

# Supporting Students and Pupils with Medical Conditions

POLICY REVISED SEP 2023. REVIEW SEP 2024  
MR S ADAMS



## 1. Rationale and Aim

This policy explains our approach to supporting students with medical conditions in our academy. At Pix Brook Academy, some of our children and young people will have medical conditions that require support and we want to do this so that they can have full access to education.

## 2. Policy

- 2.1.** Section 100 of the Children and Families Act 2014 places a duty on governing bodies of academies to make arrangements for supporting students at their school with medical conditions.
- 2.2.** Some children with medical conditions may be disabled. Where this is the case, we comply with the Equality Act 2010.
- 2.3.** Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan. Our SEND policy sets out support for students with SEN.
- 2.4.** This policy should be read in conjunction with the DfE document "Supporting pupils at school with medical conditions", December 2015.

## 3. Procedure

### 3.1. Implementation of the policy by a named person

- 3.1.1.** There will be a named person with responsibility for day to day implementation of this policy. This person is responsible for ensuring that staff are suitably trained. The named person at Pix Brook is Steph Chandler, and her link for her work linked to this policy is Isobel Whent (SENCO).
- 3.1.2.** All staff will be made aware of a child's condition through the Health Care Plan, and medical needs lists held in SIMS.
- 3.1.3.** There will always be a number of trained first aid staff to ensure adequate cover in the case of staff absence. These staff will be aware of students' medical conditions.
- 3.1.4.** Any supply or cover teachers will be made aware of the medical conditions of students that they will be teaching during their time in the academy.
- 3.1.5.** The named person will support staff in planning educational visits and school trips involving students with medical conditions, ensuring that appropriate risk assessments are drawn up.

### 3.2. Notification that a pupil has a medical condition

- 3.2.1.** Parents should inform the academy of any medical conditions that their child may have, which is requested on the New Starter Form on entry.
- 3.2.2.** This information will be recorded on the new starter form and passed on during the transition process. The same procedures apply to in-year transfers.
- 3.2.3.** The information will be recorded on the pupil/student file, and added to the medical needs register.
- 3.2.4.** The school does not need to wait for a formal diagnosis before providing support students. The school will work with parents and medical professionals to ensure that the correct support is in place as soon as is practicably possible.

### 3.3. Healthcare Plans (see appendix 1)

- 3.3.1.** When a child has a medical condition that requires support in school, and all are agreed that one is required, a health care plan will be created by the school nurse and it must contain the following (taken directly from government statutory guidance, December 2015):
  - 3.3.1.1.** the medical condition, its triggers, signs, symptoms and treatments;

- 3.3.1.2.** the pupil/student'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;
- 3.3.1.3.** specific support for the pupil/student'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;
- 3.3.1.4.** The level of support needed, (some children will be able to take responsibility for their own health needs), including in emergencies. If a child is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring;
- 3.3.1.5.** who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable;
- 3.3.1.6.** who in the academy needs to be aware of the child's condition and the support required;
- 3.3.1.7.** 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;
- 3.3.1.8.** separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments;
- 3.3.1.9.** where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition; and
- 3.3.1.10.** what to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.
- 3.3.1.11.** They will be reviewed annually in consultation with healthcare professionals, parents, the child or young person and academy staff.
- 3.3.1.12.** Where a child has SEN and an EHC plan, the healthcare should be linked to or be part of EHC plan.

### **3.4. Roles and Responsibilities**

- 3.4.1.1.** The Governing body is responsible for making sure that this policy is developed and implemented. They are to ensure that relevant staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.
- 3.4.1.2.** The Principal is responsible for implementing the policy. They are to ensure that all staff are aware of the policy and that staff are aware of students' conditions, recruiting staff as needed and providing training. They should ensure that there is sufficient insurance in place.
- 3.4.1.3.** Academy Staff may be asked to support students with medical needs, although cannot be required to do so. They should be sufficiently trained to undertake the duties. All academy staff should know what to do should a child with a medical condition require help.
- 3.4.1.4.** School nurses notify the academy when a child has been identified as having a medical condition, which will require support in school and will write the healthcare plans. Schools will also notify school nurses of any changes in medical conditions that are pertinent to the healthcare plan.

