St Mary's Catholic Primary School



Supporting Pupils with Medical Conditions and Managing Medication Policy

Approved by:	Date:
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SUPPORTING PUPILS WITH MEDICAL CONDITIONS AND MANAGING MEDICATION POLICY 2025 - 2027

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1. Introduction

At some point in their school lives, all children will have a medical condition that may affect their participation in school activities. For many there will be a short-term need for medication. For some pupils there may be a need to take medication over a longer period of time. There is no legal duty that requires the school to administer medication and in order to safeguard staff and children the school exercises its right to refrain from this – we do however, invite parents (or another adult allocated by the parent) to administer medicine if required so as to enable all pupils to participate fully in school life.

This policy is to clarify to children, parents and staff the formal systems and procedures that will be followed to ensure that children with medical needs receive proper care and support at school.

2. Aims

This policy aims to ensure that:

- Pupils, staff and parents/carers 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 Louise Yorke (Headteacher) supported by the Deputy Headteacher, Laura Noone.

3. Legislation and statutory responsibilities

This policy meets the requirements under <u>Section 100 of the Children and Families Act 2014</u>, 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 <u>supporting pupils</u> <u>with medical conditions at school</u>.

4. Roles and responsibilities

4.1 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.

4.2 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

4.3 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.

4.4 Parents/carers

Parents/carers will:

- On admission to St Mary's, all parents/carers will provide full details of medical conditions, regular medication, emergency contact numbers, name of family doctor, details of hospital consultants, allergies, special dietary requirements etc
- Provide the school with all updated information about their child's medical needs if anything changes
- 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

4.5 Pupils

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

4.6 School nurses and other healthcare professionals

The school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible. They may also support staff to implement a child's IHP.

Healthcare professionals, such as GPs and paediatricians, will liaise with the school's nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

5. 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/carers and any relevant healthcare professionals will be consulted.

6. 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. See Appendix 1.

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.

7. Individual healthcare plans (IHPs)

The Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to the Deputy Headteacher, Laura Noone.

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/carers 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/carers 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. Once finalised, the IHP will be uploaded to Medical Tracker (*the school's medication management and first aid software*).

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has special educational needs (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 the Deputy Headteacher 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/carers 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/carer or 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

8. Managing medicines

Only Prescription medicines will be administered at school:

- When it would be detrimental to the pupil's health or school attendance not to do so e.g.: a scheduled dose within the typical school day (not including before or after school clubs) and
- Where we have parents/carers' written consent
- Prescribed medication will only be accepted by school once a <u>Consent to Administer Medication</u> (Appendix 2) form has been completed and submitted to the school office. This form is available from the school office. This information will be uploaded to Medical Tracker.
- All medicines must be handed into the school office in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage.
 Refrigeration can be accommodated.
- Parents/carers must be aware that whilst every attempt will be made to allow medicine to be taken at the correct time, pressure of work may mean staff forget to remind the pupil on occasions (parents/carers are invited to phone to remind school staff – should they be concerned).
- Any medicines past their expiry date will not be accepted.
- Pupils will take their medication under adult supervision.
- If a pupil refuses to take their medicine they will not be forced to have it.
- If there are any doubts about any of the procedures a member of staff will check with a parent/carer. If a check cannot be completed no medication will be given.
- An email notification from Medical Tracker will be sent when medication is administered in school. NB: the time that the email is sent may not reflect the time that the medication is administered.
- In the case of medication for long-term conditions, an email notification from Medical Tracker will be sent no later than 4 weeks before the expiry date. It is then the responsibility of parents/carers to provide replacement in-date medication.
- Medicines will be returned to parents/carers to arrange for safe disposal when no longer required.

8.1 Controlled drugs

<u>Controlled drugs</u> are prescription medicines that are controlled under the <u>Misuse of Drugs</u> Regulations 2001 and subsequent amendments, such as morphine or methadone.

All controlled drugs are kept in a secure cupboard in the school office and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept on Medical Tracker.

