

Medical policy

Urmston Grammar



Approved by: R S Wall

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1. Aims

This policy aims to ensure that:

- Students, staff and parents/carers understand how our school will support students with medical conditions.
- Students with medical conditions are properly supported to allow them to access the same education as other students, including school trips and sporting activities.

The Governing Body will implement this policy by:

- Ensuring that sufficient staff are suitably trained.
- Making sure staff are made aware of student's conditions when appropriate.
- Making sure there are cover arrangements to ensure someone is always available to support students with medical conditions.
- Ensuring supply teachers are made aware of appropriate information about the policy and relevant students.
- Ensuring the development and monitoring of Individual healthcare plans (IHPs) is in place.

2. Legislation and statutory duties

The school meets the requirements under [Section 100 of the Children and Families act \(2014\)](#), which places a duty on Governing bodies to make arrangements for supporting students at their school with medical conditions.

It is also based on the DfE statutory guidance on [supporting students with medical needs at school](#)

This policy also complies with our funding agreement and articles of association.

3. Roles and responsibilities

3.1 The Governing Body

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

3.2 The Headteacher

The Headteacher will:

- Make sure that all staff are aware of this policy and understand their role in its implementation.
- Ensure there is a sufficient number of trained staff available to implement this policy and deliver against all 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 students in this way.
- Contact the school nursing service (Medical lead/pastoral manager/DDSL) in the case of any student 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.

3.3 Staff

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

As part of cover procedures for absence from lessons, classroom teachers will ensure that relevant information is shared regarding existing medical need/IHPs

3.4 Parents/Carers

Parents/carers will:

- Provide the school with sufficient, up to date information regarding their child's medical needs. While school will endeavour to collect this information, the responsibility lies with the parent/carer to ensure it is shared.
- Be involved in the development and review of the child's IHP and may be involved in its drafting.
- Carry out actions agreed as part of the IHP, e.g. provide medicines and equipment, and ensure they or a nominated adult are contactable at all times.

3.5 Students

Students with medical conditions will often be best placed to provide information about how their condition affects them. Students should be fully involved in discussions about medical support needs and contribute as much as possible to the development of IHPs. They are also expected to comply with their IHPs.

3.6 School nurses/Other healthcare professionals

Our school nursing service will notify the school when a student has been identified as having a medical condition that will require support in school. This will take place before the student starts school. Wherever possible they may also support staff in implementing a child's IHP.

4. Equal opportunities

Our school is clear about it's need to actively support students with medical conditions to participate in school trips and visits, or in sporting activities. There should be no prevention of this where the are opportunities for involvement.

The school will consider wat reasonable adjustments need to be made to enable students 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 necessary steps to ensure inclusion of students with medical conditions. In doing so, students, parents/carers and any relevant healthcare professionals will be consulted.

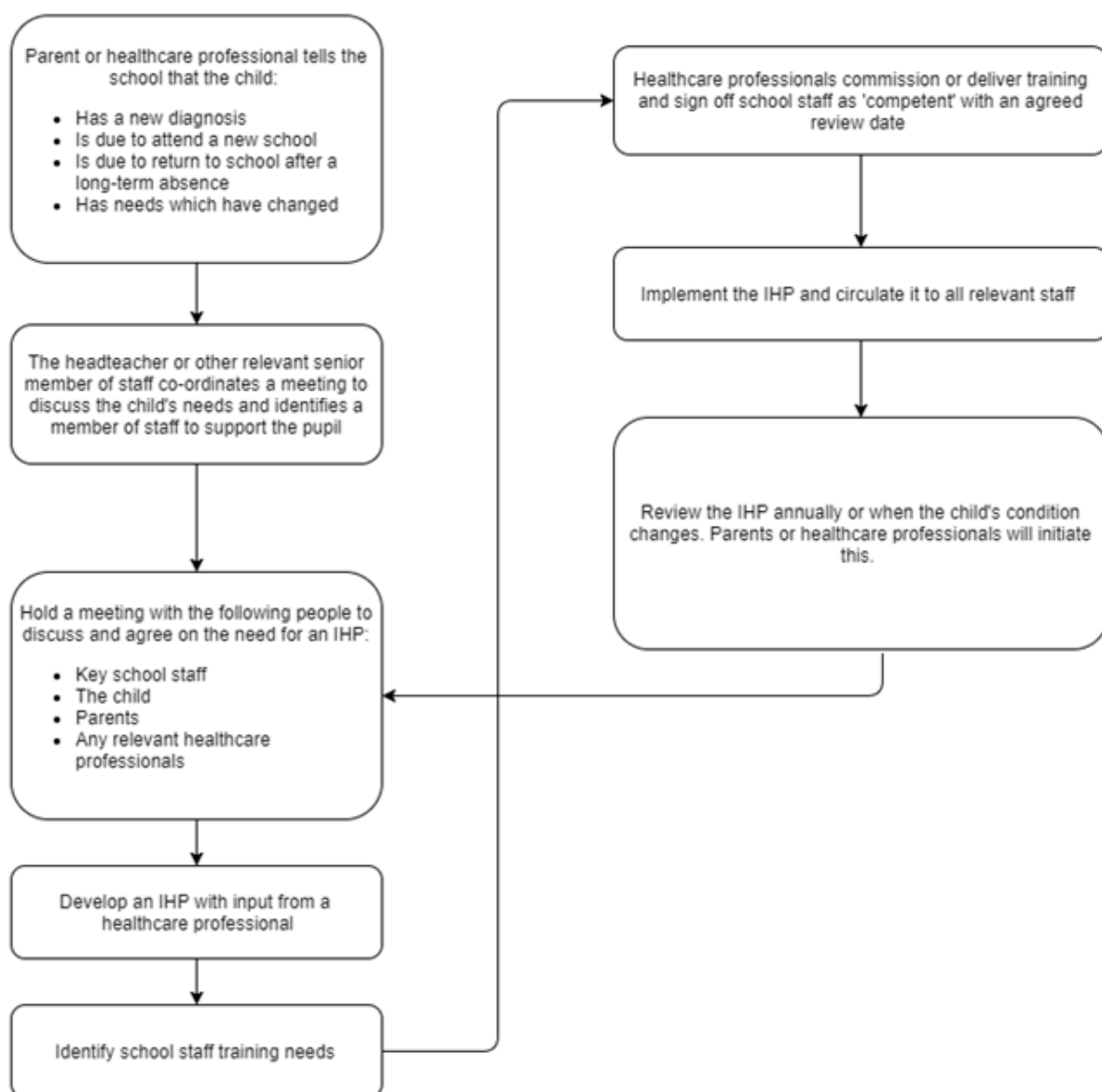
5. Being notified that a child has a medical condition