**3.4.1.5.** Students should be fully involved in the process supporting their needs, and should contribute as much as possible to their healthcare plan. Children who are competent in managing their own needs should be encouraged to do so, including managing their own medication and procedures.

**3.4.2.** Parents should provide the academy with up to date information about their child's needs.

### **3.5. Staff Training and Support**

**3.5.1.** The member of staff responsible for students with medical conditions will review the needs of students in the academy and make a judgement on the training that is required for staff, they will then commission the training from relevant healthcare professionals.

**3.5.2.** Any member of staff being asked to support a pupil/student with medical needs will be given appropriate training.

**3.5.3.** Staff must not give prescription medicines or undertake healthcare procedures without appropriate training.

**3.5.4.** Whole school awareness training will be provided as required throughout the year.

### **3.6. Managing medicines on school premises**

**3.6.1.** Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so.

**3.6.2.** The designated First Aid Co-Ordinator will undertake training in the administration of medicines. In their absence, a nominated first aider will take on the role of administering medication.

**3.6.3.** In almost all cases, students will be able to self-administer their own medication. If this is not the case, parents and carers must inform the academy in writing by completing an Administration of Medicine Consent Form Appendix 2; which is available from the designated First Aid Co-Ordinator.

**3.6.4.** Prescribed medication will only be given if it is in the original container from the pharmacy, clearly stating pupil/student name, D.O.B. name of medication and dosage to be administered. It must be in-date.

**3.6.5.** Epi-Pens should be in a plastic container which is clearly labelled with pupil/student's name, D.O.B & should contain the NHS Health Care Plan, Appendix 1.

**3.6.6.** Medications for the control of asthma, diabetes and allergies may be carried by students themselves, but must be used in a safe and responsible manner. Emergency supplies will be stored by the designated First Aid Co-ordinators room and be accessible at all times.

**3.6.7.** Parent/Carers are responsible for medications being delivered to the academy and collecting unused medication at the end of treatment.

**3.6.8.** Prescribed medicines in the controlled drugs category will be held by the designated First Aid Co-ordinator in a locked, non-removable cabinet in the designated First Aid Co-ordinators room.

**3.6.9.** When no longer required, medicines should be returned to the parent to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps

**3.6.10.** The designated First Aid Co-ordinator will keep accurate records of all medications administered, and will inform parent/carers of any reactions to medication.

**3.6.11.** The Academy will ensure that staff accompanying trips and visits are aware of any students needing medication, and will be advised by the designated First Aid Co-ordinator to speak with parent/carers prior to the visit.

**3.6.12.** Wherever possible students should be allowed to carry their own medicines or own devices or should be able to access their own medication for self-administration quickly and easily.

**3.6.13.** Administration of pain relief, antihistamines and rescue medication.

**3.6.14.** Pain relief, antihistamine and rescue medication (Including Epipens and Buccal Midazolam) will only be administered following written consent from parent /carers.

This consent is requested on entry, or via the Administration of Medicine Consent Form Appendix 3.

**3.6.15.** No students will be given aspirin, unless prescribed by a doctor.

**3.6.16.** Only those staff trained in administration of Epipens and Buccal Midazolam should administer the medication

**3.6.17.** The designated First Aid Co-Ordinator will ensure no other medications containing Paracetamol has been taken by student on the day.

**3.6.18.** The designated First Aid Co-ordinator will keep accurate records with student name, D.O.B, tutor Group, time, dosage and reason given.

**3.6.19.** The designated First Aid Co-ordinator will sign Administration of Pain Relief form, Appendix 3, and request student to countersign.

**3.6.20.** A copy of Administration of Pain Relief form will be kept on record in school.

### **3.7. Students carrying their own pain relief**

**3.7.1.** Pix Brook Academy also supports students who choose to carry pain relief medication for use during the day. Therefore Pix Brook Academy allows students to carry one dose of paracetamol or ibuprofen i.e. 2 tablets, for pain relief during the day.

### **3.8. Emergency Salbutamol**

**3.8.1.** In line with the Department for Health "Guidance on the use of emergency inhalers in schools" we may keep an emergency Salbutamol inhaler for those students with a diagnosis of asthma and an existing prescription for salbutamol.

