



# Policy for supporting pupils with medical needs in school

The Diamond Learning Partnership  
Trust

Date to be reviewed September 2024

## **Policy for supporting pupils with medical needs in school**

### **Rationale**

This policy outlines the correct procedures and protocols DLPT Academies will follow to support pupils with long-term and/or complex medical conditions, whilst safeguarding staff by providing clear and accurate guidance for all staff to adhere to.

This policy will be readily accessible to parents and Academy staff, and will be reviewed annually to keep up-to-date with statutory and non-statutory guidance and legislation.

### **1. School Information**

Mrs S Connell, the DLPT Chief Executive Officer (CEO), has overall responsibility for pupils' medical needs but the Diamond Learning Partnership Trust (DLPT) delegates the responsibility for supporting pupils with medical needs to the Heads of Schools, Headteachers and SENDCOs.

See separate cover sheet for staff responsible for the day to day support and storage arrangements for medications in each individual school within the DLPT.

### **Relevant legislation and guidance**

Supporting Pupils at School with Medical Conditions 2015  
Children and Families Act 2014  
Equality Act 2010  
Medicines for Children and Young People 2004  
Special Educational Needs and Disability Acts 2001  
Management of Health and Safety at Work Regulations 1999  
The Education Act 1996  
Disability Discrimination act 1995  
Health and Safety at Work Act 1974  
Medicines Act 1968

Section 100 of the Children and Families Act 2014 places a duty on Local Governing Bodies to make arrangements for supporting pupils with medical conditions at school. This is because pupils with long-term and complex medical conditions may require:

- On-going support, medicines or care whilst at school to help them manage their condition;
- monitoring and intervention in emergency circumstances.

The governing body must further comply with their duties under the Equality Act 2010 towards disabled children and adults.

## **Policy Implementation**

This policy has been drawn up in accordance with the DfE guidance *Supporting pupils at school with medical conditions (Dec 2015)*.

### Aims:

- To ensure arrangements are made for children with medical conditions to receive proper care and support whilst meeting our legal responsibilities;
- To provide guidance to all teaching and non-teaching staff members, ensuring staff are fully supported in carrying out their role to support pupils with medical conditions, including the procedure in an emergency situation;
- To identify the areas of responsibility and roles to all parties involved in the arrangements made to support pupils at school with medical conditions, including pupils, parents, staff, school nurses, Head teachers, Local Governing Bodies etc; and
- To ensure procedures are followed to limit the impact on pupils' educational attainment, social and emotional wellbeing that can be associated with medical conditions, both on site and during off site trips.

### **Procedure when the school is notified of a medical condition:**

- There could be a number of ways in which a school will be notified when a child has been identified as having a medical condition that requires support.
- The Head teacher/SENDCo should take the necessary steps to co-ordinate a meeting to discuss the child's medical support needs. The meeting will involve key Academy staff, the pupil, parents, relevant healthcare professionals and other medical/health clinicians as appropriate.
- The School Nursing Duty Desk will be able to advise on training for staff and other matters to support children with medical needs. Involvement from the School Nursing service can be requested through the duty line, or referral form for the area.
- A decision will be made as to whether an Individual Health Care Plan will be created for the child.
- For children new to the Academy, support arrangements will be in place in time for the start of the relevant school term.
- In cases where the child moves to the Academy mid-term or receives a new diagnosis, the school will make every effort to ensure the arrangements are in place within two weeks.

The school will not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be made about what support to provide based on available medical evidence and through consultation with parents.

### **Individual Health Care plans**

An Individual Health Care Plan is a document that sets out the medical needs of a child, what support is needed within the school day and details actions that need to be taken within an emergency situation. They provide clarity about what needs to be done, when and by whom. The level of detail within the plans will depend on the complexity of the child's condition and the degree of support needed. This is important because different children with the same conditions may require very different support.

