



# **Supporting Students with Medical Conditions Policy**

## **1. Aim**

The Children and Families Act 2014 places a duty on schools to make arrangements for supporting students at their school with medical conditions. The document states that **'Students with medical conditions should be properly supported so that they have full access to education, including trips and physical education.'** Any arrangements put into place will be in line with the requirements of the Equality Act 2010. Because school staff have a common law duty to act in loco parentis this policy makes clear what actions will be taken on a routine basis or in an emergency, both on and off the school premises.

## **2. Purpose**

To allow students with medical conditions to be involved in normal school activities with minimal absence in a secure, safe and caring environment. Supporting a child with a medical condition during school hours is not the sole responsibility of one person and partnership working between school staff, healthcare professionals. This document will give clear guidelines to members of staff and others in the school on the procedures to be adopted when providing medical assistance to a student. Working in partnership with parents and medical professionals is encouraged to enable children to cope with, and overcome, their difficulties and any embarrassment in dealing with their condition.

## **3. Procedures following Notification of a Medical Condition**

- A meeting with parents and the child will be arranged before the child starts school or, if this is not practical, within two weeks of them starting.
- The child will be discussed with the School Nursing Team to ensure as much continuity of care as possible between schools.
- An SVCS Healthcare Plan (Appendix 1) will be completed during the meeting if medication is needed regularly during the school day or if a medical condition may create the need for adaptations to allow the child to access opportunities offered by the school. The Healthcare Plan will include;
  - The medical conditions, its triggers, signs, symptoms and treatments;
  - The student's resulting needs, including medication, treatments, time, facilities, access to food and drink, diet and environmental requirements;
  - Specific support for educational, social and emotional needs – for example the management of absences, exam access arrangements and counselling;
  - The level of support needed, including in emergencies, and how self-managing medication is monitored;
  - Confirmation from a medical professional that appropriate support is in place, including cover arrangements for absent staff;
  - Arrangements for medication to be administered by a member of staff, should this be appropriate;
  - Procedures for out of school activities;
  - What procedures to follow in an emergency situation.
- The child will be fully involved in discussions about their medical support needs and will be encouraged to contribute as much as possible to their development.
- The child will be expected to comply with their SVCS Healthcare Plan.
- All staff will be informed during a training day or via weekly staff briefing about the child's medical needs.

## **4. Staff Responsibilities**

- The person responsible for ensuring that staff are suitably trained to deal with student medical conditions is Kes Cullimore, School Business Manager.
- All staff will be made aware of relevant aspects of each student's condition, as agreed with parents and the child. The person responsible for ensuring this information is made available to all staff is Katrina Eady, Data Manager.

- Risk assessments are carried out for all vulnerable children ahead of school visits. The person responsible for ensuring this has been completed for students with an SVCS Healthcare Plan is Jon Craig, Educational Visits Co-ordinator.
- SVCS Healthcare Plans will be monitored and reviewed on an annual basis, or more frequently if there are planned changes to medication or times where the condition or treatment is inconsistent. The person responsible for ensuring Healthcare Plans are reviewed is Catherine Bank, Deputy Headteacher.
- The Headteacher is responsible for ensuring that all staff are aware of the content of this policy.
- The Governing Body are responsible for ensuring that sufficient staff have suitable training and are competent to support children with medical needs.

## **5. Staff Training**

- All staff will be made aware of all students with medical conditions at the start of each academic year. This will be supported by update training on both more common and life-threatening conditions, such as asthma and anaphylaxis, by the School Nursing Team.
- Training needs will be identified through the completion of the SVCS Healthcare Plan. Appropriate staff will be identified and training, with a recognised agency, arranged at the earliest possible opportunity. Parents will be consulted with regard to the training to ensure that procedures in school match, where possible, those in place out of school.

## **6. Managing Medicines in School**

A member of the School Nursing Team will meet with the Reception First Aiders to update any specific medicines training. The School Nurse will confirm that staff are competent to administer medicines to students.

- Any prescription medication which is needed by the child during the school day must be in pharmacy packaging and include the child's name and date of birth. The exception is insulin which is often provided in a pen or pump, but must be in date. Parents must have signed to say that the medication can be administered by school staff, unless it has been prescribed without the knowledge of parents (Appendix 2). In this case the child will be encouraged to involve their parents but their confidentiality will be respected.
- Any non-prescription medication must be in original packaging and in date. Parents must have signed to say that it can be administered by school staff. All medicines, other than epi-pens and items needing refrigeration, are stored in a locked cabinet in the medical room.
- Epi-pens are stored in a cupboard in the medical room in individual plastic containers which are clearly named.
- Students with medical conditions are able to take medication in the privacy of the medical room. All administered medicines are recorded, noting name, time, date, dose and reason given for needing the medication.
- Students who need daily or frequent medication have dedicated, individual record books.
- If a child refuses to take medication or carry out a necessary procedure staff will not force them to do so and will then follow the procedure agreed in the Healthcare Plan.
- When no longer required, or out of date, medicines will be returned to the parent for them to arrange for safe disposal. Sharps boxes are always used for the disposal of needles or other sharp items.

## **7. Emergency Situations**

- All opportunities will be used to train children who to go to in an emergency situation.

- In an emergency situation staff will always act in the best interests of the child. Where possible staff will follow the emergency procedures detailed in the Healthcare Plan.
- Parents will always be informed at the earliest opportunity in an emergency situation.
- If a child needs to be taken to hospital a member of staff will stay with the child until a parent is able to be present.

