



# Supporting Pupils with Medical Conditions Policy

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Written by:	
Shared to staff	
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## **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 sporting activities.

The governing board will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupils' conditions, 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)

The named person with responsibility for implementing this policy is Nadia Hunt.

## **Legislation and statutory responsibilities**

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

It is also based on the Department for Education (DfE)'s statutory guidance on supporting pupils with medical conditions at school.

## **Roles and responsibilities**

**The governing board**

The governing board has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

### **The headteacher**

The headteacher will:

- Make sure all staff are aware of this 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 in contingency and emergency situations
- Ensure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development of 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**

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

## **Parents**

Parents will:

- Provide the school with sufficient and up-to-date information about their child's medical needs
- Be involved in the development and review of their child's IHP and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times

## **Children**

Children who attend the nursery are unlikely to be old enough to be able to manage their own health needs or medication (apart from possibly an inhaler), therefore nominated staff will have responsibility over this management. If a child refuses to take medicine or accept a necessary procedure then staff will not force them to do so. In this instance, staff will follow the procedure agreed in the individual healthcare plan. Parents will be informed so that alternative options can be considered.

## **Specialist nurses and other healthcare professionals**

A Specialist Nurse provides nursing services for all schools when appropriate and will be informed by us around medical needs as children transition into primary school. As a nursery school working with very young children it is vital we work closely with Health Visitors and other health professionals when taking advice and support for children with medical needs. Other healthcare professionals such as Paediatricians or GPs may notify us when a child has been identified as having a medical condition that will need support in our setting. They may also provide advice on developing healthcare plans. If necessary, health professionals such as physiotherapists and occupational therapists will meet regularly with our key staff in "Team Around the Family" (TAF) meetings. We recognise that collaborative working, in partnership with all key professionals, is essential to support children with medical conditions.

### **Lancashire County Council (Local Authority)**

Should provide support, advice and guidance, including suitable training for staff to ensure that the support specified within individual healthcare plans can be delivered effectively.

### **Clinical Commissioning Groups (CCGs)**

Have a responsibility, under Section 10 of the Children Act 2004, to ensure that commissioning is responsive to children's needs and that health services are able to co-operate with schools supporting children with medical conditions.

### **Ofsted**

Place a clear emphasis on schools meeting the needs of disabled children and children with SEN. Inspectors are briefed to consider the needs of pupils with chronic or long-term medical conditions and to report on how well their needs are being met.

## **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 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.

## **Being notified that a child has a medical condition**

When the school is notified that a pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an IHP.

The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

See Appendix 1.

## Individual healthcare plans (IHPs)

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to Nadia Hunt (Headteacher)

Plans will be reviewed at least 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 a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the headteacher 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.

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 an 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. The governing board, the headteacher and SENDCO are responsible for developing IHPs, will consider the following when deciding what information to record on

IHPs:

- 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
- 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
- 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

## **Administration Of Medication**

Medicines will only be administered when it would be detrimental to a child's health or attendance not to do so, and only if prescribed by a doctor. Exceptions to this may be an inhaler for asthma when advised by 999 service.

Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours, and therefore not needed to be taken at nursery.

The provision of medication for outside of school premises (e.g. on school trips) will be the responsibility of the parent/carer accompanying the child on the trip or a designated person. Any medications needed for short-term, off-school premises sessions (eg trips to a shop in the local community) will be written into the riskassessment for that activity.

The following rules will apply when administering any medication at our nursery:

- Medication will not be accepted in nursery without complete written and signed instruction from the parent.
- Only reasonable quantities of medication should be supplied.

- Each item of medication must be delivered in its original container and handed directly to nominated person.
- When delivering medication, parents/carers must inform staff when the last dosage was taken.
- Each item of medication must be clearly labelled with the following information:

i. Child's name

ii. Name of medication

iii. Dosage

iv. Frequency of dosage

v. Date of dispensing

vi. Storage requirements (if important)

vii. Expiry date

The exception to this is insulin which must still be in date, but should be available inside an insulin pen or a pump, rather than in its original container (delivered by specifically trained staff only).

- We will not accept items of medication that are in unlabelled containers.
- Unless otherwise indicated (with the exceptions below) all medication to be administered will be kept in a locked cabinet in the designated first aid area in each room.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will be always readily available for staff to provide for children and not locked away.
- If any Controlled Drugs need to be stored on the premises, such drugs will be kept in a locked medicine cabinet. A record will be kept of any doses used and the amount of the controlled drug held in school. Any side effects will also be noted. Delivery will be by specifically trained staff only.
- The nursery will provide parents/carers with details of when any medication has been administered to their child and parents will be required to sign to acknowledge this information has been received.

- Where it is appropriate to do so (usually an inhaler) children will be encouraged to administer their own medication under staff supervision.
- It is the responsibility of the parent/carer to notify the school if there is a change in medication, a change in dosage requirements, or of the discontinuation of the child's need for the medication.
- Staff who volunteer to assist in the administration of medication must follow all instructions carefully and feel confident and competent at administering the medication.
- When no longer required, medicines will be returned to the parent to arrange for safe disposal. If the use of needles is required during administration of medication then "sharps boxes" will be used for their disposal. In such instances, children will be administered the drug in the Head teacher's office where the medication, needles and sharps containers will be stored in a locked cupboard.

## **Emergency Procedures**

All staff will be informed of any children who have a medical condition and the procedure to follow if an emergency arises. Staff will be informed on appointment (at induction) and for individual children during a staff meeting or briefing as the need arises.

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. Other children may also be informed of what to do (if appropriate) if they think help is needed for a child with medical needs.

In the event of an emergency, a member of the admin team will be instructed to dial 999 and will be given the information required about the emergency to relay to the emergency services. Parents will then be informed.

If a child needs to be taken to hospital, a member of staff will accompany the child in an ambulance and parents will be informed to meet their child at hospital.

A defibrillator is available in Stoneygate Nursery School.

## **Unacceptable Practice**

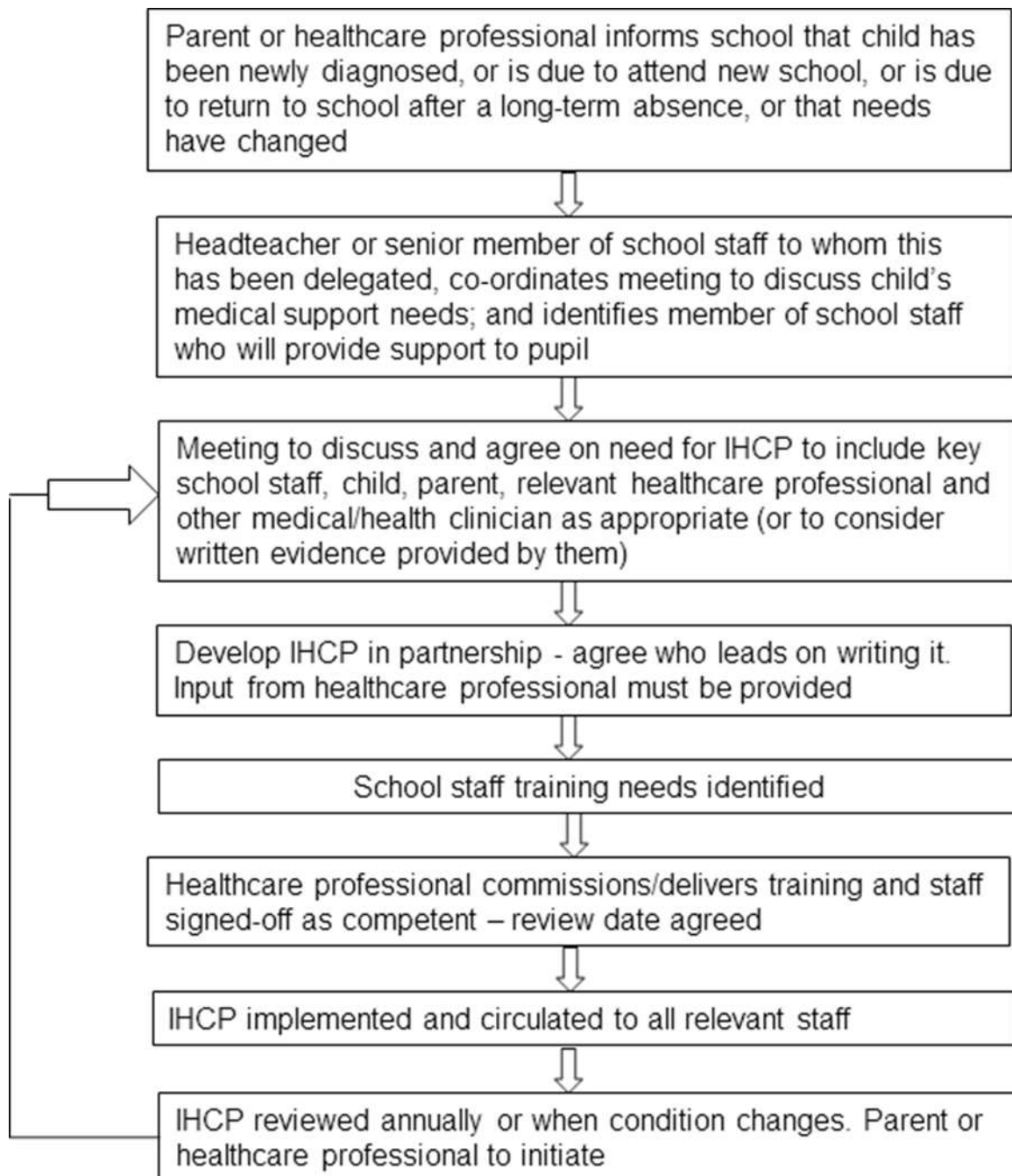
The Governors at Stoneygate Nursery School are clear that it is not acceptable practice to:

- prevent children from having easy access to their inhalers and 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 or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- 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; or
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life.

## **Complaints**

If parents are dissatisfied with the support provided by Stoneygate Nursery School they should first discuss their concerns directly with the Headteacher. If, for whatever reason, this does not resolve the issue then they may make a formal complaint via the Complaints Procedure. A copy of the Complaints Policy will be made available for parents to enable them to take this action.

**Model process for developing individual healthcare plans**



## Template A: individual healthcare plan

Name of school/setting

Child's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date


**Family Contact Information**

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)


**Clinic/Hospital Contact**

Name

Phone no.


**G.P.**

Name

Phone no.


Who is responsible for providing support in school

--

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when



Form copied to

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## Template B: parental agreement for setting to administer medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by

Name of school/setting

Name of child

Date of birth

Group/class/form

Medical condition or illness


### Medicine

Name/type of medicine  
*(as described on the container)*

Expiry date

Dosage and method

Timing

Special precautions/other instructions

Are there any side effects that the school/setting needs to know about?

Self-administration - y/n

Procedures to take in an emergency


**NB: Medicines must be in the original container as dispensed by the pharmacy**

### Contact Details

Name

Daytime telephone no.

Relationship to child

Address

I understand that I must deliver the medicine personally to

[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) \_\_\_\_\_

Date \_\_\_\_\_

### Template C: record of medicine administered to an individual child

Name of school/setting

Name of child

Date medicine provided by parent

Group/class/form

Quantity received

Name and strength of medicine

Expiry date

Quantity returned

Dose and frequency of medicine


Staff signature \_\_\_\_\_

Signature of parent \_\_\_\_\_

Date

Time given

Dose given

Name of member of staff

Staff initials


Date

Time given


Dose given

Name of member of staff

Staff initials


**C: Record of medicine administered to an individual child (Continued)**

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			





## Template E: staff training record – administration of medicines

Name of school/setting

Name

Type of training received

Date of training completed

Training provided by

Profession and title


I confirm that [name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated [name of member of staff].

Trainer's signature \_\_\_\_\_

Date \_\_\_\_\_

**I confirm that I have received the training detailed above.**

Staff signature \_\_\_\_\_

Date \_\_\_\_\_

Suggested review date \_\_\_\_\_

## Template F: contacting emergency services

**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.**

1. your telephone number
2. your name
3. your location as follows [insert school/setting address]
4. state what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code
5. provide the exact location of the patient within the school setting
6. provide the name of the child and a brief description of their symptoms
7. inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
8. put a completed copy of this form by the phone



## **Template G: model letter inviting parents to contribute to individual healthcare plan development**

Dear Parent

### **DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD**

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely