

# **St Alban's Catholic High School**



## **Policy for Supporting Pupils at School with Medical Conditions**

**Approved by Infrastructure Governors on: 22 November 2023**

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## 1. Purpose

The purpose of the Policy for Supporting Pupils at School with Medical Conditions is 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 sporting activities

The Governing Board will implement the policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupil's condition, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- Providing supply teachers with appropriate information about the policy and relevant pupils
- Developing and monitoring individual healthcare plans (IHPs)

This policy meets the school's statutory requirements under section 100 of the Children and Families Act 2014<sup>1</sup> which places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions.

This Policy pays due regard to the Department for Education's statutory guidance Supporting Pupils at School Medical Conditions<sup>2</sup>.

## 2. Roles & Responsibilities

### 2.1 The governing Board

The Governing Board must make arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed and implemented. They should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.

### 2.2 The Headteacher

The Headteacher will ensure that their school's policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. The Headteacher will ensure that all staff who need to know are aware of the child's condition, ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. This may involve recruiting a member of staff for this purpose.

The Headteacher has overall responsibility for the development of individual healthcare plans, will make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way. The Headteacher will ensure that contact is made with the school nursing service in the case of any child 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.

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<sup>1</sup> <http://www.legislation.gov.uk/ukpga/2014/6/section/100/enacted>

<sup>2</sup> [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/803956/supporting-pupils-at-school-with-medical-conditions.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/803956/supporting-pupils-at-school-with-medical-conditions.pdf)

### 2.3 Parents

Parents will provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents are key partners and should be involved in the development and review of their child's individual healthcare plan, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

### 2.4 Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other pupils will often be sensitive to the needs of those with medical conditions.

### 2.5 School Staff

Any member of school staff may be asked to provide support to pupils with medical conditions. Where this includes the administering of medicines, staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help. Staff must not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect requirements within individual healthcare plans).

### 2.6 School Nurse

The School Nurse is Natasha Lawrence and she can be contacted on 07704 018138 or at [Natasha.lawrence@suffolk.gov.uk](mailto:Natasha.lawrence@suffolk.gov.uk).

The school has access to school nursing services. They are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they should do this before the child starts at the school. They would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with medical conditions, but may support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training. School nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs; for example, there are good models of local specialist nursing teams offering training to local school staff, hosted by a local school. Community nursing teams will also be a valuable potential resource for a school seeking advice and support in relation to children with a medical condition. See also section 3 below about training for school staff.

### 2.7 Other Healthcare Professionals

Other healthcare professionals, including GPs and paediatricians, should notify the school nurse when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing individual healthcare plans. Specialist local health teams may be able to provide support in schools for children with particular conditions (e.g. asthma, diabetes, epilepsy).

### 3. Staff Training & Support

Any member of school staff providing support to a pupil with medical needs should have received suitable training. All Office Staff and a number of other key staff have received first aid training. The majority of medical emergencies are dealt with by our office staff. All medical information on students can be accessed on SIMS. Staff will be given dedicated time at the start of each school year to look through this information and familiarise themselves with the medical needs of their classes.

In addition to this teaching staff of students with IHPs will be sent these as soon as they are written or updated. These can also be found on ClassCharts. Each student with a significant medical condition has a icon that appears on ClassCharts and staff know where to look for the key information on the page.

### 4. Managing Medicine on School Premises

Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.

- no child under 16 will be given prescription or non-prescription medicines without their parent's written consent – except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, every effort will be made to encourage the child or young person to involve their parents while respecting their right to confidentiality;
- no non-prescription medicine, such as pain killers, are administered without prior agreement with parents/carers (see above);
- children under 16 will never be given medicine containing aspirin unless prescribed by a doctor;
- medication, e.g. for pain relief, will not be administered without first checking maximum dosages and when the previous dose was taken or without first informing parents
- where clinically possible, the school will seek to ensure that parents request that medicines are prescribed in dose frequencies which enable them to be taken outside school hours;
- schools will only accept prescribed medicines if these are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin, which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container;
- all medicines should be stored safely. Children will know where their medicines are at all times and be able to access them immediately. Where relevant, they will know who holds the key to the storage facility. 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;
- students with severe allergies will have one EpiPen with them at all times and one stored in the main office. When on school trips the trip leader will take the office EpiPen.
- when no longer required, medicines should be returned to the parent to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps;
- a child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. Monitoring arrangements may be necessary. Schools should otherwise keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency. A record should be kept of any doses used and the amount of the controlled drug held;

- school staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines should do so in accordance with the prescriber's instructions. Schools should keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted in school.

