

Woodland Academy Trust

Supporting Pupils with Medical Conditions Policy

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Woodland Academy Trust is committed to inclusion, diversity and promoting equal opportunity for all. All schools within the Trust share this commitment, providing an inclusive environment.

This objective applies to all policies and procedures and the Trust will at all times adhere to the requirements of the Equalities Act 2010 and any other associated guidance.

Statement of intent

The Governing Board of Woodland Academy Trust has a duty to ensure arrangements are in place to support pupils with medical conditions. The aim of this policy is to ensure that all pupils with medical conditions, in terms of both physical and mental health, receive appropriate support to allow them to play a full and active role in school life, remain healthy, have full access to education (including school trips and PE), and achieve their academic potential.

The school believes it is important that parents of pupils with medical conditions feel confident that the school provides effective support for their children's medical conditions, and that pupils' feel safe in the school environment.

Some pupils with medical conditions may be considered to be 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
- DfE (2015) 'Special educational needs and disability code of practice: 0-25 years'
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2000) 'Guidance on first aid for schools'
- Ofsted (2019) 'Education inspection framework'

- Department of Health (2017) 'Guidance on the use of adrenaline auto-injectors in schools'

1. Our Aims:

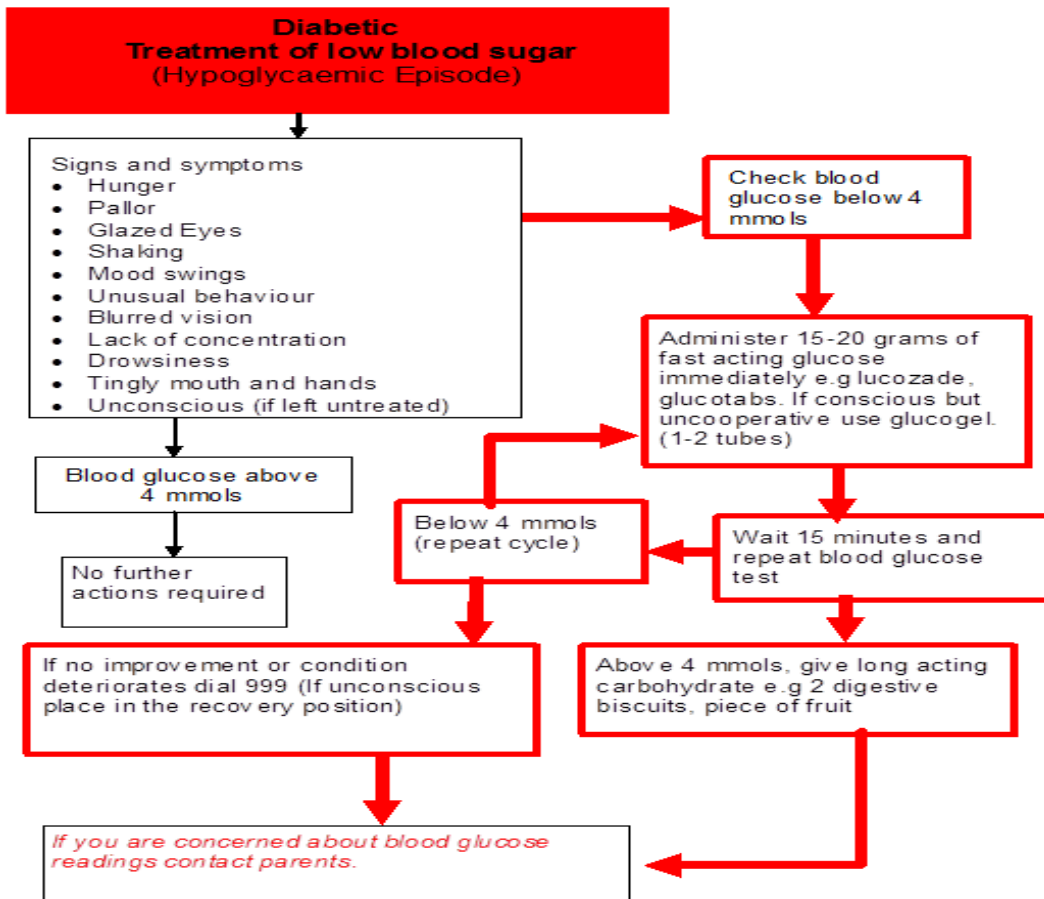
- Ensure each child can access and enjoy the same opportunities at school as any other child.
- Give parents/carers and pupils confidence in the school's ability to provide effective support for medical conditions in school.