When the school is notified that a child has a medical condition, the process outlined over the page will be followed to decide whether the student requires an IHP.

The school will make every effort to ensure that arrangements are put in place within 2 term time weeks, or by the start of the relevant term for students new to the school.

The school uses a number of strategies to support in the identification of medical conditions:

- Medical information is requested via APPLICAA for all students joining the school in Year 7. This information is then stored on CPOMS and SIMS and shared as appropriate when the student is confirmed to be on register.
- All prospective Year 12 students enrolling for 6th form are asked for medical information as part of the enrolment process via APPLICAA
- Once on roll, all Year 12 students will receive an online form relating to Medical/SEND/EAA need. This information is stored on CPOMS and SIMS and shared as appropriate.



- At the end of each academic year, the parents of students moving into Year 10, 11 and 13 will receive a medical information request form. This details existing need and emerging need. This form makes reference to anxiety, exam access arrangements and the requirements of medical documentation to support any historical need. The online form requires parents to confirm their responsibility to provide paperwork and update school on medical developments.
- All known and reported medical conditions are recorded on SIMS and accessible to teaching and support staff. SIMS records are updated and reviewed at least annually but will be updated as needed when new information is shared.
- Teaching staff will be directed towards relevant medical information when encountering students for the first time and when preparing to lead or participate in a school trip.

6. Individual healthcare plans (IHPs)

The headteacher takes overall responsibility for the development of IHPs for students with medical conditions. This role has been delegated to the school's medical officer.

Plans will be reviewed at least annually but will be done more frequently if there is evidence that a students needs have changed.

Plans will be developed with the students best interests in mind and will set out

- What needs to be done?
- When?
- By whom?

Not all students with a medical condition will require an IHP. It will be agreed with a healthcare professional and parents/carers when an IHP would be inappropriate or disproportionate. This will be evidence based. If there is no consensus, the Headteacher will make the final decision.

Plans will be drawn up in partnership with school, parents/carers and relevant professional healthcare professionals, such as the school nurse, a specialist or a paediatrician, who can best advise on the student's specific needs. The student should be involved wherever appropriate.

IHPs will be linked to, or become part of any educational, health and care plan (EHCP). If a student is classified as SEN but does not have an EHCP, the SEN will be mentioned in the IHP.

The level of detail in the plan is contingent on the level of complexity of the child's condition and how much support is needed. The Governing Body, Headteacher and Medical officer will consider the following when deciding what information to record on an IHP:

- The medical condition, its triggers, signs, symptoms and treatments.
- The resultant needs of the child, including medicine (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 students 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 lessons.
- Information relating to counselling sessions (timescales and frequency).

- The level of support needed, including in emergencies. If a student is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring.
- Who will provide support, their training needs, expectations of their role and confirmation of proficiency to provide support for the student's medical condition from a healthcare professional, and cover arrangements for when they are unavailable.
- Who in school needs to be made aware of the student's condition and support required.
- Arrangements for written permission from parents and the Headteacher for medication to be administered by a named member of staff or self-administered by the student during school hours.
- Separate procedures and arrangements for school trips or other activities outside the normal school day that will ensure the student can participate (for example a risk assessment)
- Where confidentiality issues are raised by student/parent/carer, the designated individuals to be entrusted with the information about the student's condition should be identified.
- What to do in an emergency, including who to contact and contingency arrangements.
- This information will be collected from parents/carers via an online form
- Up to date IHPs will be accessible to staff on the SEND section of the staff SharePoint.
- Any changes, updates or new IHPs will be communicated via Edukey.

7. Managing medicines

Prescription and non-prescription medicines will only be administered at school:

- Where it would be detrimental to the student's health or school attendance not to do so

AND

- Where parents have consented in writing.

The only exception to this is where the medicine has been prescribed to the student without the knowledge of parents/carers. In these circumstances, advice will be sought from the school nurse.

Students under 16 will not be given any medicine containing aspirin unless it has been prescribed by a doctor.

Anyone giving a student any medication (For example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will **always** be informed.

The school 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, dosage and storage.

It is the responsibility of the parent/carer to monitor dates and ensure this is up to date, but annually, the school will check existing medication and inform parents if medication is out of date.

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely and securely. Students will be aware of where to go for medicines at all times and will be able to access them as required. Medicines and devices such as asthma inhalers, blood glucose testing and adrenaline pens will always be readily available to students and not locked away.

Medicines will be returned to parents/carers to arrange safe disposal when no longer required.

7.1 Controlled drugs

Controlled drugs are prescription medicines that are controlled under the misuse of drugs regulations (2001) and any subsequent amendments. Examples include morphine and methodone.

A student who has been prescribed a controlled drug may have it in their possession if they are deemed competent to do so, but they must not pass to another student to use. All other controlled drugs are stored in a secure cupboard in the school office, with limited access to identified and named staff only. Any student in this position should have an IHCP in place detailing the expectations surrounding this.

When required, the controlled drugs will be easily accessible in an emergency. A record will be kept of doses and amount remaining.

7.2 Students managing their own needs

Students who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents/carers and reflected in their IHPs.

Students will be allowed to carry their own medicine and relevant devices wherever possible. Staff will not force a student to take a medicine or carry out an unnecessary procedure if they refuse but will follow the

procedure agreed in the IHP and inform parents/carers so an alternative route can be considered, if required.

7.3 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the students IHP, but it is generally not acceptable to:

- Prevent students from easily accessing inhalers and medication and administering their medication when and where necessary.
- Assume that every student with the same condition requires the same treatment.
- Ignore the views of the student or their parents/carers.
- 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 IHP.
- If the student becomes ill, send them to the school office or medical room unaccompanied or with somebody unsuitable (For example somebody who may respond anxiously if the medical condition might leave the student vulnerable). (Colleagues should make a judgement about suitability prior to any decision making and if in doubt seek support)
- Penalise students for their attendance record if absences are related to the medical condition, e.g. hospital appointments.
- Prevent students from drinking, eating or taking toilet/other breaks whenever they need to in order to manage their medical condition effectively. (Any such circumstances will be outlined in the student's IHP)
- Require parents/carers, or otherwise make them feel obliged to attend school to administer medication or provide medical support to their son/daughter, including with toileting issues. No parent should be compelled to give up working because the school is failing to support their child's medical needs.
- Prevent students from participating, or creating unnecessary barriers to students participating in any aspect of school life, including school trips, e.g., by requiring parents to accompany their child
- Administer or ask students to administer medicine on the school toilets.

8. Emergency procedures

Staff will follow the school's normal emergency procedures (for example calling 999). All students IHPs will clearly set out what constitutes an emergency and will explain what to do.

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

9. Training

Staff who are responsible for supporting students with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to students with medical conditions will be include in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Headteacher/Medical Officer. Training will be recorded and kept up to date.

Training will :

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the students.
- Fulfil the requirements of the IHPs.
- Help staff to understand the specific medical conditions they are being asked to support with, their implications and preventative measures.

Healthcare professional will provide confirmation of staff proficiency in a medical procedure or providing medication.

All staff will receive training so that they are aware of this policy and understand their role in its implementation, for example the preventative and emergency measures so that they can recognise and act quickly when a problem occurs. This will be provided to new staff on induction.

10. Record keeping

The Governing Body will ensure that all written records are kept of all medicine administered to students for as long as the students attend the school. Parents/carers will be informed if their student has been unwell at school.

IHPs are stored on staff SharePoint and are therefore accessible to all staff.

11. Monitoring arrangements

This policy will be reviewed and approved by the Governing Body every 2 years.

12. Links to other policies

- Complaints
- Equality policy
- First aid
- Health and safety
- Safeguarding
- Attendance
- SEN information report and policy

13. Liability and indemnity

The Governing Body will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

The policy is held with Zurich Insurance Company and is renewed on an annual basis. Our Public Liability is £25,000,000 for any one event.