

Our Lady of Lourdes RC Primary School



An Academy School Part of
The Good Shepherd Catholic Trust



Supporting Pupils with Medical Conditions Policy

Our Mission Statement

We are a catholic school. We strive to be a sign of Christ's presence in the world. We follow Jesus.

Date Approved by Governing Body:	Summer 2024
Date To be Reviewed by:	Summer 2027
Signed By:	Chair of Governors

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SUPPORTING PUPILS WITH MEDICAL CONDITIONS POLICY

Contents

1. Aims	3
2. Legislation and Statutory Responsibilities	3
3. Roles and Responsibilities	3
4. Equal Opportunities	4
5. Being notified that a child has a medical condition.....	5
6. Individual Healthcare Plans	5
7. Managing medicines	6
8. Emergency Procedures	8
9. Training	9
10. Record Keeping.....	9
11. Liability and Indemnity	9
12. Complaints.....	9
13. Monitoring arrangements	9
14. Links to other Policies.....	10
Appendix 1: Being notified a child has a medical condition	11
Appendix 2: Parental Agreement for School to Administer Medicine	12

1. Aims

This policy aims to ensure that:

- Pupils, staff and parents 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.

2. Legislation and Statutory Responsibilities

This policy meets the requirements under Section 100 of the Children and Families Act 2014, 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's statutory guidance on supporting pupils with medical conditions at school. This policy also complies with our funding agreement and articles of association.

3. Roles and Responsibilities

3.1 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.

3.2 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.
- 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.

The School Office manage all of the medical protocols.

3.3 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.

3.4 Parents

Parents will:

- Provide the school with sufficient and up-to-date information about their child's medical needs.
- Be involved in the development and review of their child's Individual Healthcare Plan (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.

3.5 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.

3.6 School Nurses and other Healthcare Professionals

Our 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.

4. 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 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 pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an IHP.

The school will make every effort to ensure that arrangements are put into place by the beginning of the relevant term for pupils who are new to our school and as soon as possible for existing pupils.

See Appendix 1.

6. Individual Healthcare Plans

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to the school office.

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 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 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.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has SEND but does not have an EHC plan, the SEND 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 and the 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.
- If the parents request a school meal, they must complete a dietary requirement form and this is sent to the ISS nutritionist for a special menu.

- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete work, use of rest periods or additional support in catching up with lessons.
- 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. The class teacher and teaching assistant will have a class copy of the care plan.
- Arrangements for written permission from parents 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/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.

7. Managing medicines

Prescription medicines will only be administered at school:

- When it would be detrimental to the pupil's health or school attendance not to do so **and**
- Where we have parents' written consent.

It is preferable for medication to be given at home whenever possible. If medicines are prescribed to be taken 3 or more times per day, parents should ask the prescribing doctor if the administration of the medication can occur outside normal school hours.

Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed before such medication is administered.

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.

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. Pupils will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and EpiPens will always be readily available to pupils and not locked away.

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

Procedures to be followed:

1. If medication cannot be given outside of school hours, parents or carers should fill in a request form giving the dose, the method of administration, the time and frequency of administration, other treatment, any special precautions and signed consent. **See Appendix 2.**
2. All essential medication should be brought to school by the parent or carer and not the pupil. It should be delivered personally to the school office.
3. All medication taken in school must be kept in a clearly labelled pharmacy bottle, preferably with a child safety top which must give the owner's name, contents and the dosage to be administered.
4. Whilst medication is in school it will be kept in a suitable locked cupboard, or fridge if required, away from the children, in the medical room and will be readily accessible when required. The exception to this is the use of an inhaler and EpiPen.
5. Medication to be taken orally must be supplied with a syringe or measuring spoon. Eye drops and Ear drops should be supplied with a dropper. A dropper or spoon must only be used to administer medicine to the owner of that implement.
6. When medication is given, the name, the dose, the mode of administration, time of the dose and date of expiry should be checked. A written record should be kept of the time it was given and by whom to avoid more than one person ever giving a dose. This is recorded in the log book in the medical room.
7. Where any change of medication or dosage occurs, clear written instructions from the parent/carer should be provided. If a pupil brings to school any medication for which consent has not been given, the staff of the school can refuse to administer it. In such circumstances a member of staff should contact the parent as soon as possible. It is the responsibility of the parent to collect any medications that is administered daily.
8. Renewal of medication which has passed its expiry date is the responsibility of the parent or carer. If your child requires lifesaving medication, i.e. EpiPen or diabetic medication, in date supplies must be in school at all times to enable your child to be in school.
9. In all cases where, following the administration of medication, there are concerns regarding the reaction of the pupil, medical advice should be sought immediately. If in doubt about any of the above procedures the member of staff should check with the parents or guardians or a health professional before taking further action.