8.2 Pupils managing their own needs

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

Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform parents/carers so that an alternative option can be considered, if necessary.

8.3 Unacceptable practice

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

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every pupil with the same condition requires the same treatment
- Ignore the views of the pupil 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 IHPs
- If the pupil becomes ill, send them to the school office or with someone unsuitable
- Penalise pupils 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
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents/carers to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

9. Emergency procedures

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

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

10. Training

Staff who are responsible for supporting pupils 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 pupils with medical conditions will be included 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/Deputy Headteacher. Training will be kept up to date.

Training will:

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

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

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

11. Record keeping

The governing board will ensure that records (written and/or electronic) are kept of all medicine administered to pupils for as long as these pupils are at the school. Parents/carers will be informed if their pupil has been unwell at school by way of email notification from Medical Tracker.

IHPs are kept in a readily accessible place that all staff are aware of and uploaded to Medical Tracker.

12. Liability and indemnity

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

13. Concerns and complaints

Parents/carers with a concern about the school's actions in regard to their child's medical condition should discuss these directly with the pupil's class teacher in the first instance. If the matter cannot be resolved, parents/carers will be referred to the school's complaints procedure.

14. Monitoring arrangements

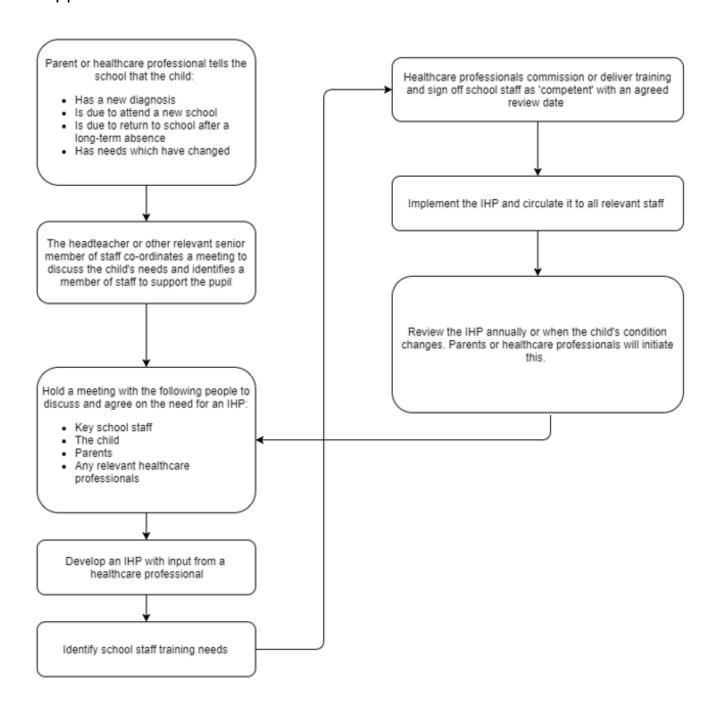
This policy will be reviewed and approved by the governing board every two years.

15. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding
- Special educational needs information report and policy

Appendix 1



Appendix 2

Consent to Administer Medication

MEDICAL INFORMATION CONSENT FORM

Name of Child:	
Date of Birth:	
Name of Parents/Carers:	
Home Telephone:	Work Telephone (1):
	Work Telephone (2):
Name of GP:	Telephone:
Hospital Consultant:	
Hospital:	Telephone:
I consent to my child taking the following	ng medication in school under the supervision of a member of staff:
Name of medication/s:	
Dosage/instructions:	
Expiry date/s:	
Any special storage instructions?	
1 dantaha ka anauma khakkha asha al h	
	nas adequate supplies of this/these medication(s).
	nedication(s) supplied by me and prescribed by my child's doctor with storage details attached and that the school will be informed
I understand that the medication will b	pe taken by my child under the supervision of a member of staff.
Signed:(parent/carer)	
FOR STAFF USE ONLY:	
Medication details uploaded to Medical	Tracker: Signed: Date: Date:
Name of Nominated First Aider:	