



Supporting Students with Medical Conditions Policy Beths Grammar School

1. Statement of intent.....	2
2. Key roles and responsibilities.....	2
3. Definitions	4
4. Training of staff	5
5. The role of the student in managing their medical condition	6
6. Individual Healthcare Plans (IHCPs)	6
7. Medicines.....	7
8. Administering medication	8
9. Emergencies	8
10. Day trips, residential visits and sporting activities.....	8
11. Trained staff	9
12. Reasonable adjustments	9
13. Avoiding unacceptable practice	9
14. Insurance	9
15. Complaints	10
16. Key Staff	10
Appendix 1: Individual Healthcare Plan Implementation Procedure	11
Appendix 2: Parental Agreement Form for Beths Grammar School to Administer Medicine.....	12
Appendix 3: Record of Medication Administered form for Beths Grammar School	13

1. Statement of intent

1.1 Beths Grammar School wishes to ensure that students with medical conditions receive appropriate care and support at school. This policy has been developed in line with the DfE's guidance released in December 2015: Supporting students at school with medical conditions (last updated August 2018).

1.2 Ofsted places a clear emphasis on meeting the needs of students with Special Educational Needs and Disabilities (SEND), and this includes children with medical conditions. We aim to work together with all other stakeholders to ensure that children with medical needs receive a full education and therefore enjoy the same opportunities at school as any other child.

1.3 The presence of a countrywide pandemic will require the completion of a school risk assessment and will include supporting students with specific medical conditions as determined by the Government, Local Authority, Public Health England. Such a risk assessment will take into account how such students can be accommodated, if possible, within the school environment under lockdown restrictions. Beths Covid risk assessment can be seen on our website <https://www.beths.bexley.sch.uk/page/?title=Covid%2D19+Risk+Assessment&pid=379>

2. Key roles and responsibilities

2.1 In line with the DfE statutory guidance: Ensuring a good education for children who cannot attend school because of health needs (January 2013):

The local authority (Bexley) and/or the student's local authority (LA) is/are responsible for:

- Arranging suitable full-time education for children of compulsory school age who, because of illness, would otherwise not receive suitable education. Ensuring it is good quality and allows them to take appropriate qualifications, prevents them from slipping behind their peers and allows them to reintegrate successfully as soon as possible.
- Promoting cooperation between relevant partners (e.g. PRU (Pupil Referral Unit)/CAMHS (Child and Adolescent Mental Health Service)) and stakeholders regarding supporting students with medical conditions.
- Providing support (e.g. School Nurse), advice and guidance to schools and their staff.
- Making alternative arrangements for the education of students who need to be out of school for 15 days or more due to a medical condition (the schools send work home and make a referral to the medical PRU with the support of the EWO (Education Welfare Officer)).
- Providing suitable training to school staff in supporting students with medical conditions to ensure that Individual Healthcare Plans (IHCPs), or Medical Alert Handbook where provided, can be delivered effectively.

The governing body is responsible for:

- Monitoring the overall implementation of the Supporting Students with Medical Conditions Policy and procedures of Beths Grammar School.
- Ensuring that the Supporting Students with Medical Conditions Policy, as written, does not discriminate on any grounds including, but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation.
- Handling complaints regarding this policy as outlined in the school's Complaints Policy.
- Ensuring that all students with medical conditions are able to participate fully in all aspects of school life while taking account of the specific medical condition concerned.

- Ensuring that relevant training is delivered to staff members who take on responsibility to support children with medical conditions.
- Guaranteeing that information and teaching support materials regarding supporting students with medical conditions are available to members of staff with responsibilities under this policy.
- Ensuring written records are kept of any and all medicines administered (see Appendices 2 and 3).
- Ensuring the level of insurance in place reflects the level of risk.

