SUPPORTING PUPILS WITH MEDICAL CONDITIONS POLICY

MAULDEN LOWER SCHOOL

JULY 2024

REVIEW DATE: SUMMER 2025

Purpose

Maulden Lower School wishes to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

Children and young people with medical conditions are entitled to a full education and have the same rights of admission to school as other children. This means that no child with a medical condition can be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been met. 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.

Some pupils with medical conditions may be classed as disabled under the definition set out in the Equality Act 2010. The school has a duty to comply with the Act in all such cases.

In addition, some pupils with medical conditions may also have SEND and have an EHC plan collating their health, social and SEND provision. For these pupils, the school's compliance with the DfE's 'Special educational needs and disability code of practice: 0 to 25 years' and the school's Special Educational Needs and Disabilities (SEND) Policy will ensure compliance with legal duties.

To ensure that the needs of our pupils with medical conditions are fully understood and effectively supported, we consult with health and social care professionals, pupils and their parents.

Legal Framework

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Children and Families Act 2014
- Education Act 2002
- Education Act 1996 (as amended)
- Children Act 1989
- National Health Service Act 2006 (as amended)
- Equality Act 2010
- Health and Safety at Work etc. Act 1974
- Misuse of Drugs Act 1971
- Medicines Act 1968
- The School Premises (England) Regulations 2012 (as amended)
- The Special Educational Needs and Disability Regulations 2014 (as amended)
- The Human Medicines (Amendment) Regulations 2017
- The Food Information (Amendment) (England) Regulations 2019 (Natasha's Law)

- DfE (2015) 'Special educational needs and disability code of practice: 0-25 years'
- DfE (2021) 'School Admissions Code'
- DfE (2017) 'Supporting pupils at school with medical conditions'
- DfE (2022) 'Guidance on first aid in schools, early years and further education'
- Department of Health (2017) 'Guidance on the use of adrenaline auto-injectors in schools'

This policy operates in conjunction with the following school policies:

- Administering Medication Policy
- Special Educational Needs and Disabilities (SEND) Policy
- Asthma Policy
- Complaints Procedures Policy
- Pupil Equality, Equity, Diversity and Inclusion Policy
- Attendance and Absence Policy
- Pupils with Additional Health Needs Attendance Policy
- Admissions Policy

Aims

This policy aims to ensure that:

- pupils, staff and parents understand how Maulden Lower 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 pupil's condition, where appropriate
- making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- monitoring individual healthcare plans (IHPs) are in place and up to date.

Key Responsibilities

The Local Authority (LA) is responsible for:

- Promoting co-operation between relevant partners regarding supporting pupils with medical conditions
- Providing support, advice/guidance and training to schools and their staff to ensure Individual Healthcare Plans (IHP) are effectively delivered
- Working with schools to ensure pupils attend full-time or make alternative arrangements for the education of pupils who need to be out of school for fifteen days or more due to a health need and who otherwise would not receive a suitable education.

The Governing Board is responsible for:

- Ensuring arrangements are in place to support pupils with medical conditions
- Ensuring the policy is developed collaboratively across services, clearly identifies roles and responsibilities and is implemented effectively
- Ensuring that the Supporting Pupils with Medical Conditions Policy does not discriminate on any grounds including, but not limited to protected characteristics: ethnicity/nationality/origin, religion or beliefs, sex, gender reassignment, pregnancy & maternity, disability or sexual orientation
- Ensuring the policy covers arrangements for pupils who are competent to manage their own health needs
- Ensuring that all pupils with medical conditions are able to play a full and active role in all aspects of school life, participate in school visits/trips/sporting activities, remain healthy and achieve their academic potential
- Ensuring that relevant training is delivered to a sufficient number of staff who have responsibility to support children with medical conditions and that they are signed off as competent to do so. Staff to have access to information, resources and materials.
- Ensuring written records are kept of, any and all, medicines administered to pupils
- Ensuring the policy sets out procedures in place for emergency situations
- Ensuring the level of insurance in place reflects the level of risk
- Handling complaints regarding this policy as outlined in the school's Complaints Policy.

