



Supporting Students with Medical Conditions Policy

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1. Aims

This policy aims to ensure that:

- students, staff and families of The Wren understand how the school will support students with medical conditions
- students with medical conditions are properly supported to allow them to access the same education as other students, including school trips and sporting activities.

The Principal has delegated day-to-day operational responsibility for supporting students with medical conditions to the **Assistant Vice Principal responsible for Inclusion**, who acts as the school's **Operational Medical Conditions Lead**.

This role includes coordinating Individual Healthcare Plans (IHPs), ensuring appropriate staff training is in place, acting as a key point of contact for families and healthcare professionals, and monitoring the effective implementation of this policy.

The Operational Lead for Medical Conditions will implement this policy by:

- making sure sufficient staff are suitably trained
- making staff aware of students' conditions, where appropriate
- making sure there are cover arrangements to ensure someone is always available to support students with medical conditions
- providing supply teachers with appropriate information about the policy and relevant students
- developing and monitoring Individual Healthcare Plans (IHPs).

2. Legislation

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 students at their school with medical conditions.

It is also based on the Department for Education (DfE)'s statutory guidance on [supporting students with medical conditions at school](#).

This policy also complies with our funding agreement and articles of association.

3. Roles and Responsibilities

3.1 The Academy Committee (Governors)

Excalibur Academies Trust has ultimate responsibility to make arrangements to support students with medical conditions. The Principal will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting students with medical conditions. The Academy Committee will support the Principal to ensure that policies are followed properly at the school.

3.2 The Principal

While the Principal retains overall responsibility for Individual Healthcare Plans, the coordination, implementation and review of IHPs is overseen by the Assistant Vice Principal responsible for Inclusion.

All staff identified within an IHP will be made aware of their responsibilities and any actions they may be required to take, including in emergency situations.

The AVP - Inclusion 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 student's condition
- take overall responsibility for the development of IHPs
- make sure that school staff are appropriately insured and aware that they are insured to support students in this way
- contact the school nursing service in the case of any students 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 student's medical needs and that this information is kept up-to-date.

3.3 Staff

Supporting students 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 students 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 students with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

Teachers will consider the needs of students with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a student with a medical condition needs help.

3.4 Families of The Wren

Families of The Wren will:

- provide the school with sufficient and up-to-date information about the student's medical needs
- be involved in the development and review of the student's IHP and may be involved in its drafting
- carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times.

3.5 Students

Students with medical conditions will often be best placed to provide information about how their condition affects them. Students 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 student has been identified as having a medical condition that will require support in school. This will be before the student starts school, wherever possible. They may also support staff to implement a student's IHP.

Healthcare professionals, such as GPs and pediatricians, will liaise with the school's nurses and notify them of any

students identified as having a medical condition. They may also provide advice on developing IHPs.

4. Equal Opportunities

The school is clear about the need to actively support students 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 students 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 students with medical conditions are included. In doing so, students, their families and any relevant healthcare professionals will be consulted.

5. Being Notified that a student has a Medical Condition

When the school is notified that a student has a medical condition, the process outlined below (See Appendix 1) will be followed to decide whether the student requires an IHP.

The school will make every effort to ensure that appropriate arrangements are put into place within **two weeks** of being notified that a student has a medical condition, or by the start of the relevant term for new students.

Where necessary, interim support arrangements will be put in place immediately while an Individual Healthcare Plan (IHP) is being developed, so that a student's health, safety and access to education are not compromised.

5.1. Medical Return to School Meetings

Return to school meetings are arranged for students who have had an accident or injury requiring external medical intervention, or if they are required to attend school on crutches on the advice of a medical practitioner, and / or following an operation.

Meetings will be arranged to take place before the student returns to school to assess the student's safety on the

school site / ability to move safely around the school site and consider any timetabling or wider implications. These meetings will involve the linked Progress Leader and any relevant members of staff.

6. Individual Health Care Plans (IHP)

The Principal has overall responsibility for the development of IHPs for students with medical conditions. This has been delegated to the Assistant Vice Principal responsible for Inclusion.

Plans will be reviewed at least annually or earlier if there is evidence that the student's needs have changed. Plans will be developed with the student's best interests in mind and will set out:

- what needs to be done
- when
- by whom

Not all students with a medical condition will require an IHP. It will be agreed with a healthcare professional and the student's family when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the Principal will make the final decision.

Plans will be drawn up in partnership with the school, the family and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the student's specific needs. The student will be involved wherever appropriate.