The Headteacher is responsible for:

- Ensuring the policy is developed and implemented effectively with partners.
- Making staff aware of this policy and understand their role in the implementation.
- Liaising with healthcare professionals regarding the training required for staff.
- Making those staff who need to know aware of a student's medical condition (via Medical Alert Handbook and SIMS).
- Ensuring IHCPs that are provided by medical provider e.g. hospital/GP/School Nurse are implemented.
- Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHCPs in normal, contingency and emergency situations.
- If necessary, facilitating the recruitment of a member of staff for the purpose of implementing this policy.
- Ensuring the correct level of insurance is in place for staff who support students in line with this policy and contacting the school nursing service in the case of any student who has a medical need.
- Overall responsibility for the development of IHCPs.
- Creating and inviting parents to contribute to a child's IHCP with partners.

The Special Educational Needs and Disability Co-ordinator (SENDCO) is responsible for:

- Ensuring that the school's policy is implemented effectively on a day-to-day basis.
- Advising the Headteacher on the needs of students with medical conditions.
- Advising the Headteacher in regard to staff training requirements.
- Overseeing the development of IHCPs.
- Advising the Headteacher of any child who has a medical condition that may require support at school, but has not yet been brought to the attention of the school nurse.

Staff members are responsible for:

- Taking appropriate steps to support children with medical conditions.
- Where necessary, making reasonable adjustments to include students with medical conditions into lessons (e.g. when students return to school on crutches).
- Administering medication, if they have agreed to undertake that responsibility/received the appropriate training.
- Undertaking training to achieve the necessary competency for supporting students with medical conditions, if they have agreed to undertake that responsibility.
- Familiarising themselves with procedures detailing how to respond when they become aware that a student with a medical condition needs help.
- Keeping a record of medicine administered to children is kept on the daily First Aid Log, and on the reverse of their Parental Agreement to Administer Medicine Form.

- *This has not happened for some years now. They used to come in and do epipen training for all staff (not just first aiders), but no longer do that.*

School nurses are responsible for:

- Notifying the school when a student has been identified with requiring support in school due to a medical condition.
- Supporting staff on implementing a child's IHCP and provide advice and liaison, for example on training.
- Liaising locally with lead clinicians on appropriate support.
- Producing the template for the Medical Alert Handbook and ratifying it after the school has added the relevant students.

Other healthcare professionals are responsible for:

- Notifying the school nurse when a child has been identified as having a medical condition that will require support at school.
- Providing advice on developing IHCPs.
- Providing support with particular conditions (e.g. asthma, diabetes, epilepsy).

Parents and carers are responsible for:

- Keeping the school informed about any changes to their child/children's health.
- Completing a parental agreement form for school to administer medicine before bringing medication into school (see Appendix 2). Updated one attached
- Providing the school with the medication their child requires and keeping it up-to-date.
- Collecting any leftover medicine at the end of the course or year.
- Discussing medications with the child/children prior to requesting that a staff member oversees the self-administration of the medication.
- Where appropriate, to have medication prescribed to be administered outside of the school day, resulting in minimal disruption to schooling.
- Where necessary, developing an IHCP for the child in collaboration with the Special Educational Needs and Disabilities Coordinator (SENDCO), First Aider and healthcare professionals.
- Carrying out any action they have agreed to as part of the implementation of their child's IHCP e.g. providing medication and equipment and ensuring they or another nominated adult are contactable at all times.

Students are responsible for:

- Providing information about how their condition affects them.
- Being fully involved in discussions about their needs and contributing to the development of, and comply with, their IHCP.

Clinical Commissioning Groups (CCGs) are responsible for:

- Commissioning other healthcare professionals such as specialist nurses.
- Being responsive to LAs and schools seeking to strengthen links between health services and schools.
- Ensuring that their commissioning arrangements are adequate to provide the ongoing support essential to the safety of children whilst in school.

Health services are responsible for:

- Co-operating with schools that are supporting children through effective communication, liaison and participation (e.g. outreach and training as well as support, information, advice and guidance).

3. Definitions

3.1 The following definitions apply for the purposes of this policy:

- 'Medication' is defined as any prescribed or over the counter (OTC) medicine.
- 'Prescription medication' is defined as any drug or device prescribed by a medical practitioner.
- A 'staff member' is defined as any member of staff employed at Beths Grammar School including teachers.
- 'IHCP' also refers to Medical Alert Handbook.

