



Supporting Pupils with Medical Needs Policy

Approved by:	Jamie Stuttard (Principa	I)	
Responsible department:	SLT		
Last review date:	April 2024	Last reviewed by:	Jamie Stuttard
Last updated:		Last updated by:	
Next review due :	April 2025		•



School Aims, Vision and Implementation

Bowling Green Academy aims to provide children the opportunity to develop towards their full potential; academically, emotionally and socially:

- Providing the highest standard of education to enable all children equally to acquire the skills, knowledge and concepts relevant to their future.
- Promoting an ethos of care, mutual respect and support, where effort is valued, and success celebrated.
- Enabling children to become active, responsible and caring members of the school and wider community.

The school works towards these aims by:

- Promoting high quality learning and attainment.
- Providing a high quality learning entitlement and environment.
- Valuing each other and ourselves.
- Working in partnership with parents and the community.

Equal Opportunities

Our school seeks to foster warm, welcoming and respectful environments, which allow us to question and challenge discrimination and inequality, resolve conflicts peacefully and work and learn free from harassment and violence.

We recognise that there are similarities and differences between individuals and groups but we will strive to ensure that our differences do not become barriers to participation, access and learning and to create inclusive processes and practices, where the varying needs of individuals and groups are identified and met. We therefore cannot achieve equality for all by treating everyone the same.

We will build on our similarities and seek enrichment from our differences and so promote understanding and learning between and towards others to create cohesive communities.

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.

This policy has been written after reference with and support from:

Access to Education for Children and Young People with Health Needs, Supporting Pupils at School with Medical Conditions, DFE



Introduction

This policy only applies to the administering of prescribed medication to those children who would be prevented from, or restricted from, attending school on a regular basis without such intervention. It also applies to the administration of prescribed medication for children with short term illnesses whose attendance may be affected.

"The governing body must ensure that arrangements are in place to support pupils with medical conditions. In doing so they should ensure that such children can access and enjoy the same opportunities at school as any other child". *DFE September, 2014*

Aims

As part of the ethos of our school where we promote inclusion it is the Trust's intention to support each child within the school to enable them to access the appropriately differentiated curriculum and therefore we do need to be prepared to support children with both short and long term medical needs and have an appropriate care plan in place.

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 LGB will implement this 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 (HCPs)
- Personalised evacuation plans (PEEPs) are in place and outline individual pupil's needs.

The named person with responsibility for implementing this policy is Jamie Stuttard (SENDco)

Legislation and statutory responsibilities

This policy meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty on LGBs to make arrangements for supporting pupils at their school with medical conditions. This policy is also based on the Department for Education's statutory guidance: Supporting pupils at school with medical conditions.

Strategies

The safe administration of medicines in school depends on the support and co-operation of all the parties connected with the child; parents, the school staff and the individual child.

Parents must:

- Provide the school with information about their child's medical condition
- Provide school with original labelled supplies of in date prescribed medication
- Complete an authorisation form allowing the school to administer the medication (see appendix 2)
- Provide information about the exact dosage and frequency
- Encourage their children to be self-supporting, under guidance



- Initially discuss their child's needs with the Principal or the school's Pastoral team
- Dispose of any out of date medication
- Not send non prescribed medication to school (these do not need to be taken during school time as there would likely be no detrimental effects for the children concerned) Schools may, however, agree to give non-prescription medicines at their discretion if they have specific written permission from parents

Governors must:

- Approve a policy that enables access to school to children who have both short and long term medical needs.
- Periodically review their policy
- Receive reports on the policy's effectiveness from the Principal
- Consider new information from the DfE and other sources in their attempt to improve this policy
- Ensure that staff have appropriate training to deal with medical conditions
- Ensure that children are not penalised 'for their attendance record if their absences are related to their medical condition .e.g. hospital appointments' DfE Sep 2014
- Ensure that effective health care plans are implemented for appropriate pupils.