2. Medical Conditions

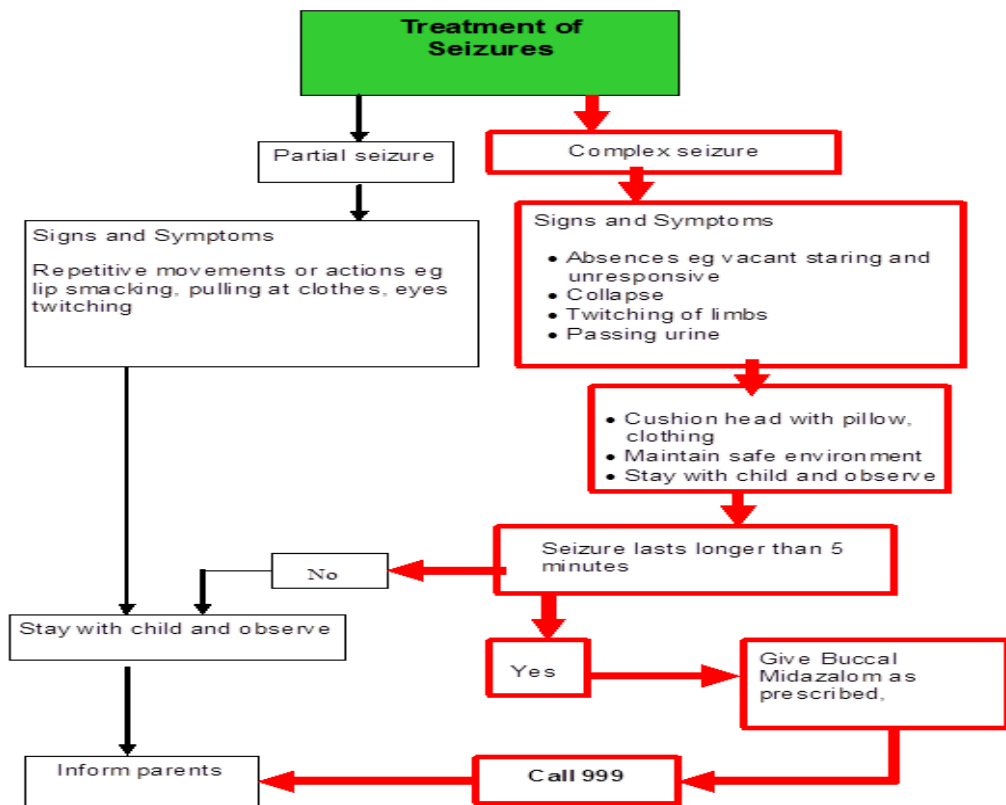
With regard to the Children and Families Act 2014 and Statutory guidance for governing bodies of maintained schools and proprietors of academies in England (September, 2014), our four schools ensure that arrangements, as appropriate, are made for children diagnosed with a range of physical and mental health, medical conditions including: Asthma, Diabetes, Cancer and ADHD.

Each school completes a Medi-Alert Handbook identifying children who have asthma, diabetes, epilepsy, sickle-cell, and allergies (leading to anaphylaxis). The school nursing team complete an annual review of the handbook as well as ensuring all relevant staff (teaching and non-teaching) have up to date, bespoke training with regards to meeting these children's needs.