4. Training of staff

4.1 Teachers and support staff will receive training on the Supporting Students with Medical Conditions Policy as part of their new starter induction and/or annual in-house training. They will receive regular and ongoing training as required. Information may be given out via the School Bulletin.

4.2 Training needs will be assessed in response to the needs of the students at the school e.g. through review of students' IHCPs. The SENDCO will advise the Headteacher of training that is required.

4.3 Teachers and support staff who undertake responsibilities under this policy will receive external training as appropriate. The clinical lead for this training may be the school nurse and/or other provider.

4.4 No staff member may administer prescription or OTC medicines or undertake any healthcare procedures without undergoing training specific to the responsibility, including administering medication.

4.5 No staff member may administer drugs by injection unless they have received training and accept this responsibility.

4.6 The Office Team will keep a record of training undertaken and a list of staff qualified to undertake responsibilities under this policy.

4.7 All staff will be made aware of a child's individual medical condition by initially their name and diagnosis being included in the school's Medical Alert Handbook which is available in the all staff network area. Staff are reminded to refer to this booklet at the start of each academic year and are informed of any changes made during the year. Additional, more detailed, information is circulated to relevant staff if required and necessary.

4.8 In the case of staff absence, teachers covering a lesson should refer to the Medical Alert Handbook. Supply teachers will be given a copy of the Medical Alert Handbook.

4.9 To ensure that someone is available to meet the needs of a student with medical needs in the case of staff absence or turnover, more than one member of staff will be trained for the support role(s) required amongst the student population.

4.10 Risk assessments will be carried out for school visits and other school activities outside of the normal timetable.

5. The role of the student in managing their medical condition

5.1 After discussions with parents/carers, children who are competent are encouraged to be responsible for their own needs. This will be reflected within their IHCP.

5.2 If students are unable to self-manage, staff are available to help administer medicines and manage procedures. If a child refuses to take medicines or carry out a procedure, staff will not force them, but continue to follow the IHCP and parents/carers will be informed so that alternatives can be considered.

5.3 Students who suffer with anaphylaxis, asthma or diabetes will be encouraged to carry their own medicines and devices. Additional medicines will also be held in the Medical Room.

5.4 For other students medication will be kept in the Medical Room. It is the student's responsibility to attend the Medical Room for dispensation of their medication.

6. Individual Healthcare Plans (IHCPs)

6.1 Where necessary, an IHCP will be developed in collaboration with the student, parents/carers, SENDCO and medical professionals. The Headteacher is responsible for the development of IHCPs.

6.2 IHCPs will be easily accessible while preserving confidentiality. They will be reviewed at least annually or when a student's medical circumstances change or as necessary, whichever is sooner. Where a student has an Education, Health and Care Plan (EHCP) or special needs Statement, the IHCP will be linked to it or become part of it.

6.3 IHCPs will always be developed with the best educational interests of the child in mind. They will aim to provide clarity about what needs to be done, by whom, and when, especially if conditions fluctuate or where there is a high risk that emergency intervention will be required. However not all children with medical conditions will require one¹ but an IHCP is likely to be helpful where a condition is long-term and complex.

6.4 The level of detail within the plan will depend on the complexity of the child's condition and the degree of support needed. Its aim should be to capture the steps the school will take to help a child manage their condition and overcome any barriers to getting the most from their education. It will also indicate how they might work with statutory services.

6.5 All stakeholders involved should agree, based on the evidence, where an IHCP would be inappropriate or disproportionate. If consensus cannot be reached, the Headteacher is considered best placed to take a final view.

¹ See *Supporting pupils at school with medical conditions* (DfE, December 2015, p.10).

6.6 Where a student is returning from a period of hospital education, alternative provision or home tuition, we will work with the student's LA, education provider and/or relevant medical provider to ensure that the IHCP identifies the support the student needs to reintegrate.

6.7 It is the LA's responsibility to develop transport healthcare plans for students with life-threatening conditions when they need home-to-school transport. The school will work with the LA to make them aware of a student's IHCP and what it contains, especially in respect of emergency situations.

7. Medicines

7.1 Ideally medicines should only be administered within school when to do otherwise would be detrimental to the child's health or affect attendance.

7.2 Where possible, it is preferable for medicines to be prescribed in frequencies that allow the student to take them outside of school hours.

7.3 No student under the age of 16 will be given any prescription or non-prescription medicines without written parental consent except in exceptional circumstances e.g. where the student does not wish to disclose this to their parent/carer. Where a student is prescribed medication without their parents'/carers' knowledge, every effort will be made to encourage the student to involve their parents'/carers while respecting their right to confidentiality.

7.4 Students may be given medicine for pain relief e.g. paracetamol but only if parents/carers have provided written consent, and never given to students who are taking other medication. Such medicine should never be administered without first checking maximum doses and when the previous dose was taken. When medication has been given, parents/carers should be informed.

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

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

7.7 A maximum of four weeks' supply of the medication may be provided to the school at one time (unless ongoing prescribed medication).

7.8 Medications will be stored safely in the Medical Room. Children will be told where their medicines are at all times and have access to them immediately. They will be told who holds the key to the storage facility. Some devices and medicines e.g. asthma inhalers and epipens are not locked away.

7.9 Controlled drugs may only be taken on school premises by the individual to whom they have been prescribed. Passing such drugs to others is an offence which will be dealt with under the school's Behaviour, Rewards and Support Policy. Controlled drugs will be kept in a locked cupboard located in the Medical Room; only the Office staff have access to the key. A Controlled Drugs book for documenting the medication, and its administration, is also located within the locked cupboard.

7.10 Any medications left over at the end of the course will be returned to the student's parent/carer or disposed of by the school.

7.11 Beths Grammar School cannot be held responsible for side effects that occur when medication is taken correctly.

8. Administering medication

8.1 Teachers and support staff who have agreed to administer medication to children with medical conditions will receive on-going training on the administering of medication as required. Staff members appointed as first-aiders are trained in the use of CPR and may wish to promote these techniques more widely in school.

8.2 As stated above, medications will only be administered at school if it would be detrimental to the student not to do so.

8.3 Prior to staff members administering any medication, the parents/carers of the student must complete and sign a parental agreement form. (See appendix 2).

8.4 Staff members may refuse to administer medication. If a class teacher refuses to administer medication, the Headteacher will delegate the responsibility to another staff member.

8.5 Where appropriate, and after discussion, students will be encouraged to take their own medication (under the supervision of a member of staff). This should be reflected within their IHCP. Wherever possible, children will be allowed to carry their own medicines and relevant devices or have access to them for self-medication quickly and easily.

8.6 Written records will be kept of any medication administered to children (see Appendix 3). These records aim to offer protection to staff and children and provide evidence that agreed procedures have been followed. The school will inform parents/carers if their child has been unwell at school and required intervention.

9. Emergencies

9.1 Medical emergencies will be dealt with under the school's emergency procedures. Sudden cardiac arrest is when the heart stops beating and can happen to people of any age and without warning. If this does happen, quick action (in the form of early CPR and defibrillation) can help save lives. A defibrillator is a machine used to give an electric shock to restart a patient's heart when they are in cardiac arrest. The school has two on-site and sign indicated defibrillators to be used by staff (or visitors) in such emergencies. One is located in the Main School Office and the second in the Learning Resource Centre.

9.2 Where an IHCP is in place, it should detail what constitutes an emergency and what to do as a result, including ensuring all relevant staff are aware of emergency symptoms and procedures. When a student has a medical condition and is named in the Medical Alert Handbook, the procedure given in the Medical Alert Handbook should be followed.

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

9.4 If a student needs to be taken to hospital, a member of staff will accompany and may stay with the student until their parent(s)/carer(s) arrive(s).

9.5 It is the parents' responsibility to accompany their child to hospital. However, any student under the age of 16 would be accompanied by a member of the school staff if a parent was not

immediately available. Students over the age of 16 will be accompanied at the schools or paramedics discretion.

10. Day trips, residential visits and sporting activities

10.1 We will ensure that students with medical needs can participate in school trips and visits, or in sporting activities, and are not prevented from doing so. Teachers will be informed how any need will impact on a student's participation. We will aim to plan enough flexibility for students to participate according to their own abilities and with reasonable adjustments, unless evidence from a clinician such as a GP states that this is not possible.

10.2 We will carry out a risk assessment so that planning arrangements take account of any steps needed to ensure that students with medical needs are included. This will necessitate consultation with parents/carers and students, and advice from relevant healthcare professionals to ensure that students can participate safely.²

11. Trained staff

11.1 Beths Grammar School has a full complement of named, registered and trained first aiders and administrators of medicines.

12. Reasonable adjustments

12.1 Beths Grammar School will meet its duties under the Equality Act 2010 and the Special Education Needs and Disability Code of Practice 2015. This will include making reasonable adjustments for students with medical conditions, including the provision of auxiliary aids.

13. Avoiding unacceptable practice

13.1 Beths Grammar School understands that the following behaviour is unacceptable:

- Preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- Assuming that students with the same condition require the same treatment.
- Ignoring the views of the student and/or their parents/carers.
- Ignoring medical evidence or opinion (although this may be challenged).
- Sending students home frequently for reasons associated with their medical condition or preventing them from staying for normal school activities unless this is specified in their IHCP.
- Sending the student to the Medical Room or school office without staff permission, during lesson time, alone or with someone unsuitable if they become ill.
- Penalising students with medical conditions for their sickness and/or attendance record where the absences relate to their medical condition e.g. hospital appointments.
- Making parents/carers feel obliged or forcing parents/carers to attend school to administer medication or provide medical support, including toilet issues.
- Creating barriers to children participating in school life, including school trips, unless it is considered to be detrimental to their health e.g. out-of-date medication.

² <http://www.hse.gov.uk/services/education/school-trips.pdf>

- Refusing to allow students to eat, drink, use the toilet, or take other breaks when they need to in order to manage their condition effectively.

14. Insurance

14.1 Staff who undertake responsibilities within this policy are covered by the school's insurance.

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

15. Complaints

15.1 We always seek to resolve issues swiftly and sensitively. Anyone who has concerns should, in the first instance, contact the relevant class teacher or Head of Year in the first instance.

15.2 If the complaint is not resolved the SENDCO should be contacted.

15.3 If the complaint is still not resolved then the matter should be taken up with the Headteacher.

15.4 Finally, if the complaint is still not resolved, the School Complaints Procedure should be followed which can be found on the school website:

https://www.beths.bexley.sch.uk/beths/images/pdf/policies/Complaints_Procedure_July_2014_new.pdf

16. Key Staff

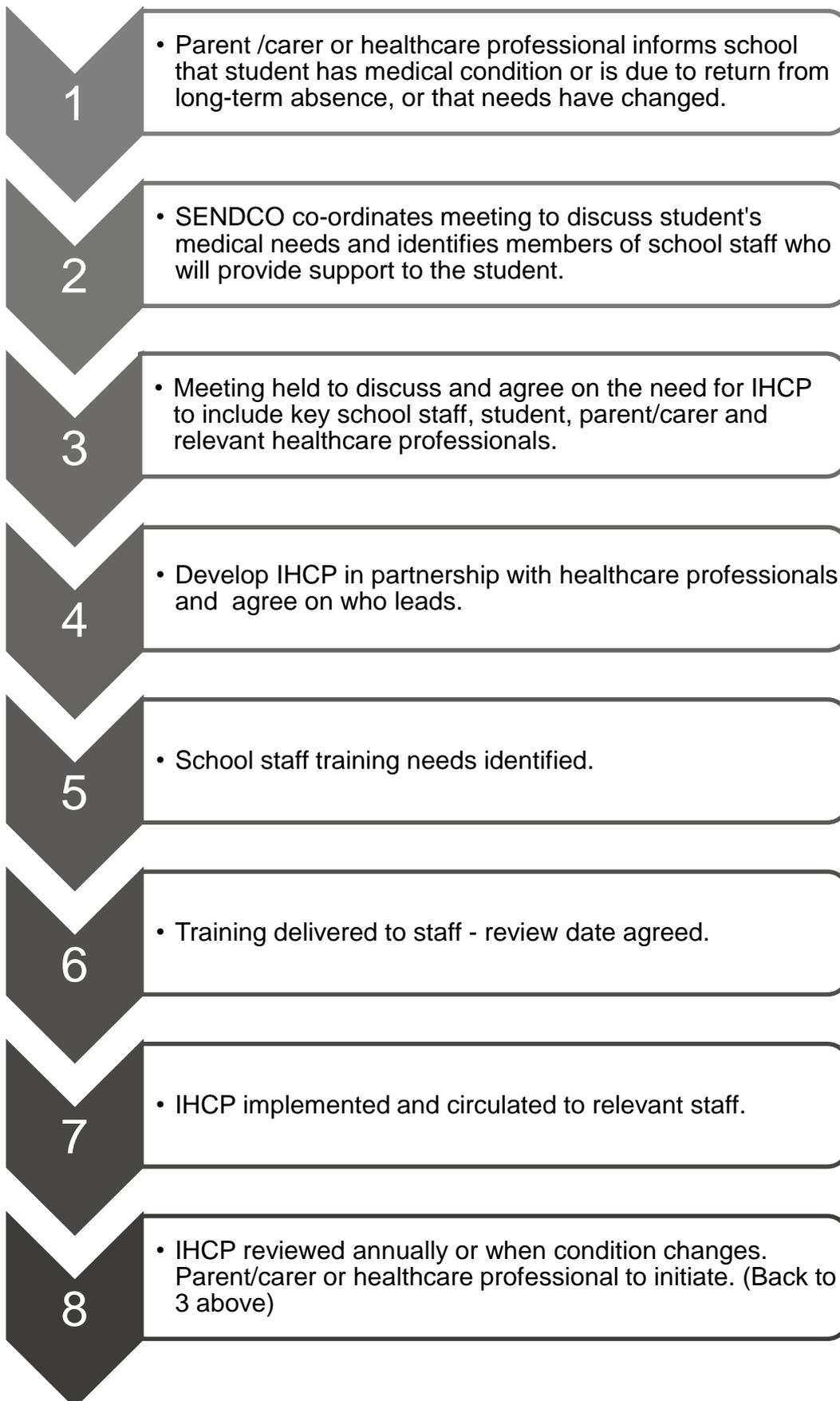
Named persons for administering medicines are:

- Mrs Shirley Richardson
- Miss Emma Cooper

The SENDCO is: Mr Stuart Ward

*Reviewed Summer 2021
Next scheduled review date Summer 2022*

Appendix 1 - Individual Healthcare Plan implementation procedure



**Appendix 2:
Parental Agreement Form for Beths Grammar School to Administer Prescribed Medicine**

For the school to assist with administering medicines please ensure:

- this form is completed in full and signed
- medicine is delivered to school personally by parent/carer with parental responsibility
- medicine is in the original container, as dispensed by the pharmacy

Student details

Name	
Date of Birth	/ /
Form Group	
Medical condition or illness	

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

Medicine – to be delivered by parent/carer

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	/ /
Dosage and method to be given	
Timing/Time of day to be given	
Special precautions/other instructions in event of emergency	
Are there any side effects that the school needs to know about?	
Student to Self-administer?	Yes/No
GP surgery name and telephone number	
Review Date (to be agreed between school/parent)	

Contact Details/Consent

Name (parent/carer)	
Daytime telephone no.	
Relationship to student	

The above information is, to the best of my knowledge, accurate at the time of signing and I give consent to school staff administering medicine in accordance with school policy. I will inform the school immediately, in writing, should there be a change in dosage or frequency or if the medicine should be stopped.

Parental Signature.....

Date.....

