



**Talavera Junior School**  
**Supporting Pupils with Medical Conditions**

**Document Name:**  
**Document ID:** n/a

**Current Version:** 1.5

**Status:** Approved

**Policy First Introduced:** May 2015

**Latest Review:** May 2023

**Next Review Planned:** May 2024

**Signed: Amanda Webb (Policy Owner)**

**Print Name: Amanda Webb**

**Review Date: September 2023**

**Signed: \_\_\_\_\_ (Governor Approval)**

**Print Name: \_\_\_\_\_**

**Approval Date: \_\_\_\_\_**





**Talavera Junior School**  
**Supporting Pupils with Medical Conditions**

**Aim**

The aim of Supporting Pupils with Medical Conditions at Talavera is to:

- Ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.
- Parents feel confident that the school will provide effective support for their child's medical condition and that pupil's feel safe. In making decisions about the support we provide, the school will establish relationships with relevant local health services to help them.
- Consider advice from healthcare professionals and listen to and value the views of parents and pupils.
- Ensure that any social & emotional implications associated with the medical conditions are provided for. In particular, in the case of long-term absence due to health reasons, that reintegration is properly supported so that the child with the medical condition can fully engage with learning and not fall behind when unable to attend.
- Short term and frequent absence also need to be effectively managed with appropriate support put in place to limit the impact on the child education attainment together with their emotional and general well-being.
- To develop staff knowledge and training in all areas as necessary for our pupils
- To provide a fully inclusive school

**Scope**

This policy applies to all permanent, fixed-term, supply and agency staff and pupils at Talavera Junior School

**Overview**

This policy details the Talavera Junior School approach to supporting children and staff with medical conditions both on school premises and on official school trips and outings

**Policy & Procedure:**

Talavera Junior School believes that ensuring the health and welfare of staff, pupils and visitors is essential to its success.

This school takes seriously its responsibility to safeguard and promote the welfare of the children and young people in its care.

We are committed to:

- Ensuring that pupils with medical needs are fully supported by the school
- Ensuring that no pupil is excluded unreasonably from any school activity due to his/her medical needs
- Providing specialist training to staff where applicable

We will:

- Ensure all staff (including supply staff) are aware of this policy and that sufficient trained staff are available to implement the policy and deliver against all individual healthcare plans, including contingency in emergency situations
- Ensure that the school is appropriately insured and that staff are aware that they are insured to provide first aid and other medical support to pupils

Pupils with medical needs, where taking medication, eating, drinking or taking breaks is required, will be able to do so whenever required, in order to manage their medical condition effectively.

Staff will work in close partnership with parents and carers to share information and provide continuity of care.

Procedures for supporting pupils with medical needs are in place and are reviewed regularly.

### **Definitions of Medical Conditions:**

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

- Short-term affecting their participation in school activities because they are on a course of medication.
- Long-term potentially limiting their access to education and requiring extra care and support (deemed special medical needs).

### **The Role of Staff at Talavera Junior School**

Some children with medical conditions may be disabled. Where this is the case, governing bodies must comply with their duties under the Equality Act 2010. Some may also have Special Educational Needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For children with SEN, this guidance should be read in conjunction with the SEN Code of Practice and the Talavera Junior School SEN Information Report.

If a child is deemed to have a long-term medical condition, the school will ensure that arrangements are in place to support them. In doing so, we will ensure that such children can access and enjoy the same opportunities at school as any other child. The school, health professionals, Parents/Carers and other support services will work together to ensure that children with medical conditions receive a full education, unless this would not be in their best interests because of their health needs. In some cases this will require flexibility and involve, for example, programmes of study that rely on part time attendance at school in combination with alternative provision arranged by the Local Authority and health professionals. Consideration will also be given to how children will be reintegrated back into school after long periods of absence.

Staff must not give prescription medicines or undertake health care procedures without appropriate training (updated to reflect any Individual Health Care Plans). At Talavera, we recognise that a first-aid certificate does not constitute appropriate training in supporting children with medical conditions. **Where and when needed staff will be trained for specific conditions to meet the individuals needs.**

### **Individual Health Care Plans (IHCP)**

We recognise that Individual Healthcare Plans are recommended in particular where conditions fluctuate or where there is a high risk that emergency intervention will be needed, and are likely to be helpful in the majority of other cases, especially where medical conditions are long term and complex. However, not all children will require one. The school, healthcare professional and parent will agree based on evidence when a healthcare plan would be inappropriate or disproportionate.

- Where children require an individual healthcare plan it will be the responsibility of Headteacher, Deputyhead, Senco and the **administration team** to work with parents and relevant healthcare professionals to write the plan.

- A healthcare plan (and its review) may be initiated in consultation with the parent/carer, by a member of school staff or by a healthcare professional involved in providing care to the child. The Headteacher will work in partnership with the parents/carer, and a relevant healthcare professional e.g. School, specialist or children's community nurse, who can best advise on the particular needs of the child to draw up and/or review the plan.
- Where a child has a special educational need identified in a statement or Educational Health Care (EHC) plan, the individual healthcare plan will be linked to or become part of that statement or EHC plan.