Refusal or forgetting to take Medication

If pupils refuse or forget to take medication, the school should inform the pupil's parent or carer as a matter of urgency.

Non-prescribed Medication

Non-prescribed medication will not be administered.

We recognise that some conditions such as chapped lips may be uncomfortable but do not require medication. Therefore, pupils are allowed to bring Vaseline into school in the original container for this purpose. The Vaseline must not be decanted and must be clearly labelled with the child's name and class by the parent. For pupils in the Early Years and Key Stage One, the Vaseline will be kept by the teacher. For Key Stage Two pupils, this may be kept in their book bags. The Vaseline must not be flavoured.

Although not strictly classified as a medicine, we encourage pupils to wear sun cream in the warmer weather. We ask that parents of EYFS and Key Stage One pupils administer a once a day cream where possible. Again, we ask that any suncream sent into school is its original container

and labelled and that your child knows how to apply this on their own, including keeping it away from their eyes and washing their hands well after application.

Any decanted creams with no labels will be sent to the office for safekeeping and can be collected by parents at the end of the school day. It will not be administered in school.

7.1 Controlled Drugs

[Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

A pupil who has been prescribed a controlled drug may have it in their possession if they are competent to do so. They must not pass it to another pupil to use. All other 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.

EPiPens are stored in the child's classroom.

7.2 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 and it will be reflected in their IHPs.

7.3 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is 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.
- 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.
- 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.

8. 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 arrives, or accompany the pupil to hospital by ambulance.

9. 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. 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 have an understanding of 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.

10. Record Keeping

The governing board will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parents will be informed if their pupil has been unwell at school.

IHPs are kept in a readily accessible place which all staff are aware of.

11. 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.

We are a member of the Department for Education's risk protection arrangement (RPA).

12. Complaints

Parents with a complaint about their child's medical condition should discuss these directly with the headteacher in the first instance. If the Headteacher cannot resolve the matter, they will direct parents to the school's complaints procedure.