The Head Teacher is responsible for:

- Ensuring the policy is developed effectively with partner agencies and then making staff aware of this policy and their role in its implementation
- The day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and Procedures at Maulden Lower School
- Liaising with healthcare professionals regarding the training required for staff
- Identifying staff who need to be aware of a child's medical condition
- Developing Individual Healthcare Plans (IHPs)
- Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHPs in normal, contingency and emergency situations
- If necessary, facilitating the recruitment of staff for the purpose of delivering the promises made in this policy. Ensuring more than one staff member is identified, to cover holidays/absences and emergencies
- Ensuring the correct level of insurance is in place for teachers who support pupils in line with this policy
- Continuous two way liaison with school nurses and school in the case of any child who has or develops an identified medical condition
- Ensuring confidentiality and data protection
- Assign appropriate accommodation for medical treatment/care
- Considering the purchase of a defibrillator

- Consider the voluntarily holding 'spare' salbutamol asthma inhaler(s) for emergency use.

Staff Members are responsible for:

- Taking appropriate steps to support children with medical conditions and familiarising themselves with procedures which detail how to respond when they become aware that a pupil with a medical condition needs help. A first-aid certificate is not sufficient
- Knowing where controlled drugs are stored and where the key is held
- Ensuring that all pupils with medical conditions are able to participate in lessons
- Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, with particular specialist training if they have agreed to undertake a medication responsibility
- Allowing inhalers, adrenalin pens and blood glucose testers to be held in an accessible location, following DfE guidance.

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 well receive sufficient and suitable training and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of the 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.

School Nurses and other healthcare professionals are responsible for:

- Collaborating on developing an IHP in anticipation of a child with a medical condition starting school
- Notifying the school when a child has been identified as requiring support in school due to a medical condition at any time in their school career
- Supporting staff to implement an IHP and then participate in regular reviews of the IHP. Giving advice and liaison on training needs
- Liaising locally with lead clinicians on appropriate support. Assisting the Head Teacher in identifying training needs and providers of training

Parents and Carers are responsible for:

- Keeping the school informed about any new medical condition or changes to their child/children's health
- Participating in the development and regular reviews of their child's IHP

- Completing a parental consent form to administer medicine or treatment before bringing medication into school
- Providing the school with the medication and/or equipment their child requires and keeping it up to date including collecting leftover medicine
- Carrying out actions assigned to them in the IHP with particular emphasis on them, or a nominated adult, being contactable at all times.

The Pupils are responsible for:

- Providing information on how their medical condition affects them
- Contributing to their IHP
- Complying with the IHP and self managing their medication or health needs including carrying medicines or devices, if judged competent to do so by a healthcare professional and agreed by parents.

Procedure to be followed when notification is received that a pupil has a medical condition

For Pre-School or Reception children starting at Maulden Lower School and children transferring at the beginning of a new term, arrangements will be made and put in place for the start of that term. For children with a new diagnosis of for children joining mid-term, every effort will be made to ensure arrangements are put in place within 2 weeks. However, where this is not possible due to external factors, the parents must be made aware of the situation. Maulden Lower School will ensure that the arrangements are put in place as soon as practically possible.

Admissions

Admissions will be managed in line with the school's Admissions Policy.

No child will be denied admission to the school or prevented from taking up a school place because arrangements for their medical condition have not been made; a child may only be refused admission if it would be detrimental to the health of the child to admit them into the school setting.

The school will not ask, or use any supplementary forms that ask, for details about a child's medical condition during the admission process.

Notifications

When the school is notified that a pupil has a medical condition that requires support in school, the school nurse will inform the headteacher. Following this, the school will arrange a meeting with parents, healthcare professionals and the pupil, with a view to discussing the necessity of an IHP (outlined in detail in the IHPs section of this policy).

The school will not wait for a formal diagnosis before providing support to pupils. Where a pupil's medical condition is unclear, or where there is a difference of opinion concerning what support is required, a judgement will be made by the headteacher

based on all available evidence (including medical evidence and consultation with parents).

For a pupil starting at the school in a September uptake, arrangements will be put in place prior to their introduction and informed by their previous institution. Where a pupil joins the school mid-term or a new diagnosis is received, arrangements will be put in place within two weeks

Training of Staff

Any staff member providing support to a pupil with medical conditions will receive suitable training. Staff will not undertake healthcare procedures or administer medication without appropriate training. Training needs will be assessed by the school nurse through the development and review of IHPs, on a termly basis for all school staff, and when a new staff member arrives. The school nurse will confirm the proficiency of staff in performing medical procedures or providing medication.

A first-aid certificate will not constitute appropriate training for supporting pupils with medical conditions.

