




Hunnyhill Primary School

Date of Review	October 2023
Next Review Due	October 2024
Changes from previous	
Staff Responsibility	SENCO
Responsibility FGB/Committee	FGB
Signed by Chair of Governors	

Supporting Pupils with Medical Conditions Policy

Introduction

This Policy is governed by the statutory guidance and non-statutory advice set out in the document 'Supporting Pupils at School with Medical Conditions' DFE Published 1 September 2014, last updated 16 August 2017.

The **Children and Families Act 2014** places a duty on governing bodies to make arrangements for supporting pupils at their school with medical conditions. The policy also applies to activities taking place off-site as part of normal educational activities.

The aim is 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.

Key Points

Every effort will be made to ensure that:

- Pupils at school with medical conditions will be properly supported so that they have full access to education, including school trips and physical education.
- The Governing Board is legally responsible and accountable for ensuring that arrangements are in place in school to support pupils with medical conditions.
- The Governing Board will ensure that school leaders consult health and social care professionals, pupils and parents/carers to ensure that the needs of pupils with medical conditions are effectively supported.
- The Governing Board will ensure that the school provides effective support for pupils' medical conditions and that pupils feel safe and establish relationships with relevant local health services to help make decisions about the support provided.
- The needs of the pupils include educational impacts and the social and emotional implications associated with medical conditions.
- The Governing Board will ensure that it meets its duty under the Equality Act 2010. • The Governing Board will ensure that it complies with the Special Educational Needs and Disability (SEND) code of practice for pupils who have medical conditions that require EHC Plans. <https://www.gov.uk/government/publications/sendcode-of-practice-0-to-25>

The Role of the Governing Board

1. The Governing Board will ensure that arrangements are in place to support pupils with medical conditions in terms of both physical and mental health; in doing so they will ensure that such children enjoy the same opportunities at school as any other child. In some cases this will require flexibility and involve, for example, programmes of study that rely on part time attendance at school in combination with alternative provision arranged by the local authority. Consideration may also be given to how pupils will be reintegrated back into school after periods of absence.
2. In making their arrangements the Governing Board will take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. Some will be more obvious than others. The Governing Board will therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life.
3. The Governing Board will ensure that their arrangements give parents/carers and pupils confidence in the school's ability to provide effective support for medical conditions in school. The arrangements will show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care. They will ensure that staff are properly trained to provide the support that pupils need.
4. 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 will be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made. However, in line with their safeguarding duties, the Governing Board will ensure that pupils' health is not put at unnecessary risk from, for example, infectious diseases. They therefore do not have to accept a child in school at times where it would be detrimental to the health of that child or others to do so.
5. The Governing Board will ensure that the arrangements they put in place are sufficient to meet their statutory responsibilities and should ensure that policies, plans, procedures and systems are properly and effectively implemented. This aligns with their wider safeguarding duties.

6. The Governing Board will ensure that this policy is reviewed regularly and is readily accessible to parents/carers and school staff.

Policy Implementation

Responsibility is delegated to Medical Lead **Julie Hatcher**; under the supervision of Inclusion Lead **Carol Ward-Reynolds** / SENCO **Claire Flawell**. They form the Inclusion Team and are responsible for ensuring that:

- Sufficient staff are suitably trained, including cover arrangements in the case of staff absence or staff turnover to ensure someone is always available.
- All relevant staff, including supply staff, are aware of children's conditions.
- Risk assessments for school visits, holidays and other school activities outside of the normal timetable include reference to children's medical needs.
- Individual healthcare plans are kept up to date.

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

- The school nurse and in their absence a school leader will consult with the relevant health and social care professionals, the pupil and parent/carers as soon as notification is received. Where a child is changing schools, the health and social care professionals linked to the previous setting will be consulted.
- Relevant Health and Social Care professionals, the pupil, parent/carers will contribute guidance as appropriate where a pupil is being re-integrated or where their needs have changed. This may include decisions about the rate of integration, timetable adaptations and changes, and arrangements for any staff training and support. For children new to school, arrangements should be in place in time for the start of the relevant school term and every effort should be made to ensure that arrangements are put in place within two weeks.
- In some cases, Hunnyhill Primary School may not wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on the available medical evidence and in consultation with parent/carers. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place, in the best interests of the child.

Individual Healthcare Plans

The model process in Appendix A will be followed for developing Individual Healthcare Plans.

Individual Healthcare Plans should capture the steps which a school should take to help the child manage their medical condition and overcome any potential barriers. Responsibility for ensuring the Individual Healthcare Plan is finalised and implemented rests with the school. Where the child has a special educational need identified in an EHC Plan, the Individual Healthcare Plan should be linked to or become part of the EHC Plan.

Named person: The Medical Lead under the supervision of the Inclusion Lead and SENCO is responsible for ensuring the compiling of Individual Health Care Plans. Hunnyhill Primary School, healthcare professionals and parent/carers should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached, the Headteacher will take a final view. Individual Healthcare Plans will be easily accessible to all who need to refer to them, while preserving confidentiality. The level of detail within plans will depend on the complexity of the child's condition and the degree of support needed.