We may also refer to the flowchart contained within the document 'Process for identifying children with a health condition' for identifying and agreeing the support a child needs and then developing the individual healthcare plan.

**We will use the individual healthcare plan template produced by the DfE to record the plan.**

**We use Asthma UK's most current template for all pupils with Asthma.**

**We use the bsaci Allergy action plan for all students who use an auto injector pen.**

If a child is returning following a period of hospital education or alternative provision (including home tuition), that we will work with Hampshire County Council and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

### **Staff Training**

All new staff will be inducted on the policy when they join the school. Records of this training will be stored in the school office.

All nominated staff will be provided awareness training on the school's policy for supporting children with medical conditions which will include what their role is in implementing the policy. This training will be carried out following each review of the policy. We will retain evidence that staff have been provided the relevant awareness training on the policy by signature sheets.

Where required we will work with the relevant healthcare professionals to identify and agree the type and level of training required and identify where the training can be obtained from. This will include ensuring that the training is sufficient to ensure staff are competent and confident in their ability to support children with medical conditions. The training will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs and therefore allow them to fulfil the requirements set out in the individual healthcare plan.

Any training undertaken will form part of the overall training plan for the school and refresher awareness training will be scheduled at appropriate intervals agreed with the relevant healthcare professional delivering the training.

A 'Staff training record– administration of medicines' form will be completed to document the type of awareness training undertaken, the date of training and the competent professional providing the training.

### **The Child's Role**

Where possible and in discussion with parents, children that are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be recorded in their individual healthcare plan. The healthcare plan will reference what will happen should a child who self-administers refuse to take their medication (this will normally be informing the parent/carer at the earliest opportunity).

## **Managing Medicines on School Premises**

The administration of medicines is the overall responsibility of the parents/carers. Where clinically possible we will encourage parents to ask for medicines to be prescribed in dose frequencies which enable them to be taken outside of school hours. However, the Headteacher is responsible for ensuring children are supported with their medical needs whilst on site, therefore this may include managing medicines where it would be detrimental to a child's health or school attendance not to do so.

We will not give prescription medicines to any child without their parent's/carers written consent ( 'administration of medicine and treatment consent form' will be used to record this), except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, we will make every effort to encourage the child or young person to involve their parents while respecting their right to confidentiality.

A documented tracking system to record all medicines received in and out of the premises will be put in place.

The following information should be checked before medicines are administered:

- name of the child
- dose
- expiry and shelf life dates

On occasions where a child refuses to take their medication the parents will be informed at the earliest available opportunity.

We will only accept prescribed medicines that are in date, labelled, provided in the original container as dispensed by the pharmacist and include instructions for administration, their dosage and storage. Insulin is the exception, which must still be in date but will generally be available to schools inside an insulin pen or a pump, rather than its original container.

Controlled drugs will be securely stored in a non-portable lockable container which only named staff will have access to. We will ensure that the drugs are easily accessible in an emergency situation. A record will be kept of any doses used and the amount of the controlled drug held in school. There may be instances where it is deemed appropriate for a child to administer their own controlled medication. This would normally be at the advice of a medical practitioner. Where an individual child is competent to do so and following a risk assessment, we may allow them to have prescribed controlled drugs on them with monitoring arrangements in place.

Non-prescribed medicines such as Paracetamol and Antihistamines will only be administered when written or verbal permission has been received by the parent or carer. All administered medicines will be recorded locally in the 'First Aid File'

We will only administer non-prescribed medicines on request from the parent if they are in clearly identifiable packaging and only on a short term basis. We will require a form to be completed 'administration of medicine and treatment consent form' (Where the school have concerns they will seek further guidance from their link School Nurse).

Any homeopathic remedies to be administered will require a letter of consent from the child's doctor and will be administered at the discretion of the Head teacher.

Emergency medicines will be stored in a safe location but not locked away to ensure they are easily accessible in the case of an emergency.

Types of emergency medicines include:

- Injections of adrenaline for acute allergic reactions
- Inhalers for asthmatics
- Injections of Glucagon for diabetic hypoglycaemia

Other emergency medication i.e. Rectal diazepam or Buccal Midazolam for major seizures will be stored in accordance with the normal prescribed medicines procedures (see storage section).

### **Storage**

All medication other than emergency medication will be stored safely in a locked cabinet, where the hinges cannot be easily tampered with and cannot be easily removed from the premise.

Where medicines need to be refrigerated, they will be stored in the fridge in the office in a clearly labelled airtight container.

Children will be made aware of where their medicines are at all times and be able to access them immediately where appropriate. Where relevant they should know who holds the key to the storage facility.

Medicines such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to children and not locked away. We will also ensure that they are readily available when outside of the school premises or on school trips.

Storage of medication whilst off site will be maintained at steady temperature and secure. There will be appropriately trained staff present to administer day to day and emergency medication and copies of individual health care plans will be taken off site to ensure appropriate procedures are followed.