Through training, staff will have the requisite competency and confidence to support pupils with medical conditions and fulfil the requirements set out in IHPs. Staff will understand the medical conditions they are asked to support, their implications, and any preventative measures that must be taken.

Whole-school awareness training will be carried out on a annual basis for all staff, and included in the induction of new staff members.

The school nurse will identify suitable training opportunities that ensure all medical conditions affecting pupils in the school are fully understood, and that staff can recognise difficulties and act quickly in emergency situations.

Training will be commissioned by the SBM and provided by the following bodies:

- Commercial training provider
- The school nurse
- GP consultant
- The parents of pupils with medical conditions

The parents of pupils with medical conditions will be consulted for specific advice and their views are sought where necessary, but they will not be used as a sole trainer.

Supply teachers will be:

- Provided with access to this policy.
- Informed of all relevant medical conditions of pupils in the class they are providing cover for.

Covered under the school's insurance arrangements.

Medical Conditions Register/List

Schools admission forms should request information on pre-existing medical conditions. Parents must have an easy pathway to inform school at any point in the school year if a condition develops or is diagnosed. Consideration could be given to seeking consent from GPs to have input into the IHP and also to share information for recording attendance.

A medical conditions list or register should be kept, updated and reviewed regularly by the nominated member of staff. Each class teacher should have an overview of the list for the pupils in their care, within easy access.
Supply staff and support staff should similarly have access on a need to know basis. Parents should be assured data sharing principles are adhered to.

For pupils on the medical conditions list key stage transition points meetings should take place in advance of transferring to enable parents, school and health professionals to prepare IHP and train staff if appropriate.

Individual Healthcare Plans (IHPs)

Where necessary (Head Teacher will make the final decision) an individual Healthcare Plan (IHP) will be developed in collaboration with the pupil, parents/carers, Head teacher, Special Educational Needs Co-ordinator (SENDCo) and medical professionals.

IHPs will be easily accessible to all relevant staff, including supply/agency staff, whilst preserving confidentiality. Staffrooms are inappropriate locations under GDPR advice for displaying IHPs as visitors/parents, helpers etc may enter. If consent is sought from parents a photo and instructions may be displayed. More discreet location for storage such as intranet or locked file is more appropriate. However, in the case of conditions with potential life-threatening implications the information should be available clearly and accessible to everyone.

IHPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.

Where a child is returning from a period of hospital education or alternative provision or home tuition, collaboration between the LA/AP provider and school is needed to ensure that the IHP identifies the support the child needs to reintegrate.

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 Head Teacher will consider the following when deciding what information to record on the 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, eg crowded corridors, travel between classrooms.
- Specific support for the pupil's education, social and emotional needs. For example, how absences will be managed, or additional support in catching up with lessons

Transport Arrangements

Where a pupil with an IHP is allocated school transport the school should invite a member of the LA Transport Team who will arrange for the driver/escort to participate in the IHP meeting. A copy of the IHP will be copied to the Transport team and kept on the pupil record. The IHP must be passed to the current operator for use by the driver/escort and the Transport team will ensure that the information is supplied when a change operator takes place.

For some medical conditions the driver/escort will require adequate training. For pupils who receive specialised support in school with their medical condition this must equally be planned for in travel arrangements to school and included in the specification to tender for that pupil's transport.

When prescribed controlled drugs need to be sent in to school parents will be responsible for handing them over to the adult in car in a suitable bag or container. They must be clearly labelled with name and dose etc.

Controlled drugs will be kept under supervision of the adult in the car throughout the journey and handed to a school staff member on arrival. Any change in this arrangement will be reported to the Transport Team for approval or appropriate action.

Education Health Needs (EHN) referrals

All pupils of compulsory school age who because of illness, lasting 15 days or more, would not otherwise receive a suitable full-time education are provided for under the local authority's duty to arrange educational provision for such pupils.

In order to provide the most appropriate provision for the condition the EHN team accepts referrals where there is a medical diagnosis from a medical consultant.

Medicines

Where possible, unless advised it would be detrimental to health, medicines should be prescribed in frequencies that allow the pupil to take them outside of school hours.

If this is not possible, prior to staff members administering any medication, the parent/carers of the child must complete and sign a parental consent to administration of medicine form.

No child will be given any prescription or non-prescription medicines without parental consent except in exceptional circumstances.