**3.8.2.** The emergency salbutamol inhaler should only be used by children who have been diagnosed with asthma, and prescribed a reliever inhaler OR who have been prescribed a reliever inhaler AND for whom written parental consent for use of the emergency inhaler has been given.

**3.8.3.** This information should be recorded in a child's healthcare plan

### **3.9. Emergency Procedures**

**3.9.1.** The individual healthcare plan will clearly state what needs to be done in an emergency.

**3.9.2.** If a student needs to be taken to hospital, staff will stay with the pupil/student until a parent arrives to take them to hospital or accompany them in the ambulance.

**3.9.3.** A defibrillator is available in the school reception, along with other emergency equipment.

### **3.10. Trips, Visits and transport**

**3.10.1.** We will actively support all students with medical conditions to enable them to take part in the full range of trips, visits, sporting activities and events organised in our academies

**3.10.2.** Group leaders and supervisors must be made aware of medical needs and how it

will affect the activity, with appropriate risk assessment being put in place. Staff should follow Central Bedfordshire Policy on Education visits and Journeys.

**3.10.3.** It may be helpful to notify the school transport providers about a child's medical needs

### **3.11.** Handling Complaints

**3.11.1.** The Complaints Policy sets out the process that needs to be followed to pursue a complaint.

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/360585/guidance\\_on\\_use\\_of\\_emergency\\_inhalers\\_in\\_schools\\_October\\_2014.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/360585/guidance_on_use_of_emergency_inhalers_in_schools_October_2014.pdf)

#### **4. Monitoring and Evaluation**

The effectiveness of this policy will be monitored and evaluated through ongoing self-evaluation and analysis of the outcomes of students with medical conditions, including attendance rates, achievement profile and involvement in school life.

#### **5. Implementation and Review**

This will be implemented by the members of staff with responsibility for first aid and pastoral care. The

SENCO is responsible for policy implementation.

This policy will be made known to all staff, parent/carers, students and governors via the academy website.

This policy will be reviewed by the Governors Bi-annually.

#### **6. Author and Date**

Steve Adams – January 2022. Revised January 2024

Appendix 1

PBA HEALTH CARE PLAN	
Student name	
Date of Birth	Tutor Group
Home address	
Name of Medical Condition	
Date plan started	Review Date
Parent/Care Name	
Relationship to Child	
Home phone No.	Work Phone No.
Mobile Phone No.	Email Address
Other parent/carer and relationship to child (2nd Contact)	
Home Phone No.	Work Phone No.
Mobile Phone No.	Email Address
Name of Clinic or Hospital	
Phone no. of clinic or Hospital	
GP Name and practice address	
GP Phone No:	



Describe medical needs and child's symptoms

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Daily care requirements (eg sport/lunch)

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Describe what constitutes an emergency for your child

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Follow up care:

Who is responsible in an emergency (state if different for off-site activities)

This form is to be completed with the young person, parents, the school and other health professionals and is kept securely in school, both electronically and as a hard copy. This information may be shared with other professionals in the best interests of the health of the young person.

Signed Parent: Print Name:

Date:

Signed Young Person: Print Name:

Date:

Signed on behalf of the school: Print Name:

Date

Describe what constitutes an emergency.

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Appendix 2

<u>ADMINISTRATION OF MEDICINE CONSENT FORM</u>
Student's Name
D.O.B
Tutor Group
Name of medicine
Strength of medicine if appropriate
How much to give (i.e. dose)
Time to be given
Any other instructions
Phone No. of parent/carer
<i>Tick appropriate box</i>
Medicine to be left at college
Medicine to be taken home each day

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

In consideration of the Principal or the academy staff agreeing to give medication to my/our above named child during school hours, I/we agree to indemnify the Principal, academy staff and Local Education Authority against all claims, costs, actions and demands whatsoever resulting from the administration of the medicine unless such claims, costs, actions or demands result out of negligence of the Principal, academy staff or the Local Education Authority.

Parent/Carer's signature \_\_\_Date. \_

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

Date													
Time													
Sign													

Appendix 3

ADMINISTRATION OF PAIN RELIEF

Student's Name:.....

Tutor Group: ..... Date: ..... Time: .....

Reason:.....

Pain Relief Administered: ..... Strength: .....

Student's Signature:.....

Staff's Signature: .....