessons, counselling sessions
- The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- Who in the school needs to be aware of the pupil's condition and the support required
- Arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours
- Separate arrangements or procedures required for school trips, or other school activities outside of the normal school timetable, that will ensure the pupil can participate, e.g.,

- risk assessments
- Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency, including who to contact, and contingency arrangements

Managing medicines

Prescription and non-prescription medicines will only be administered, and this will be done at school:

- When it would be detrimental to the pupil's health or school attendance not to do so **and**
- Where we have parents' written consent **and**
- Where the information given on the consent form concurs with that written on all prescription labels attached to the medication.
-

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 with the child's name
- 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.

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

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 via a supporting adult. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils, with appropriate support as necessary and not locked away. Medicines will be returned to parents to arrange for safe disposal when no longer required or when they have reached their expiry date .

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.

All controlled drugs must be kept in a secure locked box and within a secure locked cupboard, which only trained staff have access to. Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

Pupils managing their own needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents, and it will be reflected in their IHPs.

Pupils will be allowed to carry their own medicines and relevant devices if possible. Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered, if necessary.

Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable to:

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

Emergency procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHPs will clearly set out what constitutes an emergency and will explain what to do. If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent or carer arrives, or accompany the pupil to hospital.

Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so. The training will be identified during the development or review of

IHPs.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the class teacher of the child. Training will be kept up to date.

Sufficient training will be provided ~~sufficient~~ to ensure that staff are competent and have confidence in their ability to support each pupil's health needs ~~the pupils and~~ fulfil the requirements in the IHPs.

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive 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. This will be provided for new staff during their induction.

Record keeping

The Board of Trustees will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school .

IHPs are kept in a readily accessible place which all staff are aware of. Medical archiving will follow the requirements of GDPR. When a IHP is revised, the preceding version will be shredded immediately, to avoid confusion.

11.Liability and indemnity

The Gallery Trust will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk. All schools within The Gallery Trust are covered under the Risk Protection Arrangement + (RPA+), provided by the DfE.

Complaints

Parents/carers with a complaint about their child's medical condition should discuss these directly with the Head Teacher in the first instance. If the Head teacher cannot resolve the matter, they will direct the parents to the Trust's complaint procedure.

Ill health

Parents will be informed if their child has been unwell at school.

There are occasions, sometimes seasonal, when pupils will become unwell and a period absence from school is required. Wherever possible, parents should inform school prior to 9.00am that their child is unwell and will not be attending school that day. They should do so on each subsequent day that their child is ill unless this has been confirmed in an earlier communication. School will call parents / carers if a pupil is absent, and no reason has been

given; messages given via transport will not be sufficient.

It may also be the case that a pupil becomes unwell whilst in school and the class teacher/member of Senior Leadership Team will call home to inform parents/carers of this and make a collaborative decision with parents / carers about what is in the best interests of the child and whether they might need to go home. If there is not a consensus, a member of SLT will make the final decision.

We would encourage pupils to return to school as soon as it is reasonable to do so, and school will make reasonable adjustments on a case-by-case basis to enable this. However, pupils should not attend school

- **until 48 hours after** their last vomiting or diarrhoea episode
- if Calpol or paracetamol-based medication has been administered that morning before school. The exception being that this is part of their prescribed and agreed pain management plan.

We acknowledge that there are some students whose bowel movements can be erratic and apparently symptomatic of ill-health but are more attributable to their digestive systems. Consultation with parents / guardians, prior knowledge of the pupil and contextual information such as whether there is a sickness bug in school, will be taken into account when making a decision about what is in the best interests of the pupil. Likewise, there are exceptional cases when not swimming might be a requirement of returning to full health and these situations will be considered on a case-by-case basis.

Pupils may also be prescribed medication, such as antibiotics, for a short period. If the prescription requires medicine to be taken three times a day, then it is expected that these doses will be given at home: before school, immediately after school and later in the evening. If the prescription states that four doses a day are required, then school will administer one of those doses when provided with a consent form and the labelled medication (please see managing medicines above).

Links to other policies

School Accessibility Plan

The Gallery Trust Complaints

School Equality Information and Objectives

The Gallery Trust First Aid

The Gallery Trust Health and Safety

School Child Protection and Safeguarding

School Special Educational Needs Information Report and Policy