### **8. Out of School Activities**

Students with medical conditions will be actively supported to participate in school visits, events and sporting activities and will not be prevented from doing so unless this is in direct contravention to their SVCS Healthcare Plan or advice has been provided by a healthcare professional.

- Staff will complete an individual risk assessment for all students with a Healthcare Plan who are going on school visits;
- Parents will be consulted about any concerns regarding students taking part in activities on school visits;
- Any medicines needed by students with medical conditions will become the responsibility of the named First Aider on the visit. The First Aider will be responsible for ensuring that they have had adequate training to be able to effectively support the student with their medication.

### **9. Home to School Transport**

Home to school transport is the responsibility of the Local Authority and not the school. Parents may find it useful to share a copy of their SVCS Healthcare Plan with the transport company or request that they produce a Transport Healthcare Plan.

### **10. Unacceptable Practice**

Although school staff should use their discretion and judge each case on its merits with reference to the student's Healthcare Plan it is not generally acceptable practice to:

- Prevent children from accessing inhalers and medication and administering their medication as necessary;
- Assume that every child with the same condition requires the same treatment;
- Send children with medical conditions home frequently, unless it is part of their Healthcare Plan;
- Send an ill child to Reception unaccompanied;
- Prevent students from drinking, eating, taking toilet or other breaks whenever they need to in order to manage their condition effectively;
- Require parents to attend school to administer medication;
- Prevent children from participating in any aspect of school life.

### **11. Monitoring and review**

The Governing Body will be responsible for monitoring the effectiveness of this policy every three years. Any changes will be made in line with legislation.

Ratified by Governing Body	
Date	



# Healthcare Plan

For students with medical conditions at school

Name of Student:

Medical Condition:

Attach Photo of Student

Form Completed by:

Date Form Completed:

Date for Review:



# Healthcare Plan

For students with medical conditions at school

## 1. Student Information

Name of Student: \_\_\_\_\_

Tutor Group: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Male / Female

Member of staff responsible for home-school communication: \_\_\_\_\_

## 2. Contact information

Student's Address: \_\_\_\_\_

\_\_\_\_\_

### Family contact 1

Name: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_

\_\_\_\_\_

Relationship to child: \_\_\_\_\_

### Family contact 2

Name: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_

\_\_\_\_\_

Relationship to child: \_\_\_\_\_

### GP

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

### Specialist Contact

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

## Medical condition information

### 3. Details of student's medical conditions

Signs and symptoms of the condition(s):

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Triggers or things that make the condition(s) worse:

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### 4. Routine healthcare requirements

(For example, dietary, therapy, nursing needs or before physical activity)

During school hours:

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Outside school hours:

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### 5. What to do in an emergency

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## 6. Regular medication taken during school hours

### Medication 1

Name/type of medication (as described on the container):

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Dose and method of administration (eg tablets, inhaler, injection):

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When it is taken (time of day)?

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Are there any side effects that could affect the student at school?

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Are there any contraindications (signs when this medication should not be given)?

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Self-administration: can the student administer the medication themselves?

Yes / No / Yes, with supervision by:

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### Medication 2

Name/type of medication (as described on the container):

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Dose and method of administration (eg tablets, inhaler, injection):

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When it is taken (time of day)?

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Are there any side effects that could affect the student at school?

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Are there any contraindications (signs when this medication should not be given)?

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Self-administration: can the student administer the medication themselves?

Yes / No / Yes, with supervision by:

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## 7. Emergency medication (please complete even if it is the same as regular medication)

Name/type of medication (as described on the container):

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Describe what signs or symptoms indicate an emergency for this student:

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Dose and method of administration (how the medication is taken and the amount):

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Are there any contraindications (signs when medication should not be given)?

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

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Self-administration: can the student administer the medication themselves?

Yes / No / Yes, with supervision by: \_\_\_\_\_

Is there any other follow-up care necessary?

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Who should be notified if an emergency has arisen?

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**8. Regular medication taken outside of school hours  
(for background information and to inform planning for residential trips)**

Name/type of medication (as described on the container):

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Are there any side effects that the school needs to know about that could affect school activities?

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**9. Members of staff trained to administer medication for this student**

Regular medication

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Emergency medication

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**10. Specialist education arrangements required (eg activities to be avoided)**

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**11. Any specialist arrangements required for off-site activities**

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**12. Any other information relating to the student's healthcare in school?**

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### Parental and student agreement

I agree that the medical information contained in this plan may be shared with individuals involved with my/my child's care and education (this includes emergency services). I understand that I must notify the school of any changes in writing.

Signed \_\_\_\_\_ Date \_\_\_\_\_  
Student

Signed \_\_\_\_\_ Date \_\_\_\_\_  
Parent

Printname \_\_\_\_\_

### Healthcare professional agreement

I agree that the information is accurate and up to date.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printname \_\_\_\_\_ Job title \_\_\_\_\_

### Permission for emergency medication

- I agree that my child can be given their medication by school staff in an emergency.
- I agree that my child **cannot** keep their medication with them and the school will make the necessary medication storage arrangements
- I agree that my child **can** keep their medication with them for use when necessary.

Name of medication carried by student: \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_  
Parent

### Headteacher agreement

It is agreed that the student named in this document will receive the above listed medication at the above listed time and will receive the above listed medication in an emergency.

- This arrangement will continue until either end date of course of medication or until instructed by the student's parents.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**Appendix 2**



**Permission to Give Medicine.**

**Please hand to Reception with the medication.**

Name of student: .....Date of Birth: .....

Name of medicine: .....

I give permission for a member of school staff to give this medicine, as stated on the label.

Signed: ..... Date: .....

Print Name: .....