



# Policy for Supporting Pupils with Medical Conditions (incorporating the administration of medication)

### **CONFIRMATION OF ADOPTION BY SCHOOL:**

IRE BY	School name:	Ireby Church of England Primary School
	Policy/procedure issued by CCC:	September 2023, updated 09.02.24
	CCC Document name/reference:	From Schools Portal on 01/02/2024
	Policy/procedure adopted by school:	09/02/2024
	Next review date by school: 2	08/02/2025
	Approved by: 1	District 1
	Philippa Irving Chair of Governors	Mugian

<sup>&</sup>lt;sup>1</sup> This policy requires approval from the Full Governing Body.

It is not a requirement for this policy to be published on the school website, but the school chooses to do so.

### **Note regarding EpiPens/Inhalers:**

- The Head teacher and governors have considered whether the school should hold 'a school spare'
  EpiPen or Inhaler (for the use by any pupil that already has these prescribed by their GP), however
  this was decided not to be necessary because parents are asked to provide duplicate items where
  their GP believes these are needed.
- This decision was ratified at a full governors meeting held on 23/03/23.

### **Note regarding Insurance arrangements:**

• Cumberland Council have issued the following letter to schools on the schools portal on 9<sup>th</sup> February 2024 (but dated 06 November 2023) regarding insurance arrangements for supporting pupils with medical needs:

<sup>&</sup>lt;sup>2</sup> This document must be reviewed annually, or sooner if legislation/statutory guidance changes.

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For the attention of Head Teachers, Bursars and Business Managers

Date: 06 November 2023

### INSURANCE BULLETIN - SUPPORTING PUPILS WITH MEDICAL NEEDS

Please note that Cumberland Council and Westmorland & Furness Council's liability insurance cover (provided by Maven Public Sector) contains the following extension clause in order to indemnify the school and staff in the process of administering drugs, medicines and treatments to pupils.

### 11 Medical Treatment

Notwithstanding Exclusion 18 Section 2, of this **Policy** the **Insurer** shall provide indemnity for legal liability consequent upon the rendering of or failure to render the following medical or paramedical services in connection with the **Business** 

- a) emergency and/or first aid medical services by any Employee
- b) the administering of drugs or medicines or procedures
  - i) pre-prescribed by a medical practitioner and
  - ii) subject to any written guidelines

by any Employee authorised by the Insured

Provided that no indemnity is available from any other source

If you have any queries, please do not hesitate in contacting me.

Yours sincerely,

Martin Harrison

MHarrison

Principal Finance Officer - Insurance

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# **Purpose**

This policy has been developed to outline the school's statutory duties under Section 100 of the Children and Families Act 2014 in order to ensure that suitable arrangements are established to support pupils with medical conditions in terms of both physical and mental health. This includes the establishment of suitable procedures for the storage, administration and recording of medication.

Children and young people with medical conditions are entitled to a full education and have the same rights of admission to school as other children.

### Scope

This policy applies to all Local Authority maintained schools and settings and can be adapted by non-maintained schools choosing to follow Local Authority safety guidance.

# **Principles**

The governing body 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 (IHCP's).

This policy pays due regard to the Department for Education's statutory guidance: Supporting pupils at school with medical conditions.

# Roles and responsibilities

### **Governing body**

The governing body must:

- make sure that arrangements put in place for supporting pupils with medical conditions in school are sufficient to meet their statutory responsibilities;
- ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions;
- ensure that effective consultation takes place with all relevant persons such as health and social care professionals, pupils and parents, to ensure that the needs of individual pupils are effectively supported.

### Head teacher

The Head teacher will be the responsible person for ensuring the implementation of this policy in school. They will ensure that:

- All relevant staff are made aware of this policy and understand their role in its implementation;
- Sufficient staff are identified and suitably trained, with cover arrangements in case of staff absence or staff turnover, to ensure that someone is always available when required;
- Staff who need to know are aware of the child's condition;
- Staff are appropriately insured and they are made aware they are insured to support pupils;
- Briefing for supply teachers is provided where relevant;

- Risk assessments for school visits and other school activities outside of the normal timetable are carried out:
- The school nursing service is contacted in the case of any child who has a medical condition that may require support in school, but who has not yet been brought to the attention of the school nurse;
- Development, implementation and monitoring of individual healthcare plans;
- Development and implementation of arrangements for managing storage, administration, and recording of medication.