School staff must:

- Only accept prescribed medicines that are in date, labelled in the original container as dispensed by a pharmacist ('Medicines in unlabelled containers will not be accepted')
- On a voluntary basis administer medication to children. NO member of staff will be made to administer medication, 'although teachers have a duty of care (in loco parentis) in the event of an accident or emergency, for the health and safety of pupils in school'
- Ensure the safe storage of medicines brought to school (these will be kept securely in the office, not in the classroom except for medication needed in emergencies such as Epi-pen and inhalers)
- Inhalers or other immediately needed medication will be stored safely and accessibly within each classroom in a special storage unit. (record the dose, time medication is given (on the official record sheet (see appendix 3)
- Receive appropriate training from the GP, Schools' Medical Service or other appropriate professional as may be necessary
- Maintain confidentiality about a child's medical condition, treatment and receive information on a "need to know basis."
- Will provide basic first aid (some Teaching Support Assistants and Midday Supervisors have received 1st aid training - the list of trained staff is displayed in numerous locations around school)
- Will contact parents or other contact person in the event of;
 - o an emergency
 - missing medication
 - some medical problem
- Administer only those medicines;
 - o that have been prescribed by a GP
 - that the parents have authorised should be given and have provided authorisation and information regarding dose and frequency
 - that the child is prepared to take; staff should not force a child to take medication but should inform the parents of the situation immediately
- Supervise children when they take their own medication
- remove medication from children so that it can be safely stored whilst the child remains on school premises.



- receive appropriate training to become familiar with both the symptoms and emergency action necessary for children with individual care plans
- return to parents out of date medication for disposal
- sharp boxes should always be used for the disposal of needles and other sharps
- ensure that any medication is taken for the child whilst on a school visit

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 Health Care Plan (HCP).

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. 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.

If the above policy and practice is followed by all parties concerned there would appear to be no reason why any child should be prohibited from attending our school or taking an active part in it.

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 a Health Care Plan. The school will make every effort to ensure that arrangements are put into place within 1 week (where possible), or by the beginning of the relevant term for pupils who are new to our school. See Appendix 1.

Individual healthcare plans:

The Principal has overall responsibility for the development of a HCP for pupils with medical conditions. This has been delegated to the school, SENDCo. 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 and by whom.

Not all pupils with a medical condition will require an HCP. It will be agreed with a healthcare professional and the parents when an HCP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the Principal 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 advice on the pupil's specific needs. The pupil will be involved wherever appropriate.

HCP's will be linked to, or become part of, any statement of special educational needs (SEND) or education, health and care (EHC) plan. If a pupil has SEND but does not have a statement or EHC plan, the SEN will be mentioned in the HCP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The LGB, the Head of School and the SENDCo are responsible for developing HCPs and will consider the following when deciding what information to record on HCP:

• 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 and the Principal 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

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, but 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.

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 HCPs. Pupils will be allowed to carry their own medicines and relevant devices i.e. inhalers, creams, wherever possible. 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 HCP and inform parents so that an alternative option can be considered, if necessary.

Unacceptable practice:

School staff should use their discretion and judge each case individually with reference to the pupil's HCP, 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
- 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 medical room unaccompanied 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
- Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupil, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- 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 to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

Emergency procedures:

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' HCP's 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.

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 Principal/name of role. 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.

Record keeping:

The LGB will ensure that written records are kept of all medicine administered to pupils. Parents will be informed if their pupil has been unwell at school. HCPs are kept in a readily accessible place which all staff are aware of.

Liability and indemnity:

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

Complaints:

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

Monitoring arrangements:

This policy will be reviewed and approved by the LGB annually.



Links to other policies:

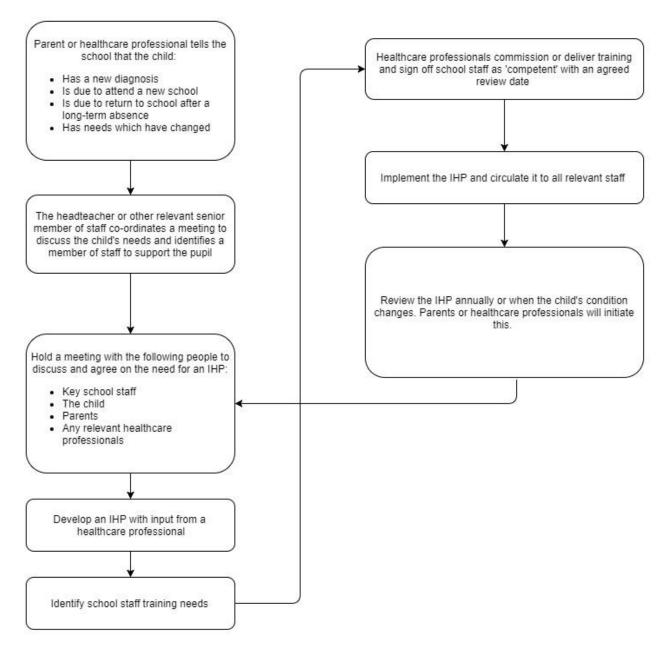
This policy links to the following policies:

- Complaints procedure
- Equality Statement
- Administering medicines policy
- Health and safety
- Drugs Policy
- Safeguarding
- SEND policy

Monitoring and evaluation

This policy will be monitored and evaluated by the Principal over the next year on a termly basis with appropriate reports given to the governors.







Appendix 2: Parental agreement to administer medicine in school

Parental agreement for school/setting to administer medicine

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

Name of school/setting (
Date (1	1	\supset	
Child's name (
Group/class/form (
Name and strength of medicine				
Expiry date (/	/	\supset	
How much to give (i.e. dose to be given)				
When to be given				
Any other instructions				
Number of tablets/quantity to be given (

Note: Medicines must be in the original container as dispensed by the pharmacy

Daytime phone no. of parent or adult contact

Name and phone no. of GP

Agreed review date to be initiated by [name of member of staff]

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

Parent's signature

Print name

Date

If more than one medicine is to be given a separate form should be completed for each one.



Name of school/setting	
It is agreed that [name of child]	will receive
[quantity and name of medicine]	htime or afternoon break]
warne of child) akes their medication by [name of member	will be given/supervised whilst he/
takes their medication by [name of member	r of staff]
takes their medication by <i>[name of member</i> This arrangement will continue until <i>[eithe</i> /	r of staff]
takes their medication by <i>[name of member</i> This arrangement will continue until <i>[eithe</i> /	r of staff] r end date of course of medicine or until
takes their medication by [name of member This arrangement will continue until [either instructed by parents]	r of staff]



Appendix 3: Record of medicine administered

Record of medicine administered to an individual child

Name of school/settin	g	C							
Name of child		C						-	5
Date medicine provideo	d by parent	C	/		1	$\overline{)}$			
Group/class/form		C							
Quantity received		Ċ							\leq
Name and strength of n	nedicine	Ć							\leq
Expiry date		Ĉ	/		1	$\overline{)}$			
Quantity returned		C			-				\neg
Dose and frequency of r	medicine	Ċ							\leq
Staff signature		_							
Signature of parent		/		/	-				
Time given		/	32	/	/	32	/	1	\leq
Dose given	\geq		56						
Name of member of staff	\square	_	56			56			5
Staff initials		_	DC						5
Date	\square	/		/	/		1	1	\supset
Time given	\square		DC			50			5
Dose given	\square								5
Name of member of staff	\square								5
Staff initials	\square								5



Date	C	/	/	\supset	/	1	\neg	/	1	\supset
Time given	C			\supset			50			5
Dose given	C			$\overline{\mathbf{D}}$			50			5
Name of member of staf	f C			$\overline{\mathbf{a}}$			56			5
Staff initials	C			\Box			DC			Б
Date	\subset	/	/		/	/		/	1	\supset
Time given	C			$\supset \subset$			$\overline{\mathbf{D}}$			5
Dose given	C			$\supset \subset$			50			5
Name of member of staff	C						50			5
Staff initials	C									5
Date	\subset	/	/		/	/		1	/	\supset
Time given	C									5
Dose given	C						50			5
Name of member of staff	C						50			5
Staff initials	C				_		DC			5
Date	C	1	/		/	/		1	1	
Time given	C			DC			DC			5
Dose given	C			DC			DC			5
Name of member of staff	C									5
Staff initials	C			DC			50			5

Record of medicines administered to all pupils

Date							
	Child's name	Time	Name of medicine	Dose given	Any reactions	Signature of staff	Print name
1 1							
1 1							
1 1							
1 1							
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