#### 4.1 Controlled Drugs

Controlled drugs are prescription medicines that are controlled under the Misuse of Drugs Regulations 2001<sup>3</sup> 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 main office and only office staff will 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.

### 5. Record Keeping

A written record is kept of any medicines that are administered by first aiders in the school. This record is kept in a folder in the main school office.

### 6. Individual Healthcare Plans

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to a team made up of an assistant headteacher, SENCO and pastoral staff. IHPs will be written in conjunction with parents/school staff/healthcare professionals and the student themselves.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed. This is indicated on the IHP.

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 a 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 headteacher will make the final decision.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has SEN but does not have a statement or EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed.

IHPs are developed by Mr N Berry, Assistant Headteacher and Mrs C Picard, SENCO, alongside our pastoral team. IHPs are completed on a school template, designed alongside the education team at Ipswich Hospital and will include some or all of the following information:

- 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 time between lessons

<sup>3</sup> <http://www.legislation.gov.uk/ukxi/2001/3998/contents/made>

- 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, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- Support for education, social and emotional wellbeing
- 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

## 7. Emergency Procedures

For students with significant medical needs the IHP will detail the response of key named staff in case of a medical emergency. It will also indicate what constitutes an emergency and explain what to do, especially as to situations in which the emergency services should be called.

As part of general risk management processes, the school has arrangements in place for dealing with emergencies for all school activities wherever they take place, including on school trips within and outside the UK (Details for trips are detailed on the Evolve+ trip pack online).

Other students in the school know what to do in general terms, such as informing a teacher immediately if they think help is needed, especially students named as “buddies” on an IHP. If a child needs to be taken to hospital, staff should stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.

If an EpiPen is used in school or on a school trip the emergency services must be phoned immediately.

## 8. Equal Opportunities

The Governing Board will ensure that the school enables pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. The school 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.

The school acknowledges the Equalities Act 2010 and schools<sup>4</sup> and works proactively to support all its pupils.

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<sup>4</sup>[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/315587/Equality\\_Act\\_Advice\\_Final.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/315587/Equality_Act_Advice_Final.pdf)

## 9. Unacceptable Practice:

Although school staff are encouraged to use their professional discretion and judge each case on its merits with reference to the child's individual healthcare plan, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or 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 individual healthcare plans;
- if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise children 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 child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs;
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

## 10. Liability & Indemnity

Our Lady of Walsingham Catholic Multi Academy trust is a member of the Department for Education's Risk Protection Arrangement (RPA).

## 11. Complaints

Complaints will initially be directed to Mr N Berry, Assistant Headteacher, who will look into the complaint alongside the SEND and pastoral teams. This will then be reported to the Headteacher. If this process is unsuccessful in resolving the complaint the school's complaints policy will be initiated.



## 12. Blank Templates



### Medical Emergency Procedures

**PLEASE PUT A COPY OF THIS FORM BY ALL OFFICE PHONES.**

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	01473 726178
Your name	
Your location – school / setting address	St Alban's Catholic High School Digby Road Ipswich
State the postcode ( <i>please note that postcodes for satellite navigation systems may differ from the postal code</i> )	IP4 3NJ
Provide the exact location of the patient within the school setting	
Provide the name of the patient and a brief description of their symptoms	
Inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient	



St Alban's Catholic  
High School

**Medical Plan for:**

Name:

Form:

Gender:

D.O.B.:

Photo

**Summary Information:**

(Key information – see below for details)

**Medical Condition**

**Medication**

**Symptoms**

**Triggers**

**Treatment**

**Who to contact** (family member)

**Further Details:**

**Details of known Medical Conditions**

**Associated Professionals**

**Key school staff**

**Emergency Situations**

**What constitutes an emergency?**

**What are the signs/symptoms**

**What are the triggers?**

<b>What action must be taken and in what order</b>		
•		
<b>Provisions</b>		
<b>Specific Support for Education, social and emotional wellbeing:</b>		
•		
<b>Adaptations to the environment?</b>	<b>Lift Key?</b>	<b>Time out pass?</b>
<b>Rest Periods?</b>	<b>Buddy/TA?</b>	<b>Others?</b>

Medical Plan completed by:

Date:

Review date: