Supporting pupils with Medical Conditions Policy



EPWORTH

EDUCATION TRUST

Reviewed by:	J Buckley (Operations)
Approved by Education & Ethos Committee:	26 th September 2023
Next Review Date:	Autumn 2024

Mission Statement

The Epworth Trust is a Multi-Academy Trust established with the aim of providing outstanding learning and opportunities for the children within its care.

Children are our nation's most precious resource. Their school life and learning experience will shape them for the whole of their lives.

Safeguarding Statement

At the Epworth Trust, we recognise our moral and statutory responsibility to safeguard and promote the welfare of all children.

We work to provide a safe and welcoming environment where children are respected and valued. We are alert to the signs of abuse and neglect and follow our procedures to ensure that children receive effective support, protection and justice.

The procedures contained in the Safeguarding Policy apply to all staff, volunteers and governors.

Version Control

Change Record

Date	Author	Version	Section	Reason for Change
4.3.19	J Buckley	2	throughout	Sections added: New statement of intent, Legal Framework, roles & responsibilities, admissions, AAIs, emergency procedures, unacceptable practise, home-to-school transport, defibrillators
15.4.20	J Buckley	3	Section 1.2	Addition of policies
	,		Section 18.10	Guidance re. action required if no consent for inhaler
			Appendix 4	Statement updated re. inhaler consent
				New trust name and logo change
			Notification	Arrangements re. new pupils joining
			Liability	Additional section
			Through-out	Removal of pastoral manager.
				Changed to designated staff.
			Defibs	Removal of Defib section. Now added to 1 st aid policy
19/1/22	J Buckley	4	throughout	Policy reviewed so all schools within Epworth can now use
			Legislation	Addition of Natashas Law & DfE 2021 Admission Code
			Roles &	Added Named Person,
			Responsibilities	summary added for Healthcare
			·	professionals, removal of
				Ofsted. Trustee board changed
				to school LAB.
			Managing	Removal of Managing
			Medicines	Medicines, AAis and Inhalers –
				these will be added to First
				Aid & Medication
			Emergency	Administration Policy Removed section and added to
			procedures	other areas (IHPs, Named
			procedures	Person)
			Appendices	Removal of Appendices – to be added to First Aid &
				Medication Administration

			Policy Template as schools have different useforms in
			place for this.
2/8/23	J Buckley	5	No Changes made

Contents

Statement of intent

- 1. Legal framework
- 2. Roles and responsibilities
- 3. Admissions
- 4. Notification of a Pupil Medical Condition
- 5. Individual Healthcare Plans (IHPs)
- 6. Staff training and support
- 7. Managing medication
- 8. Unacceptable practice
- 9. Home-to-school transport
- 10. Liability and indemnity
- 11. Complaints
- 12. Monitoring and review

Appendices

- a) Flowchart of IHP
- b) Named Person/Role at each school for Responsibility for pupils with Medical Conditions

Statement of intent

The Epworth Education Trust has a duty to ensure arrangements are in place to support pupils with medical conditions. The aim of this policy is to ensure that all pupils with medical conditions, in terms of both physical and mental health, receive appropriate support allowing them to play a full and active role in school life, remain healthy, achieve their academic potential and access to enjoy the same opportunities at school as any other child including access to school trips and physical education.

The Epworth Education Trust believes it is important that parents/carers of pupils with medical conditions feel confident that the school provides effective support for their child's medical condition, and that pupils feel safe in the school environment.

Some pupils with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. The Epworth Education Trust has a duty to comply with the Act in all such cases.

In addition, some pupils with medical conditions may also have SEND and have an education, health, and care (EHC) plan collating their health, social and SEND provision. For these pupils, compliance with the DfE's 'Special educational needs and disability code of practice: 0 to 25 years and the school's SEND policy will ensure compliance with legal duties.

1. Legal framework

- 1.1. This policy has due regard to legislation and guidance including, but not limited to, the following:
 - The Children and Families Act 2014
 - The Education Act 2002
 - The Education Act 1996 (as amended)
 - The Children Act 1989
 - The National Health Service Act 2006 (as amended)
 - The Equality Act 2010
 - · The Health and Safety at Work etc. Act 1974
 - The Misuse of Drugs Act 1971
 - The Medicines Act 1968
 - The School Premises (England) Regulations 2012 (as amended)
 - The Special Educational Needs and Disability Regulations 2014 (as amended)
 - The Human Medicines (Amendment) Regulations 2017
 - The Food Information (Amendment) (England) Regulations 2019 (Natasha's Law)
 - DfE (2015) 'Special educational needs and disability code of practice: 0-25 years'
 - DfE (2015) 'Supporting pupils at school with medical conditions'.
 - DfE (2000) 'Guidance on first aid for schools'
 - Department of Health (2017) 'Guidance on the use of adrenaline auto-injectors in schools'
 - DFE (2000) 'Guidance on first aid for schools'
 - Ofsted (2019) 'Education inspection framework'
 - DfE (2021) 'School Admissions Code'
- 1.2. This policy has due regard to the following trust/school policies:
 - SEND Policy
 - Whole School Food Policy
 - Allergen & Anaphylaxis Policy
 - Health & safety Policy
 - Pupils with Additional Health Needs Attendance Policy
 - · Complaints Procedure Policy
 - First Aid Policy
 - Attendance Policy

2. Roles and Responsibilities

Supporting a child with a medication condition during school hours is not the sole responsibility of one person. The school will work collaboratively; both with staff within the organisation and with outside agencies, as the circumstances of each child dictates.

The Local Advisory Board is responsible for

- Ensuring that arrangements are in place to support pupils with medical conditions.
- Ensuring that pupils with medical conditions can access and enjoy the same opportunities as any other pupil at the school.
- Ensuring that, following long-term or frequent absence, pupils with medical conditions are reintegrated effectively.

- Ensuring that the focus is on the needs of each pupil and what support is required to support their individual needs.
- Ensuring that no prospective pupil is denied admission to the school because arrangements for their medical condition have not been made.
- Ensuring that pupils' health is not put at unnecessary risk. As a result, the board holds the right to not accept a pupil into school at times where it would be detrimental to the health of that pupil or others to do so, such as where the child has an infectious disease.
- Ensuring that policies, plans, procedures and systems are properly and effectively implemented.

The Headteacher is responsible for:

- Overseeing the management and provision of support for children with medical conditions, including the overall development of IHPs.
- Ensuring that all members of staff are properly trained or recruited to provide the necessary support and are able to access information and other teaching support materials as needed.
- Ensuring that all staff are aware of this policy and understand their role in its implementation.
- Ensures that staff are appropriately insured and aware of the insurance arrangements.

The Named Person responsible for children with Medical conditions is responsible for:

- Informing relevant staff of medical conditions and ensuring that ALL staff are made aware of any pupil that has a new medical condition and how best they can support them, even if not directly involved with their healthcare plan.
- Where appropriate informing other pupils within the class of the child's medical condition and informing them what they should do if they feel emergency help is required for that child eg. telling a staff member.
- Arranging training for identified staff
- Developing, monitoring, and reviewing IHPs, working with parents, pupils and other healthcare professionals and agencies.
- Assisting with risk assessments for for school activities and visits/trips.
- Ensuring that staff are aware of the need to communicate necessary information about medical conditions to supply staff where appropriate.
- Providing support to pupils with medical conditions, including the administering of medicines. This will be voluntary unless specifically recruited for this role.

School Staff are responsible for:

- The day-to-day management of the medical conditions of children they work with, in line with training received as set out in IHPs
- Providing information about medical conditions to supply staff where possible.
- Working with the Named person in school to ensure that risk assessments are carried out for school activities and visits/trips.
- Providing support to pupils with medical conditions, including the administering of medicines. This will be voluntary unless specifically recruited for this role.
- Considering the needs of pupils with medical conditions in their lessons when deciding whether or not to volunteer to administer medication.
- Receiving sufficient training and achieving the required level of competency

before taking responsibility for supporting pupils with medical conditions.

Parents/Carers are responsible for:

- Notifying the school if their child has a medical condition.
- 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 agreed actions contained in the IHP.
- Ensuring that they, or another nominated adult, are contactable at all times.

Pupils are responsible for:

 Being fully involved in discussions about their medical support needs and contributing to the development of their IHP.

Healthcare Professionals (such as GPs, school nurse, CCGs, etc) are responsible for:

- Notifying the school when a pupil has been identified as having a medical condition which requires support in school.
- Providing advice and training on developing IHPS
- Liaising with lead clinicians locally on appropriate support for pupils with medical conditions.
- Provide clinical support and appropriate commissioning arrangement for pupils who have long-term conditions and disabilities.

The Local Authority is responsible for:

- Commissioning school nurses for local schools.
- Making joint commissioning arrangements for education, health and care provision for pupils with SEND.
- Working with the school to ensure that pupils with medical conditions can attend school full-time.
- Making alternative arrangements where a pupil is away from school for 15 days or more (whether consecutively or across a school year).

3. Admissions

- 3.1. Admissions will be managed in line with the school's Admissions Policy.
- 3.2. No child will be denied admission to the school or prevented from taking up a school place because arrangements for their medical condition have not been made; a child may only be refused admission if it would be detrimental to the health of the child to admit them into the school setting.
- 3.3. The school will not ask, or use any supplementary forms that ask, for details about a child's medical condition during the admission process.

4. Notification of a Pupil Medical Condition

4.1. All new pupils on entry to the school must complete a *pupil information/medical form*

- informing the school of their child's medical needs including any allergies, tetanus history, dietary requirements and medication.
- 4.2. Parents are made aware that they must notify the school if there are any changes or updates to their child's medical information.
- 4.3. Depending on the medical information, the relevant forms will need to be completed by the school and parent.
 - Individual Healthcare plan
 - Administration of medication during the school day long term or short term
 - Inhaler/AAI consent form
- 4.4. The school does not wait for a formal diagnosis before providing support to pupils. Where a pupil's medical condition is unclear, or where there is a difference of opinion concerning what support is required, a judgement is made by the headteacher based on all available evidence (including medical evidence and consultation with parents/carers).
- 4.5. For a pupil starting at the school in a September uptake, arrangements will be put in place prior to their introduction and informed by their previous institution.
- 4.6. Where a pupil joins the school mid-term or a new diagnosis is received, arrangements will be put in place within two weeks.

5. Individual Healthcare Plans (IHPs)

- 5.1. Individual Healthcare plans can help to ensure that schools effectively support pupils with medical conditions. They provide clarity about what needs to be done, when and by whom. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed and are likely to be helpful in most other cases, especially where medical conditions are long-term and complex. However, not all children will require one.
- 5.2. The Headteacher along with the Named Person for Medical Conditions, healthcare professionals and parent should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached, the Headteacher is best placed to take a final view.
- 5.3. An IHP should include the following information:
 - The medical condition, along with its triggers, symptoms, signs and treatments.
 - The pupil's needs, including medication (dosages, side effects and storage), other treatments, facilities, equipment, access to food and drink (where this is used to manage a condition), dietary requirements and environmental issues.
 - The support needed for the pupil's educational, social and emotional needs.
 - The level of support needed, including in emergencies.
 - Whether a child can self-manage their medication.
 - Who will provide the necessary support, including details of the expectations
 of the role and the training needs required, as well as who will confirm the
 supporting staff member's proficiency to carry out the role effectively.
 - Cover arrangements for when the named supporting staff member is unavailable.
 - Who needs to be made aware of the pupil's condition and the support required.
 - Arrangements for obtaining written permission from parents/carers and the headteacher for medicine to be administered by school staff or self-

- administered by the pupil.
- Separate arrangements or procedures required during school trips and activities.
- Where confidentiality issues are raised by the parent/carer(s) or pupil, the designated individual to be entrusted with information about the pupil's medical condition.
- What to do in an emergency, including contact details and contingency arrangements.
- 5.4. The healthcare plan should capture the key information and actions that are required to support the child effectively. The level of detail within 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 health condition may require very different support. Where a child has SEND but does not have a statement or EHC plan, their special educational needs should be mentioned in their individual healthcare plan.
- 5.5. All healthcare plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed.
- 5.6. A flow chart for identifying and agreeing the support a child needs and developing an individual healthcare plan is shown in appendix 1.

6. Staff Training and Support

- 6.1. Staff who provide support to pupils with medical conditions will attend any meeting if possible, connected with the pupil. Training will be provided to staff to ensure they are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual healthcare plans. They will have been provided as part of their training with the knowledge to understand specific medical conditions they are being asked to deal with, their implications and preventative measures. The Headteacher will ensure staff have the appropriate training and refresher training.
- 6.2. If any new staff are to be involved in supporting pupils with medical conditions, they will have a full induction and be given full training.

7. Managing Medication

7.1. Often as part of a pupils IHP, medication will need to be administered. Please see the school's First Aid & Medication policy for managing & administrating medicines, as well as the use of inhalers for asthma, epi-pens for allergies.

8. Unacceptable practice

It is not generally acceptable practise to:

- Assume that pupils with the same condition require the same treatment.
- Ignore the views of the pupil and/or their parents/carers & medical evidence or opinion (although this may be challenged)
- Send pupils home frequently for reasons associated with their medical condition or prevent them from taking part in activities at school, including lunch times, unless this is specified in their IHP.

- Penalise pupils with medical conditions for their attendance record, where the absences relate to their condition.
- Create barriers to pupils participating in school life, including school trips.
- Refuse to allow pupils to eat, drink or use the toilet when they need to to manage their condition.

9. Home-to-school transport

- 9.1. Arranging home-to-school transport for pupils with medical conditions is the responsibility of the LA.
- 9.2. Where appropriate, the school will share relevant information to allow the LA to develop appropriate transport plans for pupils with life-threatening conditions.

10. Liability and indemnity

- 10.1 The governing board will ensure that appropriate insurance is in place to cover staff providing support to pupils with medical conditions, administration of medication and healthcare procedures.
- 10.2 In the event of a claim alleging negligence by a member of staff, civils action is more likely to be brought against the school, not the individual.

11. Complaints

11.1 Any parent who is dissatisfied with the medical support the school provides should address their concerns immediately to the school and then if required as an official complaint in accordance with the Epworth Education Trust Complaint policy.

12. Monitoring & Review

- 12.1 This policy will be reviewed on an annual basis by the Epworth Education Trust.
- 12.2 Any changes to the policy will be clearly communicated to all members of staff involved in supporting pupils with medical conditions and to parents and pupils themselves.

Appendix a – Flowchart of IHP

Parent or healthcare professional informs school that child has been newly diagnosed or is due to attend new school, or is due to return to school after a long term absence, or that needs have change. Designated Staff co-ordinates meeting to discuss child's medical support needs, and identifies member of school staff who will provide support to pupil Meeting to discuss and agree on need for IHCP to include key school staff, child, parent, relevant healthcare professionals. Any medical evidence obtained must also be considered. Develop IHCP in partnership – agree who leads on writing it. Input from healthcare professional must be provided. School staff training needs to be identified from meeting output. Healthcare professional delivers training and staff signed off as competent - review date agreed. IHCP implemented and circulated to all relevant staff IHCP reviewed annually or when condition changes. Parent or

healthcare professional to initiate if condition changes.

Appendix b - Named Person/Role at each school for Responsibility for pupils with Medical Conditions

School	Named person	
Bedford Hall	Pastoral Manager	
Rosehill	DSL & Family Liaison Officer	
Nutgrove	Sendco	
Summerseat	Deputy Headteacher	
Wesley	Sendco	
Westleigh	Sendco	