Individual Healthcare Plans, (and their review), may be initiated, in consultation with the parent/carer, by a member of school staff or a healthcare professional involved in providing care to the child. Plans will be drawn up in partnership between the school, parents/carers, and a relevant healthcare professional, who can best advise on the particular needs of the child.

Plans will be reviewed at least annually or earlier if evidence is presented that the child's needs have changed.

Where a child is returning to school following a period of hospital education or alternative provision (including home tuition), Hunnyhill Primary School will work with the local authority and education provider to ensure that the Individual Healthcare Plan identifies the support the child will need to reintegrate effectively.

Contents of Individual Health Care Plans

These will include, as appropriate:

- 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, (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;
- 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;
- Who in the school needs to be aware of the child's condition and the support required;
 - Arrangements for written permission from parent/carers and the Headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours;
 - Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments;
 - Where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition; and
 - What to do in an emergency, including whom to contact, and contingency arrangements.

Where children have an emergency healthcare plan prepared by their lead clinician, this will be used to inform development of their Individual Healthcare Plan.

Roles and Responsibilities

Partnership working between school staff, healthcare professionals (and where appropriate, social care professionals), local authorities, parent/carers and pupils is critical in providing effective support, to ensure that the needs of pupils with medical conditions are met effectively. Collaborative working arrangements between all those involved, showing how they will work in partnership is set out below.

The Governing Board - will make arrangements to support pupils with medical conditions in school, including making sure that this policy for supporting pupils with medical conditions in school is developed and

implemented. They will ensure that a pupil with medical conditions is supported to enable the fullest participation possible in all aspects of school life. The Governing Board will ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. They will also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

The Headteacher has overall responsibility for ensuring that this policy is developed and effectively implemented with partners. The Headteacher will also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way. The day to day management is delegated to the Inclusion Team.

The Inclusion Team (Inclusion Lead / SENCO / Medical Lead) – will ensure that this policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. The Inclusion Team will ensure that all staff who need to know are aware of the child's condition. They should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. This may involve recruiting a member of staff for this purpose. The Inclusion Team has the responsibility for the development of Individual Healthcare Plans. The Inclusion Team will be responsible for contacting the school nursing service in the case of any child 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.

School staff - any member of school staff may be asked to provide support to pupils with medical conditions, including the administration of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach. Identified staff /First Aid staff will receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions to enable them to know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

School nurses - are responsible for notifying the school when a child has been identified as having a medical condition which will require support in Hunnyhill Primary School. Wherever possible, they will do this before the child starts at the school. They will support staff on implementing a child's Individual Healthcare Plan and provide advice and liaison, for example on training. School nurses will liaise with lead clinicians locally on appropriate support for the child and associated staff training needs. Community nursing teams will also be a valuable potential resource for Hunnyhill Primary school, seeking advice and support in relation to children with a medical condition.

Other healthcare professionals, including GPs and paediatricians - should notify the school nurse when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans. Specialist local health teams will be asked to provide support for children with particular conditions (e.g. asthma, diabetes and epilepsy).

Pupils – with medical conditions may be best placed to provide information about how their condition affects them. They will be as involved as possible in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other pupils will be encouraged to be sensitive to the needs of those with medical conditions.

Parents/Carers – must provide the school with sufficient and up-to-date information about their child’s medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents/carers are key partners and will be involved in the development and review of their child’s individual healthcare plan, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Local authorities – are commissioners of school nurses for maintained schools and academies. Under Section 10 of the Children Act 2004, they have a duty to promote cooperation between relevant partners such as governing bodies of maintained schools, proprietors of academies, clinical commissioning groups and NHS England, with a view to improving the well-being of children with regard to their physical and mental health, and their education, training and recreation. Local authorities should provide support, advice and guidance, including suitable training for school staff, to ensure that the support specified within individual healthcare plans can be delivered effectively. Local authorities should work with schools to support pupils with medical conditions to attend full time. Where pupils would not receive a suitable education at Hunnyhill Primary School because of their health needs, the local authority will be contacted to fulfil its duty to make other arrangements. Statutory guidance for local authorities sets out that they should be ready to make arrangements under this duty when it is clear that a child will be away from schools for 15 days or more because of health needs (whether consecutive or cumulative across the school year).

Providers of health services - should cooperate with Hunnyhill Primary School in the support of children with a medical condition, including appropriate communication, liaison with school nurses and other healthcare professionals such as specialist and children’s community nurses, as well as participation in locally developed outreach and training. Good relationships with health services will be fostered and developed as they can provide valuable support, information, advice and guidance to school, to support children with medical conditions at school.

Staff Training and Support

Any member of school staff providing support to a pupil with medical needs will have received suitable training. This will have been identified during the development or review of Individual Healthcare Plans. Representative staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

Training will be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual healthcare plans. This will include an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures. The relevant healthcare professional will identify and agree the type and level of training required, and how this can be obtained. Hunnyhill Primary may choose to arrange training themselves and will ensure this remains up-to-date.