Where a pupil is prescribed medication by a healthcare professional without their parents/carers knowledge, every effort will be made to encourage the pupil to involve their parents while respecting their right to confidentiality.

No child under 16 years of age will be given medication containing aspirin without a doctor's prescription.

Medicines MUST be in date, labelled, and provided in the original container (except in cases of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered.

A maximum of four weeks supply of the medication may be provided to the school at any one time.

A child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. Monitoring arrangements may be necessary. Schools should otherwise keep controlled drugs that have been prescribed for a pupil securely in a non portable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency.

Medications will be stored in the fridge in the staff room or in the school office or child's classroom as appropriate.

Any medications left over at the end of the course will be returned to the child's parents/carers.

Written records will be kept of any medication administered to children.

Pupils will never be prevented from accessing their medication.

Emergency salbutamol inhaler kits may be kept voluntarily by the school.

General posters about medical conditions (diabetes, asthma, epilepsy etc) are recommended to be visible in the staff room and the school office.

Maulden Lower School can not be held responsible for side effects that occur when medication is taken correctly.

Staff will not force a pupil, if the pupil refuses to comply with their health procedure, and the resulting actions will be clearly written in to the IHP which will include informing parents.

Allergens, anaphylaxis and adrenaline auto-injectors (AAIs)

The school's Allergen and Anaphylaxis Policy is implemented consistently to ensure the safety of those with allergies.

Parents are required to provide the school with up-to-date information relating to their children's allergies, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication required.

The headteacher and catering team will ensure that all pre-packed foods for direct sale (PPDS) made on the school site meet the requirements of Natasha's Law, i.e. the product displays the name of the food and a full, up-to-date ingredients list with allergens emphasised, e.g. in bold, italics or a different colour.

The catering team will also work with any external catering providers to ensure all requirements are met and that PPDS is labelled in line with Natasha's Law. Further information relating to how the school operates in line with Natasha's Law can be found in the Whole-School Food Policy.
Staff members receive appropriate training and support relevant to their level of responsibility, in order to assist pupils with managing their allergies.

The administration of adrenaline auto-injectors (AAIs) and the treatment of anaphylaxis will be carried out in accordance with the school's Allergen and Anaphylaxis Policy. Where a pupil has been prescribed an AAI, this will be written into their IHP.

A Register of Adrenaline Auto-Injectors (AAIs) will be kept of all the pupils who have been prescribed an AAI to use in the event of anaphylaxis. A copy of this will be held in each classroom for easy access in the event of an allergic reaction and will be checked as part of initiating the emergency response.

Pupils who have prescribed AAI devices, and are aged seven or older, can keep their device in their possession. For pupils under the age of seven who have prescribed AAI devices, these will be stored in a suitably safe location in the classroom.

Designated staff members will be trained on how to administer an AAI, and the sequence of events to follow when doing so. AAIs will only be administered by these staff members.

In the event of anaphylaxis, a designated staff member will be contacted via the internal telephone system. Where there is any delay in contacting designated staff members, or where delay could cause a fatality, the nearest staff member will administer the AAI. If necessary, other staff members may assist the designated staff members with administering AAIs, e.g. if the pupil needs restraining.

Where a pupil is, or appears to be, having a severe allergic reaction, the emergency services will be contacted even if an AAI device has already been administered.

In the event that an AAI is used, the pupil's parents will be notified that an AAI has been administered and informed whether this was the pupil's or the school's device. Where any AAIs are used, the following information will be recorded on the Adrenaline Auto-Injector (AAI) Record:

- Where and when the reaction took place
- How much medication was given and by whom

For children under the age of 6, a dose of 150 micrograms of adrenaline will be used. For children aged 6-12 years, a dose of 300 micrograms of adrenaline will be used.

AAIs will not be reused and will be disposed of according to manufacturer's guidelines following use.

In the event of a school trip, pupils at risk of anaphylaxis will have their own AAI with them and the school will give consideration to taking the spare AAI in case of an emergency.
Further information relating to the school's policies and procedures addressing allergens and anaphylaxis can be found in the Allergen and Anaphylaxis Policy

Emergencies

Medical emergencies will be dealt with under the school's emergency procedures which will be communicated to all relevant staff so they are aware of signs and symptoms.

Pupils will be informed in general terms of what to do in an emergency such as telling a teacher.

If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents arrive.