13. Monitoring arrangements

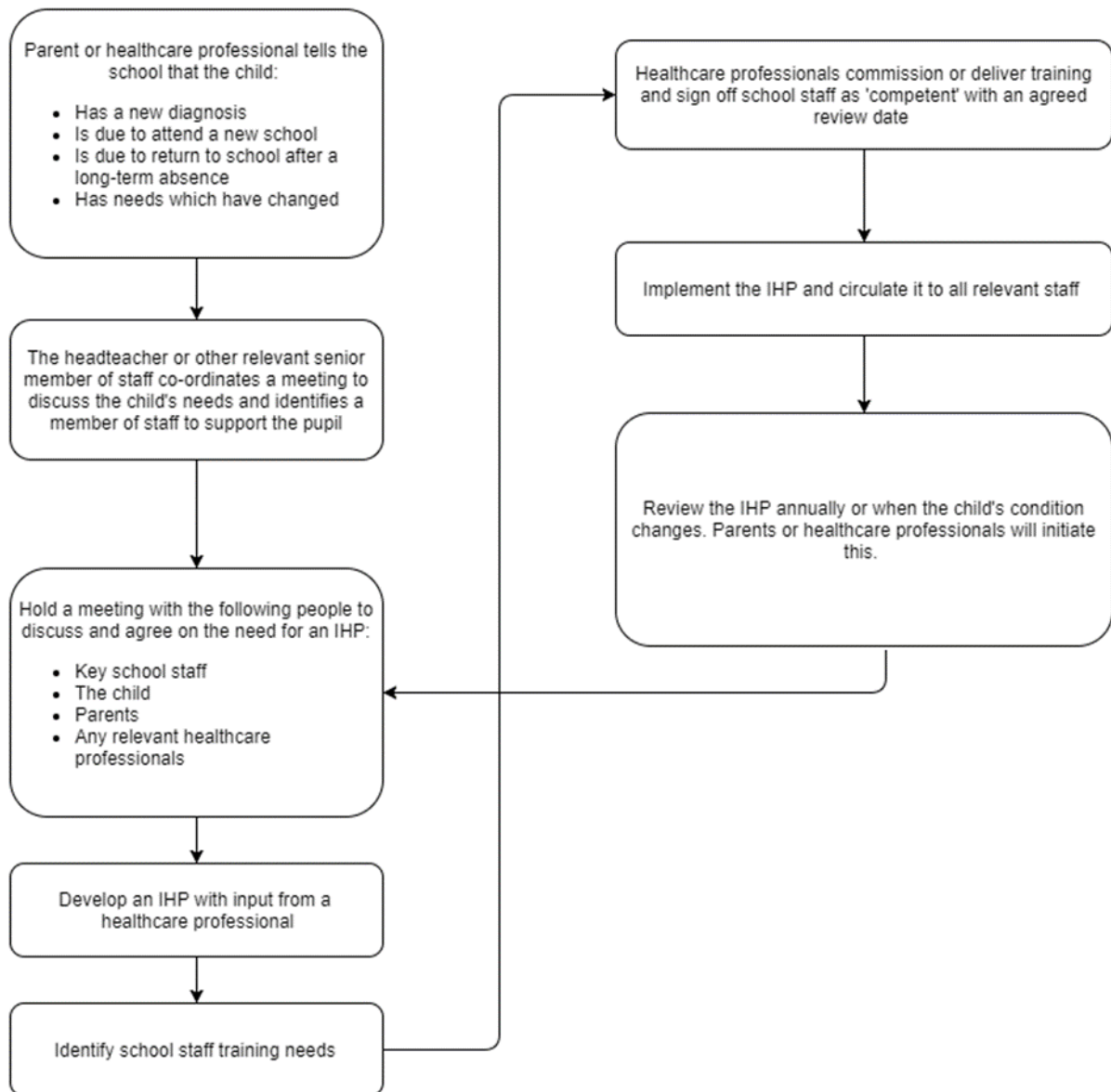
This policy will be reviewed and approved by the governing board every 3 years.

14. 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: Being notified a child has a medical condition



Appendix 2: Parental Agreement for School to Administer Medicine

The school will not give your child medicine unless you complete and sign this form. The school has a policy that staff can administer medicine.

Date: _____ Childs Name: _____ Class: _____

Name of medicine: _____ Dose to be given: _____

Time to be given: _____ For how many days: _____

Any Other instructions: _____

Date	Time given	Initials

Note: Medicines must be in the original container, with the name label as dispensed by the pharmacy

Daytime phone no. of parent or adult contact _____

If medication is prescribed three/four times a day, there is an expectation that parents will administer this directly before and after school as well as in the evening. Staff may only help with the administration of medicines which are to be taken orally.

Medication should be brought into Reception each morning and collected from Reception at the end of the school day. Only medication issued by a doctor in the UK can be administered. Over the counter medication such as Calpol cannot be administered by staff.

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change or frequency of the medication or if the medicine is stopped.

Parents Signature: _____

Print Name: _____

Date: _____