Staff must not give prescription medicines or undertake health care procedures without appropriate training (updated to reflect any individual healthcare plans). A first-aid certificate does not constitute appropriate training in supporting children with medical conditions. Healthcare professionals, including the school nurse, will provide confirmation of the proficiency of staff, in a medical procedure, or in providing medication.

The family of a child will often be key in providing relevant information to school staff about how their child’s needs can be met. Parents/carers will be asked for their views and may provide specific advice, but should not be the sole trainer.

The details of continuing professional development provision opportunities will be provided to staff as appropriate.

The Child's Role in Managing Their Own Medical Needs

After discussion with parents/carers, children who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be reflected within Individual Healthcare Plans. Wherever possible, guided by safety considerations, children will be able to access their medicines or relevant devices for self-medication quickly and easily. Children who can take their medicines themselves or manage procedures will have an appropriate level of supervision. If it is not appropriate for a child to self-manage, then relevant staff will help to administer medicines and manage procedures for them.

If a child refuses to take medicine or carry out a necessary procedure, staff will not force them to do so, but follow the procedure agreed in the Individual Healthcare Plan. Parents/carers should be informed so that alternative options can be considered.

Managing Medicines on School Premises – See Administration of Medicines Policy

Record Keeping

The Governing Body is responsible for ensuring that written records are kept of all medicines administered to children. On a day-to-day basis, staff administering medication will keep written records of all medicines given, and sign to confirm the details.

Emergency Procedures – See Administration of Medicines Policy

Day Trips, Residential Visits and Sporting Activities

Pupils with medical conditions will be actively supported to participate in school trips and visits, or in sporting activities, so that their condition does not prevent them from doing so. Teachers will be aware of how a child's medical condition will impact on their participation, but be flexible enough to enable all children to participate according to their own abilities and with any reasonable adjustments. Hunnyhill Primary School will make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible.

Hunnyhill Primary School staff will consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits. The lead member of staff will carry out a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. This may require consultation with parents/carers and pupils and advice from the relevant healthcare professional to ensure that pupils can participate safely. (Please also see Health and Safety Executive (HSE) guidance on school trips.)

Unacceptable Practice

School staff will use their discretion and judge each case on its merits with reference to each child's Individual Healthcare Plan. It is not generally acceptable practice to:

- Prevent children from easily accessing their inhalers.
- Assume that every child with the same condition requires the same treatment.

- Ignore the views of the child or their parents; or ignore medical evidence or opinion, (although this may be challenged).
- Send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans.
- If the child becomes ill, send them to the school office unaccompanied or with someone unsuitable.

Penalise children 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 to attend school to administer medication or provide medical support to their child, including with toileting issues.
- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents/carers to accompany the child.

Liability and Indemnity

Governing bodies must ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk. The school's insurance arrangements cover staff providing support to pupils with medical conditions. These insurance policies are accessible to staff providing such support. Insurance policies will provide liability cover relating to the administration of medication, further communication with insurance companies must be sought depending on the needs of the child.

It is noted that in the event of a claim alleging negligence by a member of staff, civil actions are likely to be brought against the employer.

Complaints

The procedure for making a complaint is set out in the Hunnyhill Primary School Complaints Policy available to parents/carers/pupils on the school website. Should parents/carers or pupils be dissatisfied with the support provided by Hunnyhill Primary School, it is hoped they will discuss their concerns directly with school first. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure. Making a formal complaint to the Department for Education should only occur if it comes within scope of section 496/497 of the Education Act 1996 and after other attempts at resolution have been exhausted. Ultimately/parents/carers (and pupils) will be able to take independent legal advice and bring formal proceedings if they consider they have legitimate grounds to do so.

Associated Resources

Links to other information and associated advice, guidance and resources e.g. templates and to organisations providing advice and support on specific medical conditions will be provided on the relevant web-pages at GOV.UK.

Please read this policy in conjunction with Safeguarding, Child Protection and related policies.

Annex A: Model process for developing individual healthcare plans

A Parent/carer or healthcare professional informs school that the child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed.

B Nurse, Headteacher or senior member of school staff to whom this has been delegated, coordinates meetings to discuss child's medical support needs; and identifies members of school staff who will provide support to pupil.

C Meeting to discuss and agree on need for IHCP to include key school staff, child, parent/carer, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them)

D Develop IHCP in partnership - agree who leads on writing it. Input from healthcare professionals must be provided.

E School staff training needs identified.

F Healthcare professional commissions/delivers training and staff signed-off as competent – review date agreed.

G IHCP implemented and circulated to all relevant staff.

H IHCP reviewed annually or when condition changes. Parent/carer or healthcare professional to initiate.

Cycle continues back to **C**

Template: Individual Healthcare Plan

Name of school/setting Child's name

Year / class / teacher

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

Family Contact Information Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Clinic/Hospital Contact Name Phone

no.

G.P.

Name

Phone no.

Who is responsible for providing support in school

--

Describe medical needs and give details of child'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 pupil'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

SENCO Class Teacher Parent