IHPs will be linked to, or become part of, any Education, Health and Care (EHC) Plan. If a student 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 student's condition and how much support is needed. The Principal and the Assistant Vice Principal for Inclusion, will consider the following when deciding what information to record on IHPs (Appendix 2 – IHP Template):

- The medical condition, its triggers, signs, symptoms and treatments
- The student's resulting needs, including medication (dosage, 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 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
- The level of support needed, including in emergencies. If a student 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 student'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 student's condition and the support required
- Arrangements for written permission from the student's family and the Principal for medication to be
- administered by a member of staff, or self-administered by the students 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 student can participate, e.g. risk assessments
- Where confidentiality issues are raised by the student or their family, only designated individuals are to be
- entrusted with information about the student's condition
- What to do in an emergency, including who to contact, and contingency arrangements

7. Managing Medicines

Prescription and non-prescription medicines will be administered at school:

- When it would be detrimental to the student's health or school attendance not to do so and
- Where we have the family's written consent

The only exception to this is where the medicine has been prescribed to the student without the knowledge of their legal guardian.

Students under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Student Reception supports students with medication. All medication must be kept securely at Student Reception. Arrangements for administering medication will be made between the student and Student Reception unless written guidance has been received from a medical professional. Anyone giving a student any medication (for example, for pain relief) must first check maximum dosages and when the previous dosage was taken.

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. Students must 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 adrenaline pens will always be readily available to students and not locked away.

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.

All controlled drugs are kept in a secure cupboard in the Student Reception and only named staff have access. Any arrangements outside of policy guidance must have written consent from the Principal.

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

7.2. Students Managing their own Needs

Students who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with their family and it will be reflected in their IHP.

Students will be allowed to carry their own medicines and relevant devices wherever possible. Staff will not force a student to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform their family so that an alternative option can be considered, if necessary.

7.3. Unacceptable Practice

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

- prevent students from easily accessing their inhalers and medication, and administering their medication when and where necessary
- assume that every student with the same condition requires the same treatment
- ignore the views of the student or their family
- ignore medical evidence or opinion (although this may be challenged)
- send students 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 IHP
- if the student becomes ill, send them to the school office or medical room unaccompanied, or with someone unsuitable
- penalise students for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- prevent students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- insist a student's family, or otherwise make them feel obliged to, attend school to administer medication or provide medical support to their student, including with toileting issues. No family should have to give up working because the school is failing to support the student's medical needs
- prevent students from participating, or create unnecessary barriers to students participating in any aspect of school life, including school trips, e.g. by requiring families to accompany their child
- administer, or ask students to administer, medicine in school toilets.

8. Emergency Procedures

The school will follow its normal emergency procedures, including calling **999 without delay** where a student's condition requires emergency medical assistance.

Individual Healthcare Plans (IHPs) will clearly define what constitutes an emergency for each student and the action to be taken. These plans will be readily accessible to relevant staff.

Where a student is taken to hospital, a member of staff will stay with the student until a family member or nominated emergency contact arrives or will accompany the student in an ambulance where appropriate.

In all cases, emergency medical care will take priority over contacting families.

9. Training

Staff who are responsible for supporting students 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 students 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 Assistant Vice Principal responsible for Inclusion. Training will be kept up-to-date and will be monitored by the Assistant Vice Principal for Inclusion regularly. Training will:

- be sufficient to ensure that staff are competent and have confidence in their ability to support students
- 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 awareness training so that they understand this policy, their responsibilities, and how to respond appropriately in both routine and emergency situations. This training will include recognising common medical conditions and knowing how to act quickly when a concern arises.

Training will be provided during staff induction and refreshed as required. Records of training will be maintained by the school.

10. Record Keeping

The Principal will ensure that written records are kept of all medicine administered to students for as long as these students are at the school. Where possible, families will be informed if their child has been unwell at school.

IHPs are held by Student Reception.

11. Liability and Indemnity

Excalibur Academies Trust will ensure that an appropriate level of insurance is in place and that it reflects the school's level of risk.

The school is a member of the Department for Education's **Risk Protection Arrangement (RPA)**.

Staff are indemnified and insured when supporting students with medical conditions, provided they act in accordance with this policy, relevant training, and agreed Individual Healthcare Plans.

12. Complaints

Families with concerns or complaints about the support provided for their child's medical condition should raise these initially with the student's Progress Leader.

Where a concern relates to an urgent medical or safeguarding matter, families may escalate the issue directly to a member of the Senior Leadership Team or the Principal.