Day trips, residential visits and sporting activities

Unambiguous arrangements should be made and be flexible enough to ensure pupils with medical conditions can participate in school trips, residential stays, sports activities and not prevent them from doing so unless a clinician states it is not possible.
To comply with best practice risk assessments should be undertaken, in line with H&S executive guidance on school trips, in order to plan for including pupils with medical conditions. Consultation with parents, healthcare professionals etc on trips and visits will be separate to the normal day to day IHP requirements for the school day.

Avoiding unacceptable practice

Each case will be judged individually but in general the following is not considered acceptable:

- preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- assuming that pupils with the same condition require the same treatment
- ignoring the views of the pupil and/or their parents or ignoring medical evidence or opinion
- sending pupils home frequently or preventing them from taking part in activities in school
- sending the pupil to the medical room or school office alone or with an unsuitable escort if they become ill
- penalising pupils with medical conditions for their attendance record where the absences relate to their condition
- making parents feel obliged or forcing parents to attend school to administer medication or provide medical support, including toilet issues
- creating barriers to children participating in school life, including school trips
- refusing to allow pupils to eat, drink, use the toilet when they need to in order to manage their condition

Insurance

Teachers who undertake responsibilities within this policy will be assured by the Head Teacher that they are covered by the LA/schools insurance.

Full written insurance policy documents are available to be viewed by members of staff who are providing support to pupils with medical conditions. Those who wish to see the documents should contact the Head Teacher.

Complaints

All Complaints should be raised with the school in the first instance. The details of how to make a formal complaint can be found in the School Complaints Policy.

This policy statement has been endorsed by the Governing Body, and will be reviewed on an annual basis

Policy reviewed and updated : Signed ..... Date .....

Policy ratified and updated : Signed ..... Date .....

APPENDIX A

Definitions

Parents – is a wide reference not only to a pupil's birth parents but to adoptive, step and foster parents, or other persons who have parental responsibility for, or who have care of a pupil

Medical Condition – for these purposes is either a physical or mental health medical condition as diagnosed by a healthcare professional which results in the child or young person requiring special adjustments for the school day, either ongoing or intermittently. This includes; a chronic or short-term condition, a long term health need or disability, an illness, injury or recovery from treatment or surgery. Being 'unwell' and common childhood diseases are not covered.

Medication – is defined as any prescribed or over the counter treatment.

Prescription Medication – is defined as any drug, or device prescribed by a doctor, prescribing nurse or dentist and dispensed by a pharmacist with instructions for administration, dose and storage.

Staff Member – any member of staff employed at Maulden Lower School.

IHP – is a school document that sets out clearly the planned support needed to best aid the child when accessing the educational setting.

Professional – external agencies may from time to time be approached or invited to contribute their medical expertise in the writing and guidance given to the school on completing an IHP.

APPENDIX B

Supporting Pupils with Medical Conditions Flowchart

1. • Parent or healthcare professional informs the school that a child has medical condition or is due to return from long-term absence, or needs have changed.
2. • Head Teacher or delegated SLT member co-ordinates meeting to discuss child's medical needs and identifies member of school staff who willl provide support to the pupil
3. • Meeting held to discuss and agree on the need for IHP to include key school staff, child, parent and relevant healthcare professionals and other medical/health clincian as appropriate (or to consider evidence provided by them)
4. • Develop IHP in partnership
   • Agree who leads on writing IHP
   • Input from healthcare professionals must be provided
5. • School staff training needs identified
6. • Healthcare professional commissions and/or delivers training
   • Staff signed off as competent - review date agreed
7. • IHP implemented and circulated to all relevant staff
8. • IHP reviewed annually or when condition changes - Parent/carer or healthcare professional to initiate

APPENDIX C
Medical Indemnity Form

MEDICAL INDEMNITY
Permission to administer medication

Child's full name		Age		Date	
Name of medication					
Dosage		Time of dosage			

Any special instructions (take with food, take an hour before food, etc)

Notices
- Medicines must be in original container as dispensed by the pharmacy clearly labelled with the child's name and dispensing instructions. - Staff are not allowed to make any changes to the prescribed dosage on parental instruction - If more than one medication is to be given a separate form should be completed for each.

Medicine to be left at school		Medicine to be taken home each day	

I hereby give my consent for a member of Maulden Lower School staff to administer the above medication to my child.

Name		Relationship to child	
Signed		Date	