Individual Health Care Plans will be written by a member of Academy staff informed by medical evidence and information from parents.

When deciding whether an Individual Health Care Plan is appropriate and proportionate, Academies should follow the steps below:

### Stage 1 – Gathering the information

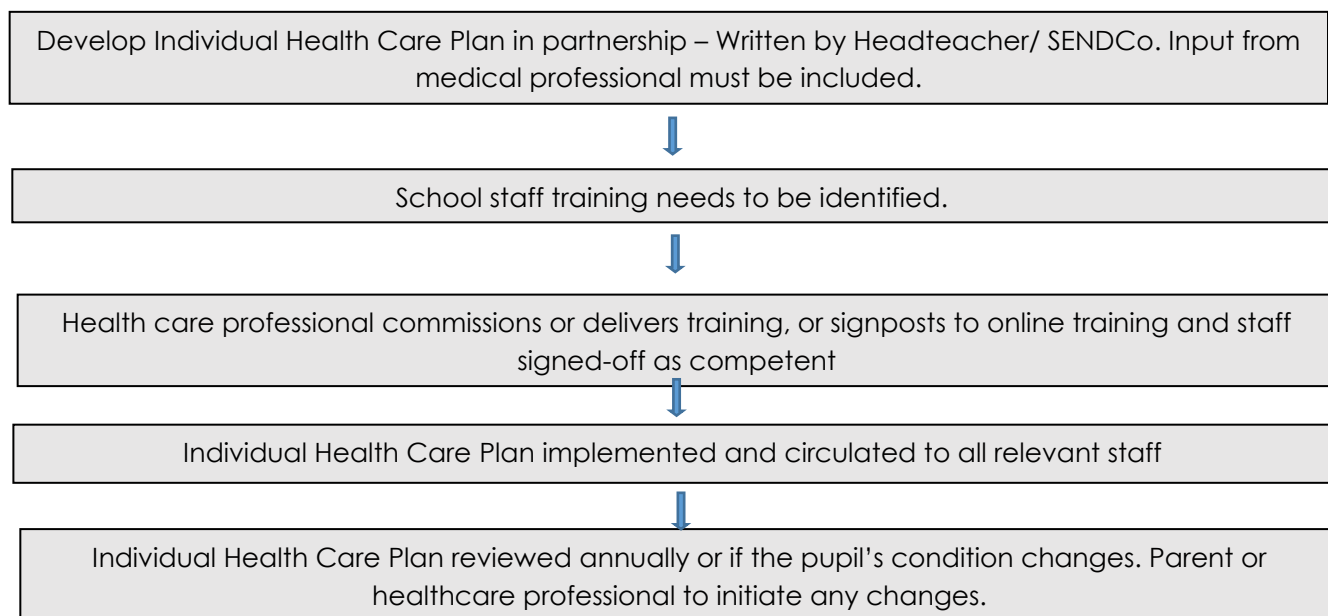
- The Headteacher or senior member of staff co-ordinates a meeting with parents to discuss the medical support needs of the pupil. A medical professional may be invited if needed.
- Pupils should be involved when possible.
- The meeting should ascertain whether an Individual Health Care Plan is appropriate, as not all children will require one.
- All parties should agree, based on the evidence, as to whether an Individual Health Care Plan would be suitable. However, the Head teacher is best placed to take the final view if consensus cannot be reached.
- The decision should be based on:
  - whether there is a high risk that emergency intervention will be needed;
  - whether the medical condition is long-term and/or complex;
  - whether the child is returning to school following a period of hospital education or alternative provision (including home tuition);
  - whether medical conditions are likely to fluctuate.

A member or members of the school staff will be identified on the Individual Health Care Plan as being the key person or people who will provide support to the pupil.

### Stage 2: Developing an Individual Health Care Plan

The purpose of an Individual Health Care Plan is to capture steps which the school will take to help the child manage their condition and overcome any potential barriers to getting the most from their education.