The school's Complaints Procedure will be followed where concerns are not resolved. **Raising a complaint will not delay or prevent appropriate medical support being provided to a student.**

13. Monitoring Arrangements

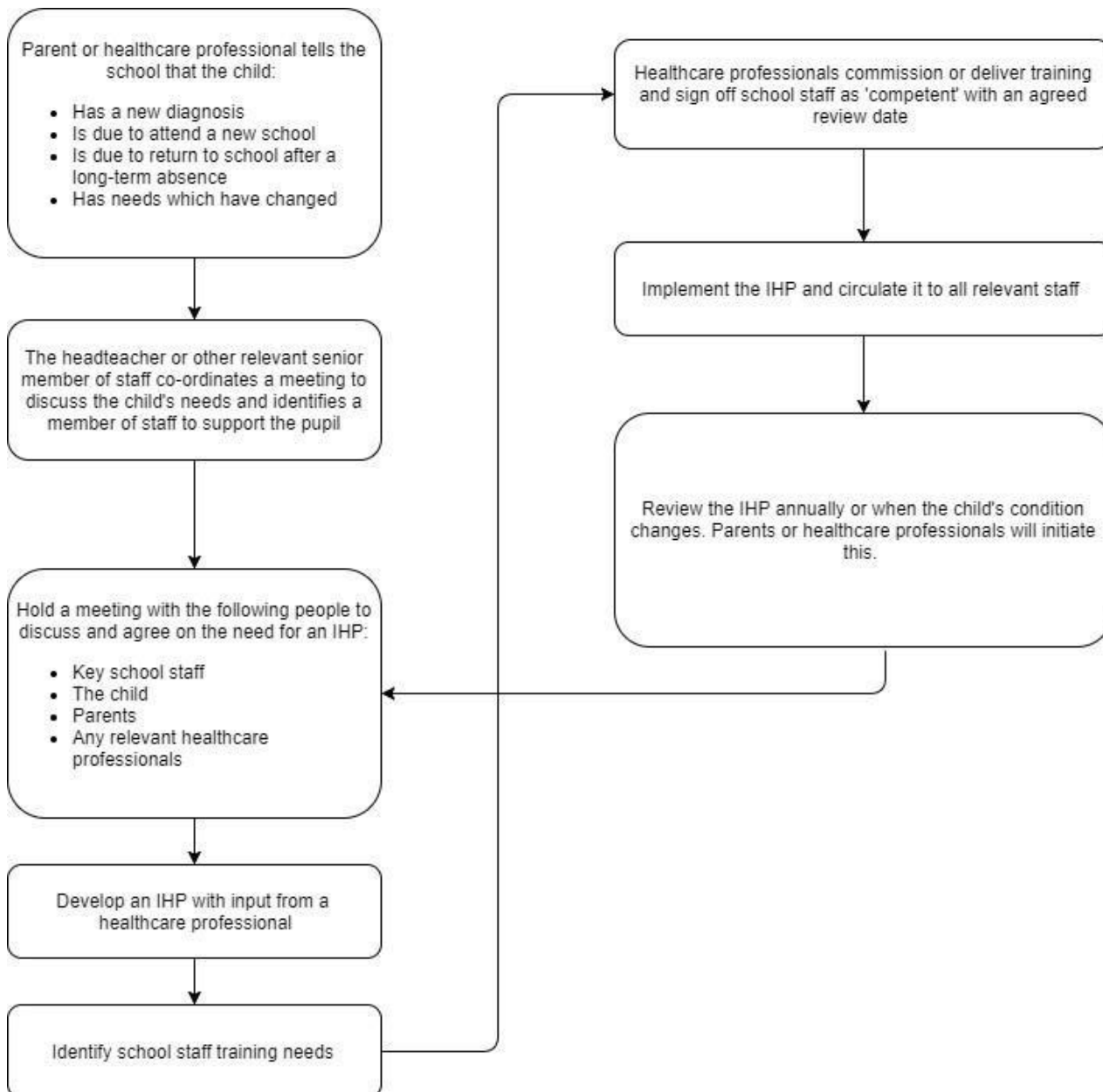
This policy will be reviewed and approved by the Principal annually.

14. Links to other Policies

This policy links to the following policies:

- Accessibility Plan
- Complaints
- Equality information and objectives
- First Aid
- Health and Safety
- Child Protection and Safeguarding

Appendix 1 – Being Notified a student has a Medical Condition



NB this flowchart does not use our terms i.e. pupil, headteacher, child. It would be preferable to recreate it using the correct terminology, although not crucial.

Appendix 2 – IHP Template

Name of school/setting

Student's name

Group/class/tutor

Date of birth

Student's address

Medical diagnosis or condition Date

Review date

Family Contact Information

Name

Relationship to student

Phone no. (work) (home) (mobile)

Name

Relationship to student

Phone no. (work) (home) (mobile)

Clinic/Hospital Contact

Name

Phone no.

G.P.

Name

Phone no.

Support

Who is responsible for providing support in school?

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Describe medical needs and give details of student's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the student's educational, social and emotional needs

Arrangements for school visits/trips etc.

Other information

Describe what constitutes an emergency, and the action to take if this occurs

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

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to