

# Supporting Pupils with Medical Conditions

Francis Baily Primary School



## Review

<b>Approved by:</b>	Local Governing Body	<b>Date:</b>	July 2025
<b>Last Review Date:</b>	July 2025	<b>Next Review Date:</b>	July 2026

## Responsibilities

<b>School Senior Staff:</b>	Implementation at school level
<b>Governors:</b>	Check school compliance with policy and report breaches or concerns to Trustees
<b>Trustees:</b>	Review and approve the policy Trustees also confirm that Governors are carrying out their role adequately

## Material Changes to the Policy Since the Last Review

<b>Section:</b>	None
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## Introduction

This policy is written in regard to Section 100 of the Children and Families Act 2014 and follows guidance from "Supporting pupils at school with medical conditions" 2014. It details arrangements so that pupils at Francis Baily Primary School with physical and mental health conditions are properly supported and have full access to education, including school trips and physical education.

### 1) Definition

Pupils' medical needs may be broadly summarised as being of two types:

- a) Short-term, affecting their participation in school activities.
- b) Long-term, potentially limiting their access to education and requiring extra care and support.

### 2) Aims

- To ensure pupils at school with medical conditions, in terms of both physical and mental health, are properly supported so they can play a full and active role in school life, remain healthy and achieve their academic potential.
- To ensure the needs of children with medical conditions are effectively supported in consultation with health and social care professionals, their parents and the pupils themselves.

### 3) Procedure

The Headteacher is responsible for ensuring that whenever the school is notified that a pupil has a medical condition:

- sufficient staff are suitably trained
- all relevant staff are made aware of a pupil's condition
- cover arrangements in case of staff absence/turnover are always available
- supply teachers are briefed
- risk assessments for visits and activities out of the normal timetable are carried out
- individual healthcare plans are monitored (at least annually)
- transitional arrangements between schools are carried out
- if a pupil's needs change, the above measures are adjusted accordingly.

When pupils join Francis Baily Primary School at the start of a new academic year, these arrangements should be in place for the start of term. Where a pupil joins mid-term or a new diagnosis is given, arrangements should be in place as soon as possible, ideally within two weeks.

Any pupil with a medical condition requiring regular medication or support in school should have an Individual Health Care (IHC) Plan, which details the support that the child needs.

If the parents, healthcare professional and school agree that a healthcare plan is inappropriate or disproportionate, a record of the child's medical condition and any implications for the child will be kept in the school's medical record and the pupil's individual records.

#### **4) Managing Medicines**

Francis Baily Primary School follows the following procedures when managing medicines:

- medicines are only administered at school when it would be detrimental to a child's health or school attendance not to do so
- no child under 16 is given prescription or non-prescription medicines without their parent's written consent
- a child under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents should be informed.
- where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours
- school 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 are stored safely in the appropriate space. Children know where their medicines are at all times and be able to access them immediately. Where relevant, they should know who holds the key to the storage facility.

#### **5) Managing an Emergency**

Where a child has an individual healthcare plan, this will clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. All children/pupils are aware that in an emergency, they are to inform the nearest staff member, who will alert the school nurse, school nurse/a senior member of staff.

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

#### **6) Individual Health Care Plan (IHC Plan)**

The following information should be considered when writing an Individual Health Care plan:

- the medical condition, its triggers, signs, symptoms and treatments
- the pupil's resulting needs, including medication and other treatments, times, facilities, equipment, testing, dietary requirements and environmental issues
- specific support for the pupil's educational, social and emotional needs
- the level of support needed, including in emergencies
- who will provide support, their training needs, expectations of their role, confirmation of their proficiency and cover arrangements
- who in school needs to be aware of the child's condition and the support required
- medical consent form completed allowing permission for medication to be administered by a member of staff or self-administered (children who are competent should be encouraged to take responsibility for managing their own medicines and procedures, with an appropriate level of supervision)
- 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
- confidentiality

- what to do if a pupil refuses to take medicine or carry out a necessary procedure to support medical needs
- what to do in an emergency, who to contact and contingency arrangements
- where a pupil has Special Educational Needs or Disability (SEND) but does not have an EHC Plan, their SEND should be mentioned in their IHC Plan
- personal care plans for serious medical needs and care plans for allergies continue to be supplied by the school nurse team and made accessible as appropriate
- there is a designated member of staff who monitors Care Plans and medication stored in the school
- staff training is updated yearly in allergy awareness, use of auto-injectors
- training modules are made available to all staff for managing Diabetes, Epilepsy and Asthma.