Once the decision has been made to create an Individual Health Care Plan the outlined process should be followed: See appendix A for the DLPT's Individual Health Care Plan proforma.



## Roles and Responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. Partnership working between Academy staff, healthcare professionals, parents and pupils will be critical to ensure that the needs of pupils with medical conditions are met effectively.

The **Headteacher** is responsible for:

- ensuring that a policy is in place to meet the needs of children with medical conditions;
- implementing this policy effectively and ensuring that **all** relevant staff members are aware of how to support pupils with medical conditions including their role in its implementation;
- ensuring all staff who need to know, are aware of the child's condition and their Individual Health Care Plan;
- ensuring that the appropriate level of insurance is in place and appropriately reflects the level of risk or that the academy is a member of the Department for Education's Risk Protection Arrangement (RPA);
- ensure that insurance policies are accessible to staff providing medical support;
- ensuring that staff have received suitable training and are competent before they take on responsibility to support children with medical conditions;

**Healthcare Professionals** are responsible for:

- notifying the Academy when a child has been identified as having a medical condition which will require support in school. This should, where possible, be done before the child starts at the school;
- taking a lead role in ensuring that pupils with medical conditions are properly supported in school, including supporting staff on implementing a child's plan;
- working with Headteachers/SENDCos to determine the training needs of Academy staff and agree who would be best placed to provide the training;
- confirming that Academy staff are proficient to undertake healthcare procedures and administer medicines;

**Academy Staff** (teaching and non-teaching) should:

- understand that any member of Academy staff may volunteer or be asked to provide support to pupils with medical conditions, including the administering of medicines although they cannot be enforced to do so, this is a voluntary role;
- understand the role they have in helping to meet the needs of the child with a medical condition;
- work towards or complete targets and actions identified within the Individual Health Care Plan.

Where possible, **pupils** should:

- provide information about how their condition affects them;
- be fully involved in discussions about their medical support needs;
- comply with their Individual Health Care Plan.

**Parents** should:

- provide named and dated medicine and equipment;
- ensure they or another nominated adult are contactable at all times;
- provide sufficient and up-to-date information to the school about their child's medical needs;
- be involved and assist in drafting and developing their child's Individual Health Care Plan.

**The Local Authority** is responsible for:

- promoting cooperation between relevant partners such as governing bodies of maintained schools, proprietors of academies, clinical commissioning groups and NHS England, with a view to improving well-being of children so far as relating to their physical and mental health and their education, training and recreation;
- providing support, advice and guidance, including suitable training for school staff to ensure that the support specified within the Individual Health Care Plans can be delivered effectively;
- working with schools to ensure that schools support pupils with medical conditions to attend full time;
- making alternative arrangements where pupils would not receive a suitable education in a mainstream school because of their health needs when it is clear that a child will be away from school for 15 days or more because of their health needs.

### **Emergency Procedures**

As part of general risk management processes, all schools within the DLPT have the following arrangements in place for dealing with emergencies situations:

- All pupils in the school should inform a teacher immediately if they think help is needed;
- The pupil's Individual Health Care Plan will clearly define what constitutes an emergency and will explain what to do, including ensuring that all relevant staff are aware of the emergency symptoms and procedures for the individual pupil;
- When a pupil needs to be taken to hospital, staff will stay with the child until the parent arrives. If a child is taken to hospital by ambulance, staff will accompany the pupil;
- Individual schools have specific procedures for contacting emergency services on or off site, and all staff are aware of these procedures;
- If it is not possible to follow the emergency procedures detailed in the Individual Health and Care Plan, a qualified First Aider will decide on the emergency course of action.

