



Dream, Believe, Persevere, Achieve

Cape Cornwall School

Supporting Students with Medical Conditions Policy

School Name: Cape Cornwall School

Dissemination: Website and O Drive

Date policy to be approved by Governors: Pending review and approval January 2019

Date policy becomes effective: Immediately

Review date: October 2020

Person responsible for Implementation and Monitoring: Head of School

Links to other relevant policies: Health and Safety Policy

Introduction

This policy has been put in place by Cape Cornwall School to ensure that that all children with medical conditions can access learning safely.

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1. Aims

This policy aims to ensure that:

- Students, staff and parents understand how our school will support students with medical conditions.
- Students with medical conditions are properly supported to allow them to access the same educational opportunities as other students, including school trips and sporting activities.

The school will implement this policy by:

- Making sure sufficient staff are suitably trained.
- Making staff aware of student's condition, where appropriate.
- Making sure there are appropriate arrangements to provide adult support for students with medical conditions.
- Providing cover/supply teachers with appropriate information about the policy and relevant students.
- Developing and monitoring individual healthcare plans (IHPs).

The named person with responsibility for implementing this policy is the Deputy SENDCo.

2. Legislation and statutory responsibilities

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's statutory guidance: [Supporting pupils at school with medical conditions](#).

3. Roles and responsibilities

3.1 The governing board

The governing board has responsibility to make arrangements to support students with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent to support children with medical conditions.

3.2 The Head of School

The Head of School 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 individual healthcare plans (IHPs), including in contingency and emergency situations.
- 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.
- Arrange for the school nursing service to be contacted 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 child's medical needs and that this information is kept up to date.

3.3 Staff

Supporting students with medical conditions during school hours is a shared responsibility by all staff. 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 take into account 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 Parents

Parents will:

- Provide the school with sufficient and up-to-date information about their child's medical needs
- Be involved in the development and review of their child'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.

3.5 Students

Students with medical conditions will often be able 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

The 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.

Healthcare professionals, such as GPs and paediatricians will liaise with the school nurses and notify them of any students identified as having a medical condition.

4. Equal opportunities

Our school is clear about the need to actively support students with medical conditions to have equality of opportunity to participate in school life including school trips, visits and sporting activities and will ensure support is provided to enable them to do so.

The school will consider reasonable adjustments to enable 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 parents and any relevant healthcare professionals will be consulted.

5. Being notified that a child has a medical condition

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

The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for students who are new to our school. See Appendix 1.

6. Individual healthcare plans

The Head of School has overall responsibility for the development of IHPs for students with medical conditions. This responsibility has been delegated to the Deputy SENDCo.

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 pupil'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 parents when an IHP would be appropriate. This will be based on evidence. If there is not a consensus, the Head of School will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best 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 an identified SEN but does not have an EHC plan, the SEN will be referenced in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The Head of School and Deputy SENDCo will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments.
- The 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.

- 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.
- 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 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 parents for medication to be administered by a member of staff, or self-administered by the student 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 has the opportunity to participate, e.g. risk assessments.
- Where confidentiality issues are raised by the parent/student, the designated individuals 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 medicines will only 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 parents' written consent.

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

Students under 16 will not be given medicine containing aspirin unless prescribed by a doctor. Anyone giving a student any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed.

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 will be informed about where their medicines are at all times and be able to access them. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to students.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

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.

A student who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another student. All other controlled drugs are kept in a secure cupboard in the school office and only named staff have access.

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

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 parents and it will be reflected in their IHPs. 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 parents so that an alternative option can be considered, if necessary.

7.3 Agreed practice

School staff will use their discretion and judge each case individually with reference to the student's IHP. Our principles are:

- Support students to access their inhalers and medication and administer their medication when and where necessary.
- Treat each student as an individual.
- Take account of the views of students and parents.
- Follow medical advice and take account of medical evidence or opinion (although this may be challenged).
- Support children with medical conditions to remain in school wherever possible and to take part in normal school activities, including lunch, unless this is specified in their IHPs.
- Provide support if the child is ill so that they are accompanied by someone suitably experienced and qualified to the school office and medical room.
- Authorise unavoidable absence related to their medical condition, e.g. hospital appointments.
- Enable students to drink, eat and take toilet or other breaks when needed in order to manage their medical condition effectively.
- Support students to participate in school life, including school trips.
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- Provide a suitable, private place for students to administer their own medicines.

8. Emergency procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All students' IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a student needs to be taken to hospital, staff will stay with the student until the parent arrives, or accompany the student to hospital by ambulance if the parent is unable to attend the school.

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 Deputy SENDCO during the IHP meeting. Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the 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 training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

10. Record keeping

Written records are kept of all medicine administered to students using the SIMS database. Parents will be informed if their child has been unwell at school and if medication has been given. IHPs are kept in a readily accessible place which all staff are aware of.

11. Liability and indemnity

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

12. Raising Concerns

Parents with a concern about their child's medical condition should discuss these with the Deputy SENDCO in the first instance. The school's complaints procedure is available on the school website for any concern which cannot be resolved informally.

Appendix: Being notified a child has a medical condition