### School staff

- Any member of the school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so.
- Although it is recognised that administering medicines is not part of teachers' professional duties, they should take account of the needs of pupils with medical conditions that they teach.
- School staff will receive suitable and sufficient training and achieve the necessary level of competency before they take on the responsibility to support children with medical conditions.
- Staff must not give prescription medications or undertake healthcare procedures without appropriate training.
- Staff will contribute, where relevant, to the development and review of individual healthcare plans.
- Individual healthcare plans will include procedures to enable staff to respond accordingly when they become aware that a pupil with a medical condition needs help or requires emergency attention.

### School nurses

- Where required, the school will access the school nursing service to seek advice and support.
- School nurses may notify the school directly when a child has been identified as having a medical condition which will require support. Wherever possible, this should be done before the child starts at the school.
- School nurses may support the Headteacher and staff on implementing a child's individual healthcare plan. They will provide advice and guidance, for example, on staff training.
- School nurses can liaise with healthcare professionals, e.g. clinicians, GP, Children's Community Nurse or Community Mental Health Team, on appropriate support for the child and associated staff training needs.
- <u>E-School Nurse Service</u> the video clinics are available for professionals, parents and carers across the whole of Cumbria, all day Tuesdays and Thursdays.

### **Healthcare professionals**

- Liaison will take place with healthcare professionals including GP's and paediatricians, where required, to ensure clinical input and pertinent advice is obtained on developing individual healthcare plans.
- Specialist or specific local health teams may be contacted to provide support in schools for children with particular conditions (e.g. asthma, diabetes).

### **Pupils**

- Wherever possible pupils will be fully involved in discussions about their medical support needs and will contribute as much as possible to the development of, and compliance with, their individual healthcare plan.
- It is the policy of the school to promote self-care for those pupils who are competent to manage their own health and safety needs and medications.

### Parents/carers

- Parents/carers should provide the school with sufficient and up-to-date information about their child's medical needs. It is recognised that they might, in some cases, be the first to notify the school that their child has a medical condition.
- Parents/carers of children under 16 must give prior written agreement for any medication, prescription or non-prescription, to be given to a pupil.
- As key partners they should be involved in the development and review of their child's individual healthcare plan and may be involved in its drafting. However, confirmation of any medical or clinical need will always be sought from a suitable healthcare professional.
- Parents should carry out any action they have agreed to as part of the healthcare plan's implementation, e.g. provide medicines and equipment, collect same at end of term, and ensure that they or another nominated adult are contactable at all times.

### **Local Authority**

The Local Authority has a duty to promote cooperation between relevant partners such as governing bodies of maintained schools, proprietors of academies, clinical commissioning groups and NHS England, with a view to improving the wellbeing of children relating to their physical and mental health, and their education, training and recreation.

The Local Authority pays regard to statutory guidance on the education of children unable to attend school because of health needs.

### **Ofsted**

Ofsted's new common inspection framework is aimed at promoting greater consistency across inspection remits. Inspectors must consider how well a school meets the needs of a full range of pupils, including those with medical conditions. Key judgements will be informed by the progress and achievement of these children alongside those pupils with special educational needs and disabilities.

# Notification of a pupil with a medical condition

The school will implement suitable arrangements when alerted to pupils with medical conditions. These arrangements may be provided when a child starts at school, when a pupil receives a new diagnosis, during transition from one school to another, or when existing needs change.

Where appropriate, the school will ensure that robust individual healthcare plans (IHCP's) are established.

# **Individual Healthcare Plan (IHCP)**

An Individual Healthcare Plan will ensure that a school effectively supports pupils with medical conditions.

Each IHCP will be clear about what needs to be done, when, and by whom. The level of detail within the plan will depend on the complexity of the child's condition and the degree of support needed. It is recognised that different children with the same health condition might require very different support.

An IHCP may be initiated by a member of school staff, the school nurse, or another healthcare professional involved in providing care to the child.

An IHCP will be drawn up with input from such professionals, e.g. specialist nurses, who are able to determine the level of detail needed in consultation with the school, the child and their parents.