## 7) Roles & Responsibilities

Supporting a pupil with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with any relevant person or agency to provide effective support for the child.

### The Governing Body:

- must ensure arrangements are in place to support pupils with medical conditions as detailed in this policy and give parents and pupils confidence in the school's ability to provide effective support for medical conditions in school
- must ensure sufficient staff receive suitable training and are competent to support pupils with medical conditions
- must ensure the appropriate level of insurance is in place and appropriately reflects the level of risk.

### The Headteacher:

- should ensure all staff are aware of this policy and understand their role in its implementation
- should ensure all staff who need to know are informed of a pupil's condition
- should ensure sufficient numbers of staff are trained to implement the policy and deliver IHC Plans, including in emergency and contingency situations, and they are appropriately insured
- is responsible for the development of IHC Plans
- should liaise with the School Matron to ensure contact is made with the school nursing service in the case of any child with a medical condition who has not been brought to the attention of the school nurse.

### School Staff:

- any staff member may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so
- should receive sufficient and suitable training and achieve the necessary level of competency before taking on the responsibility of supporting pupils with medical conditions
- any staff member should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

### School Nurses:

- are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school
- may support staff in implementing a pupil's IHC Plan and provide advice and liaison.

### Other Healthcare Professionals:

- should notify the school nurse when a child has been identified as having a medical condition that will require support at school
- may provide advice on developing healthcare plans
- specialist local teams may be able to provide support for particular conditions (e.g. asthma, diabetes).

### Pupils:

- should, wherever possible, be fully involved in discussions about their medical support needs and contribute to and comply with their IHC Plan
- should be encouraged to develop independence when managing their medical condition.

**Parents:**

- must provide the school with sufficient and up-to-date information about their child's medical needs
- are the key partners and should be involved in the development and review of their child's IHC Plan on a regular basis
- should carry out any action they have agreed to as part of the IHC Plan implementation
- should provide the school within date medication to support their child's medical condition.

**8) Additional Information**

The school does not have to accept a child identified as having a medical condition at times when it would be detrimental to the health of that child or others to do so.

The following practice is considered not acceptable:

- preventing children from easily accessing their medication and administering it when and where necessary
- assuming children with the same condition require the same treatment
- ignoring the views of the child's parents, ignoring medical advice or opinion
- sending pupils with medical conditions home frequently or preventing them from staying for normal school activities (unless specified in the IHC Plan)
- penalising pupils for their attendance record if their absences are related to their medical condition that is recognised under this policy
- preventing pupils from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively
- to require parents to attend school to administer medication or provide medical support to their child, including toilet issues (no parent should have to give up working because the school is failing to support their child's medical needs)
- preventing pupils from participating or creating unnecessary barriers to them participating, in any aspect of school life, including school trips (e.g. requiring parents to accompany their child).

**9) Complaints**

Should parents or pupils be dissatisfied with the support provided, they should discuss their concerns directly with the school. If this does not resolve the issue, they may formally complain via the school's complaints procedure.

**10) Key & Trained Staff**

- Mrs Lorna Taylor, Office Manager
- Mrs Andrea Thorogood, Assistant Headteacher and SENCo

A group of staff have undertaken first aid training; a list is kept up to date by the school office.

**11) Monitoring, Evaluation & Review**

The school's Leadership team will continually monitor the quality of provision. The school will review this policy regularly and assess its implementation and effectiveness.