### **Disposal**

It is the responsibility of the parents/carers to dispose of their child's medicines. It is our policy to return any medicines that are no longer required including those where the date has expired to the parents/carers. Parents/carers will be informed of this when the initial agreements are made to administer medicines. Medication returned to parent/ carers will be documented on the tracking medication form.

Sharps boxes will be in place for the disposal of needles. Collection and disposal of these will be arranged locally through a Hampshire approved contractor who will remove them from site.

### **Medical accommodation**

The first aid area in the office will be used for all medical administration/treatment purposes. The location/room will be made available when required.

### **Record Keeping**

A record of what has been administered including how much, when and by whom, will be recorded on a 'record of prescribed medicines' form. The form will be kept on file. Any possible side effects of the medication will also be noted and reported to the parent/carers.

### **Emergency Procedures**

Where a child has an individual healthcare plan, this will clearly define what constitutes an emergency and provide a process to follow. All relevant staff will be made aware of the emergency symptoms and procedures. We will ensure other children in the school know what to do in the event of an emergency i.e. informing a teacher immediately if they are concerned about the health of another child.

Where a child is required to be taken to hospital, a member of staff will stay with the child until their parent arrives, this includes accompanying them to hospital by ambulance if necessary (taking any relevant medical information, care plans etc. that the school holds).

### **Day Trips/Off site activities**

We will ensure that teachers are aware of how a child's medical condition will impact on their participation in any off site activity or day trip, but we will ensure that there is enough flexibility for all children to participate according to their own abilities within reasonable adjustments.

We will consider what reasonable adjustments we might make to enable children with medical needs to participate fully and safely on visits. We will carry out a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. We will consult with parents and pupils and take advice from the relevant healthcare professional, to ensure that pupils can participate safely.

### **Unacceptable Practice**

Staff are expected to use their discretion and judge each child's individual healthcare plan on its merits, 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 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;
- Or 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.

### **Liability and Indemnity**

Staff at the school are indemnified under the County Council self-insurance arrangements.

The County Council is self-insured and has extended this self-insurance to indemnify school staff who have agreed to administer medication or undertake a medical procedure to children. To meet the requirements of the indemnification, we will ensure that staff at the school have parents' permission

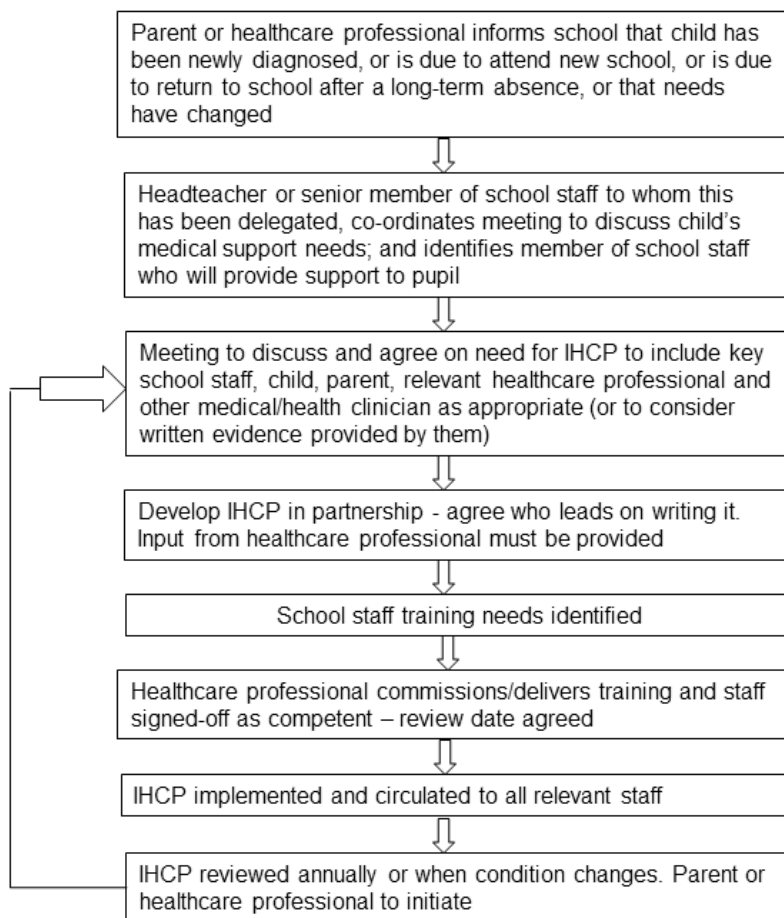


for administering medicines and members of staff will have had training on the administration of the medication or medical procedure in question.

### **Complaints**

Should parents or children be dissatisfied with the support provided they can discuss their concerns directly with the Headteacher. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

**Please see sample flowchart below from the Supporting pupils with medical conditions guidance**



**List of authorised personnel to have access to prescribed medication**

Leanne McDermid

Amanda Webb

Clare Litwin

Chelsea Kirkham-Wingate

Stephanie Long