### **Staff Training and Support**

Any member of Academy staff providing support to a pupil with medical needs must have received suitable training. Staff training needs will be identified during the development or review of the pupils Individual Health Care Plan. Staff who provide support to pupils with medical conditions will, when possible, be included in the meetings where this is discussed. The Healthcare Professional will lead on identifying and agreeing with the school what type and level of training required. It will be the school's responsibility to arrange training and ensure that this remains up-to-date. The Healthcare Professional, including the school nurse, will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

The training must be sufficient to ensure all staff are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements set out in the Individual Health Care Plan. They will need to understand the specific medical conditions they are being asked to deal with, their implications and preventative measures.

**Where training is required for administration of a specific medicine, or health care procedure, this is stated on the Individual Health and Care Plan. A first-aid certificate does not constitute appropriate training in supporting children with medical conditions.**

As well as individual training, the school will make arrangements for whole school awareness training and induction arrangements for new members of staff. This will include preventative and emergency measures so that staff can recognise and act quickly if a problem occurs.

### **The child's role in managing their own medical needs**

Pupils may be competent to manage their own health needs and medicines. Academy staff will discuss individual competencies with parents and ensure the Individual Health Care Plan reflects the pupil's competencies for managing their own medicines and procedures.

Competent pupils will be allowed to carry their own medicines and relevant devices, or will have access to their medicines for self-medication quickly and easily, wherever possible. Pupils who can take their medicines themselves may require an appropriate level of supervision. When it is not appropriate for the pupil to self-manage, staff will help to administer medicines and manage procedures for them.

If a pupil refuses to take their own medicine or refuses to carry out necessary procedures relating to their medical needs, staff will not force them to do so, but will follow the procedure agreed within the pupil's Individual Health Care Plan. A member of the Senior Leadership Team will be responsible for informing the pupil's parents, so that alternative options can be considered for future situations.

### **Procedures for managing of medicines**

Medication and request forms should be handed to staff by parents or carers, never the child. All medication should be provided in the original packaging with the prescriber's instructions.

In order to manage pupil's medical conditions effectively, members of staff will not prevent pupils from eating, drinking or taking breaks when required.

The following procedures will be followed to manage medicines on-site:

- a pupil under 16 should never be given prescribed or non-prescribed medicines without their parent's written consent. See appendix B for the DLPT parental agreement for administering medicine;
- only prescribed medicines that are in-date, labelled and include instructions for administration, dosage and storage will be accepted by the school. In most circumstances, the medicines should be provided in the original container and dispensed by a pharmacist, with the exception of insulin, which will be inside an insulin pen or pump;
- Controlled drugs that have been prescribed for a child will be stored securely in a non-portable container and only named Academy staff will have access;
- controlled drugs will be easily accessible in an emergency at all times; and emergency medicines such as asthma medication, adrenaline pens and diabetes medication should be with the child or readily available – not locked away.

## Record Keeping

Written records of all medicines administered to individual children will be kept with the medication detailing what, how and how much was administered, when and by whom. See appendix C for the DLPT's record form of medicine administered to an individual child.

These accurate records offer protection to staff and children, whilst providing evidence that agreed procedures have been followed.

### Controlled Drugs:

Controlled drugs must be kept in a locked non-portable container. There must be named members of staff who have access to this container. A record must be kept when this container is opened and when controlled drugs are administered. Two members of staff should **ALWAYS** be present when controlled drugs are administered or when the container with controlled drugs in it is opened. See appendix D for the DLPT's Controlled Medication Record sheet.

### Disposal of Medicines:

Staff should not dispose of medicines. Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. They should also collect medicines held at the end of each term.

## Off-site procedures

Each Academy will assess what reasonable adjustments can be made to enable pupils with medical needs to participate fully and safely during off-site trips.

All staff members should be aware of how the pupils individual medical condition will impact their participation, but should allow enough flexibility for pupils to participate according to their own abilities, unless evidence from a GP states otherwise.

A risk assessment will be approved by a member of the Senior Leadership Team prior to the off-site trip, to ensure pupils with medical conditions can participate safely. This will require consultation with parents and pupils and advice from the relevant healthcare professionals.

## Unacceptable practice

Staff should use their discretion and judge each case on its merits with reference to the child's Individual Health Care Plan. However, it is **not** acceptable practice to:

- assume that every child with the same condition requires the same treatment;
- prevent children from accessing their inhalers or medication easily, and administering their medication when and where necessary;
- if the pupil becomes ill, send them to the school First aid room unaccompanied or with someone unsuitable;
- send pupils with medical conditions home frequently or prevent them from participating in normal school activities, unless specified in their Individual Health Care Plan.

- penalise pupils for their attendance record if absences relate to their medical condition i.e. hospital appointments;
- ignore the views of the pupil or their parents; or ignore medical evidence or opinion, (although this may be challenged);
- prevent children from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively;
- create barriers to pupils participating in any aspect of school life, including off-site school trips; or
- require parents to attend school to administer medication or provide medical support to their child where arrangements have been agreed as part of the child's Individual Health Care Plan.

### **Insurance**

The Academy provides the appropriate level of insurance to cover staff providing support to pupils with medical conditions in line with this policy and the pupils Individual Health Care Plan.

### **Complaints**

Should parents or pupils be dissatisfied with the support a DLPT Academy has provided, the initial concern should be raised with the Headteacher. If the concern cannot be resolved with the school directly, a formal complaint can be made via the school's complaints procedure, which is accessible from the school website or on request from the school office.

**Individual Health Care Plan (2 pages)**

School	
Pupil Name & Address	
Date of Birth	
Class	
Medical Diagnosis or condition	
Triggers	
<b>Contact Information</b> <b>Family Contact No.1</b> <b>Name</b> _____  <b>Telephone (mobile)</b> _____  Telephone (home) _____  Telephone (work) _____  Relationship to child _____	<b>Family Contact No.2</b> <b>Name</b> _____  <b>Telephone (mobile)</b> _____  Telephone (home) _____  Telephone (work) _____  Relationship to child _____
Clinic/ Hospital Contact Name _____  Telephone _____	GP Contact Name _____ Telephone _____
Describe medical needs and give details of symptoms	
Daily care requirements	
Staff involved in daily care requirements	
What constitutes an emergency for the child	

Action to be taken in the event of an emergency for the child.	
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**Date** \_\_\_\_\_

**Review date** \_\_\_\_\_

**Parent's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Head Teacher's signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**This will be reviewed at least annually or earlier if the child's needs change**

**Administration of Medicine Form (2 pages)**

(One form to be completed for each medicine)

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

School		
Pupil Name & Address		
Date of Birth		
Class		
Medical Diagnosis or condition		
<b>Contact Information</b> <b>Family Contact No.1</b>	<b>Family Contact No.2</b>	
Name _____	Name _____	
Telephone (mobile) _____	Telephone (mobile) _____	
Telephone (home) _____	Telephone (home) _____	
Telephone (work) _____	Telephone (work) _____	
Relationship to child _____	Relationship to child _____	
<b>Clinic/ Hospital Contact</b>	<b>GP Contact</b>	
Name _____	Name _____	
Telephone _____	Telephone _____	
Describe medical needs and give details of child's symptoms		
Daily care requirements (e.g. before sport/ lunchtime)		
Describe what constitutes an emergency for the child and the action to take if this occurs		

**Medicine: To be in original container with label as dispensed by the pharmacy**

<b>Name of Medicine</b> <i>(as described on the container)</i>	
<b>Dosage</b>	
<b>Time to be given</b>	
<b>Are there any side effects that the School should know about?</b>	
<b>Who is responsible in an Emergency: different for off-site activities)</b>	

I understand that I must deliver the medicine safely to **the school office.**

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to **appropriately trained** 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.

**Date** \_\_\_\_\_

**Review date** \_\_\_\_\_

**Parent's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Headteacher's signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**This will be reviewed at least annually or earlier if the child's needs change**