An IHCP will be reviewed at least annually **or earlier if the child's needs change**. Where the child has a special educational need, the individual healthcare plan will be linked to the child's statement or Educational Healthcare Plan (EHCP) where they have one.

# Staff training and support

- Suitable training will be identified during the development or review of IHCP's.
- The level of training should be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions.
- In some cases written instructions from the parent or medication container dispensed by the pharmacist may be considered sufficient, but ultimately this is for the school to decide.
- Arrangements will be in place to provide whole-school awareness training so that all staff are aware of the school policy on supporting pupils with medical conditions.

# **Management of medication on school premises**

- Medicines should 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 <sup>1</sup>16 must be given prescription or non-prescription medicines without a parent/carer's written consent.
- A child under 16 must never be given medicine containing Aspirin unless prescribed by a doctor.
- Where clinically possible, medicines must be prescribed in dose frequencies which enable them to be taken outside school hours.
- Schools should only accept prescribed medicines if they are in-date, labelled, provided in the original container as dispensed by a pharmacist, and include instructions for administration, dosage and storage.
- Insulin must be in-date but may be dispensed inside an insulin pen or pump rather than its original container.
- All medicines must be stored safely and children should know where their medicines are.
- Medicines and devices such as asthma inhalers, blood glucose testing meters, and adrenaline pens must always be readily available and not locked away.
- Where no longer required, medicines must be returned to the parent to arrange safe disposal. Sharps boxes must always be used for the disposal of needles and other sharps.

# **Record keeping**

Written records will be kept of all medications administered to children. Parents/carers will be informed if their child has been unwell at school.

# **Emergency procedures**

 Robust arrangements are in place for dealing with emergencies for all school activities, wherever they take place.

- Individual Healthcare Plans define what constitutes an emergency, what actions are required, and that staff are aware of emergency symptoms and procedures.
- In the event of a child needing to be taken to hospital, a member of staff will remain with the child until the parent/carer arrives, or will accompany the child to hospital by ambulance.

<sup>&</sup>lt;sup>1</sup> Other than in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parent. In such cases every effort should be made to encourage the child or young person to involve their parents while respecting their right to confidentiality.

# Day trips, residential visits and sporting activities

- Robust arrangements are in place to ensure suitable support for pupils with medical conditions. The school acknowledges the <u>Equalities Act 2010 and schools</u> and works proactively to support all its pupils.
- Risk assessments will be carried out so that planning arrangements include any
  reasonable adjustments to ensure children with medical needs are able to participate
  fully on visits and any activities.
- Where necessary, consultation with parents/carers and healthcare professionals will take place to ensure that the pupils can participate safely.

# **Unacceptable practice**

This policy sets out practices that are not acceptable in this school. We will not:

- 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/carers, 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 IHCP;
- Send a sick child to the school office or medical room unaccompanied or accompanied by someone unsuitable;
- Penalise children for their attendance record if their absences are related to their medical condition;
- Prevent pupils from drinking, eating or taking toilet breaks whenever they need in order to manage their medical condition effectively;
- Require or otherwise make parents/carers feel obliged to attend school to administer medication or provide medical support to their child;
- Prevent children from participating or create unnecessary barriers to children participating in any aspect of school life including school trips.

# **Liability and indemnity**

The governing body will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.

# **Concerns and complaints**

Should a concern or complaint arise in relation to a pupil's medical needs, then this should be directed in the first instance to the Headteacher who will address issues on an individual basis. Formal complaints will be handled in line with the school's usual complaints procedure.

### **Evaluation and review**

This policy will be reviewed at regular intervals. It will be made readily available to parents/carers and be communicated to all staff.

# **Appendix 1 - Model process for developing individual healthcare plans**

Parent or healthcare professional informs school that a child has been newly-diagnosed, or is due to attend a new school, or is due to return to school after a long-term absence, or their needs have changed. Headteacher or senior member of school staff to whom this is delegated coordinates meeting to discuss child's medical support needs and identifies member of school staff who will provide support for the pupil. Meeting to discuss and agree on need for IHCP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them). Develop IHCP in partnership, agree who leads on writing it. Input from healthcare professional must be provided. School staff training needs identified. Healthcare professional commissions/delivers training and 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.