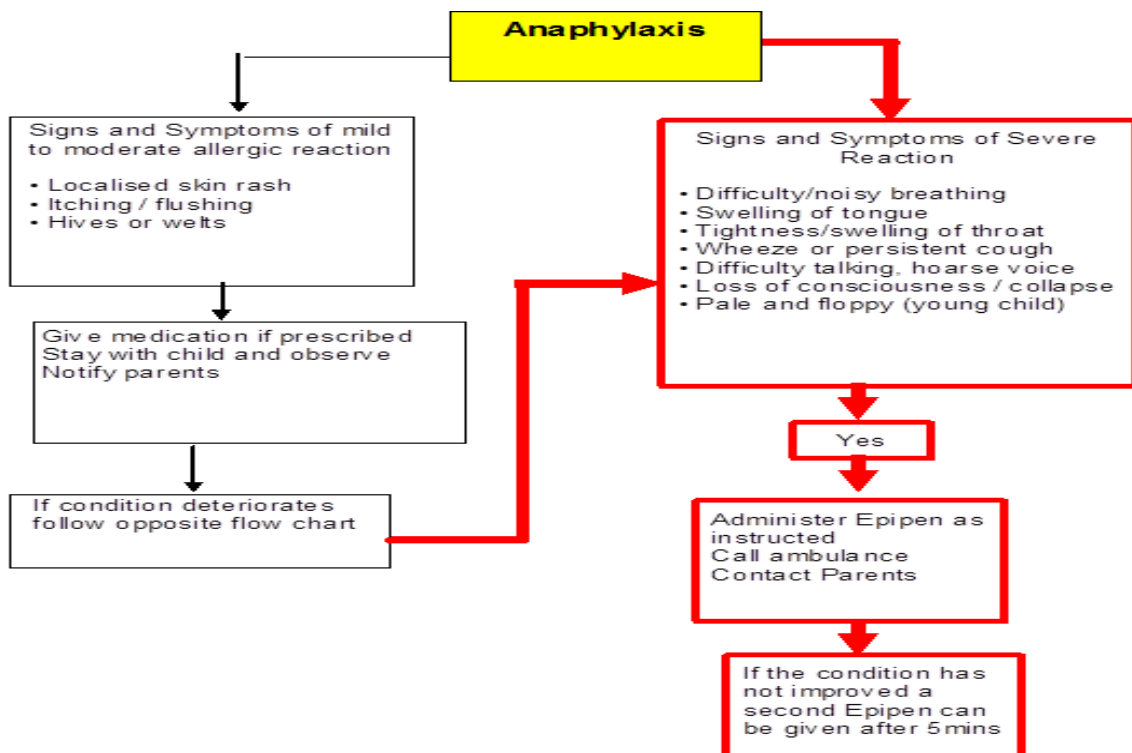
The Medi-Alert Handbook sets out procedures for named medical conditions: asthma, sickle cell disease, epilepsy, anaphylaxis and diabetes.



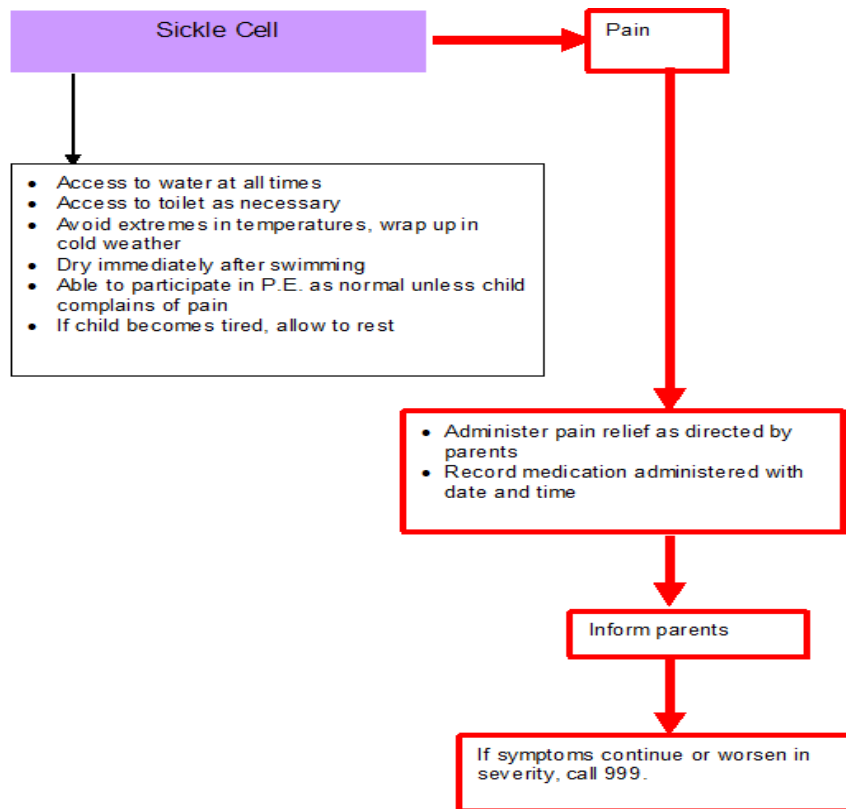
Always ensure a First Aider is present



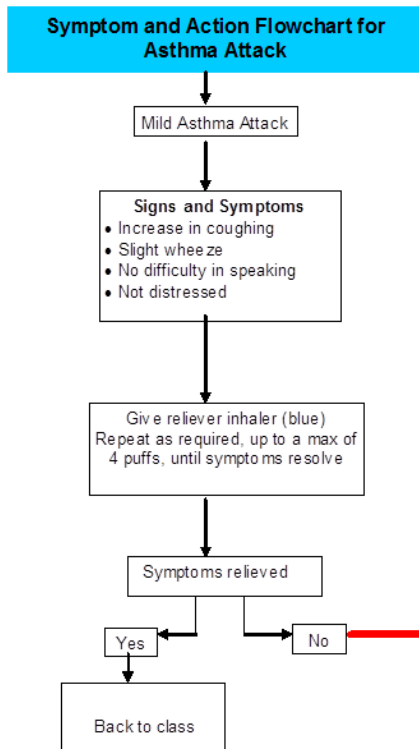
Always ensure a First Aider is present



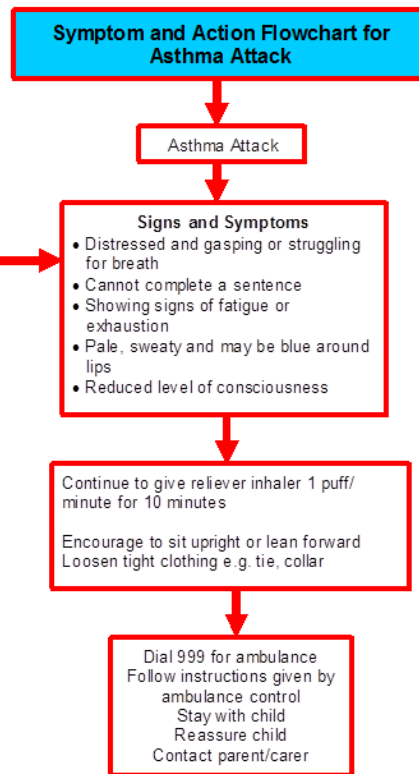
Always ensure a First Aider is present



Always ensure a First Aider is present



Always ensure a First Aider is present



Always ensure a First Aider is present

3. Procedures for medical conditions

In cases when children are diagnosed with a medical condition that is not named in the Medi-Alert Handbook, the school will arrange for an Individual Healthcare Plan to be completed which sets out the following:

- Medical condition (triggers, signs, symptoms and treatments)
- Pupil's resulting needs:
 - Medication, dose, side effects, storage of medication
 - Treatments, time, facilities, equipment testing, access to food and drink, dietary requirements,
- Environmental Issues
 - Specific support for educational, social and emotional needs (management of absences, extra time in exams, rest periods, additional support and access to counselling/therapeutic support, external or internal)
 - Level of support needed (emergency arrangements)
 - Adult deployment (who will support, training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional, cover arrangements for when adults are unavailable)
 - Staff awareness
 - Arrangements for written permission from parents/carers and the Head of School for medication to be administered by a member of staff, or self-administered by the child during school hours
 - Separate arrangements or procedures required for school trips or other school activities (risk assessments)
 - Confidentiality issues
 - Emergency arrangements (who to contact, contingency arrangements)
 - Monitoring arrangements for the IHCP

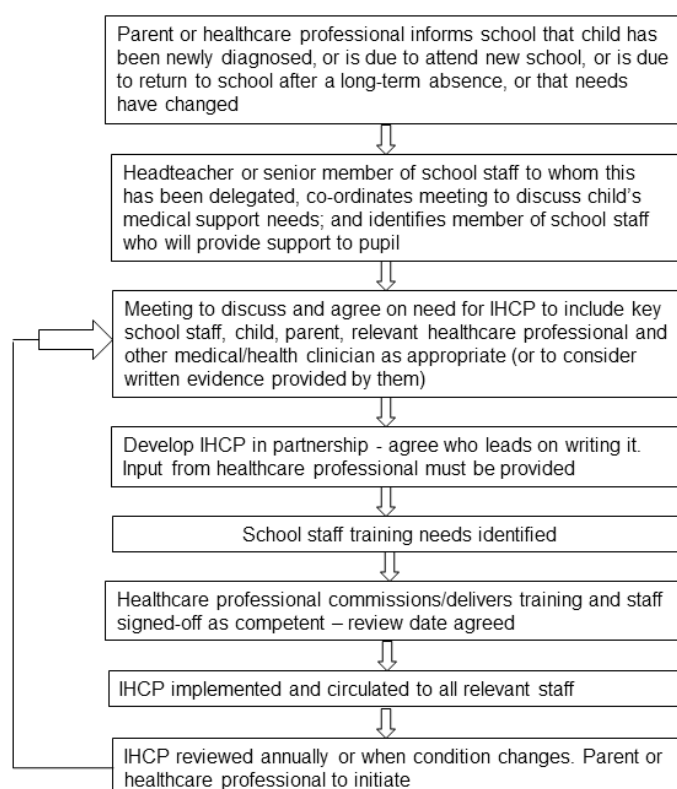
Supply teachers

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

In addition, where appropriate, if a child with a medical condition which is deemed as high risk, a further risk assessment and revision to the policy will be completed.

4. **Model process for developing individual healthcare plans:**



5. **Diabetes:**

In addition to the Medi-Alert Handbook, the Woodland Academy Trust also follows guidance issued by the Independent Diabetes Trust (IDT).

The Woodland Academy Trust uses the IDT Parents Passport for Schools which has been designed to provide a means by which parents/carers can formally let our schools know how to manage their child's diabetes as well as ensuring that our schools comply with SEN regulations.

IDT Parents Passport - These can be accessed via –
<http://iddt.org/news/diabetes-parents-passport-for-schools>

Alternatively, each school keeps a copy of the parent passport in their Medical Room for use. These should only be completed in consultation with each school's Inclusion Leader.

6. **First Aid Arrangements:**

Please see each school's First Aid Policy.

Emergency procedures:

Medical emergencies will be dealt with under the school's emergency procedures. Where an IHP is in place, it should detail:

- What constitutes an emergency
- What to do in an emergency

Pupils will be informed in general terms of what to do in an emergency, e.g. telling a teacher. If a pupil needs to be taken to hospital, a member of staff will remain with the pupil until their parents arrive. When transporting pupils with medical conditions to medical facilities, staff members will be informed of the correct postcode and address for use in navigation systems.

7. Managing medicines

Prescription and over the counter medicines can be administered at school as long as parental consent is obtained and:

- When it would be detrimental to the pupil's health or school attendance not to do so **and**
- Where we have Parents/Carers written consent (use of a localised agreement – Appendix 1)

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

The school will only accept medicines that are:

- In-date
- Labelled with the child's name and class
- 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. Pupils will 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 pupils and not locked away.

Medicines will be returned to Parents/Carers to arrange for safe disposal when no longer required/are out of date

Records are kept every time medication is administered (Appendix 2).

A member of staff will supervise the child taking the medication and with non-prescribed/non pre-planned medication (e.g. paracetamol) will inform the Parents on the day that it was administered.

8. 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 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.

9. Unacceptable practice

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

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every pupil with the same condition requires the same treatment
- Ignore the views of the pupil or their Parent/Carers
- Ignore medical evidence or opinion (although this may be challenged)
- Send children 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 IHPs
- Send pupils who become ill to the school office or medical room unaccompanied or with someone unsuitable
- Penalise pupils 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/Carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupil, including with toileting issues. No Parent/Carer should have to give up working because the school is failing to support their child's medical needs
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring Parents/ Carers to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

10. Liability and indemnity

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

The details of the school's insurance policy are:

Zurich Insurance – Employers' and Public Liability Insurance. This insurance is in place instead of the DfE RPA arrangements.

11. Complaints

Parents with a complaint about the school's support of their child's medical condition should discuss these directly with the Head and/or Inclusion Leader in the first instance. If they cannot resolve the matter, they will direct Parents/Carers to the Trust complaints procedure.

The Inclusion Leaders at each school are responsible for:

- Ensuring this policy is updated and maintained
- Ensuring that adequate numbers of first aiders are trained in their respective schools

- Ensuring that existing first aiders receive further CPD when their training expires

12. Monitoring and review

This policy is reviewed on an annual basis by the governing board, school nurse and Headteacher. Any changes to this policy will be communicated to all staff, parents and relevant stakeholders.

The next scheduled review date for this policy is Spring 2022.

Guidance may also be found here:

Supporting Pupils with Medical Conditions at School - August 2017:

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

Statutory framework for the early years foundation stage 3 April 2017:

[https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/596629/EYF S STATUTORY FRAMEWORK 2017.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/596629/EYF_S_STATUTORY_FRAMEWORK_2017.pdf)

SEND Code of Practice: 0 to 25 Years-GOV.U



**Woodland
Academy Trust**

Revealing the champion within

Record of Medicine Administered to an Individual Pupil

Name of pupil:	
Group/class/form:	
Date medicine provided by parents:	
Quantity received:	
Name and strength of medicine:	
Expiry date:	
Quantity returned:	
Dose and frequency of medicine:	

Date:			
Time given:			
Dose given:			
Name of member of staff:			
Staff initials:			

Date:

Time given:

Dose given:

Name of member of staff:

Staff initials:

Date:

Time given:

Dose given:

Name of member of staff:

Staff initials:

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Date:

Time given:

Dose given:

Name of member of staff:

Staff initials:

Date:

Time given:

Dose given:

Name of member of staff:

Staff initials:

Parental Agreement for the School to Administer Medicine



The school will not be able to give your child medicine unless you complete and sign this form.

Administration of medication form

Date for review to be initiated by:

Name of child:

Date of birth:

Group/class/form:

Medical condition or illness:

Medicine

**Name and/or type of medicine
(as described on the container):**

Expiry date:

Dosage and method:

Timing:

**Special precautions and/or other
instructions:**

**Any side effects that the school needs
to know about:**

Self-administration – Yes/No:

Procedures to take in an emergency:

NB: Medicines must be in the original container as dispensed by the pharmacy – the only exception to this is insulin, which may be available in an insulin pen or pump rather than its original container.

Contact details

Name:

Daytime telephone number:

Relationship to child:

Address:

**I will personally deliver the medicine
to:**

Name and position of staff member

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent for school staff to administer medicine in accordance with the relevant policies. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication, or if the medicine is stopped.

Signature

Date

Individual healthcare plan

An IHP should be compiled to ensure school remains an inclusive and safe environment for pupils.

By using the IHP, WAT can detail the type of medical condition(s) a pupil has, any symptoms or warning signs, and any medication that may be required.

As well as compiling information regarding the pupil's medical condition(s), sections have been allocated to detail any extra care the pupil may require – this information can help to inform any reasonable adjustments a school may need to make and ensure the pupil's safety whilst undertaking physical activities and attending school visits and trips.

The school should include the pupil's parents and a relevant healthcare professional, e.g. the pupil's GP, in the creation and reviewal of the IHP – where appropriate, the pupil should also be included in the process of creating the IHP – the document should be reviewed on an annual basis or when the pupil's medical circumstances change, whichever comes first.

Due to the nature of the IHP, the document should be easily accessible to those who need to refer to it, but confidentiality must be preserved.

Individual healthcare plan

Pupil information

Pupil's name:	
Group/class/form:	
Date of birth:	
Pupil's address:	
Medical diagnosis or condition(s):	
Date:	
Review date:	

Family contact information

Name:	
Phone number (work):	
Home:	
Mobile:	
Relationship to pupil:	
Name:	
Phone number (work):	
Home:	
Mobile:	

Relationship to pupil:	
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Name:	
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Phone number (work):	
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Home:	
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Mobile:	
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Relationship to pupil:	
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Clinic/hospital contact

Name:	
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Phone number (including extension):	
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Pupil's GP

Name:	
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Phone number (including extension):	
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Pupil's medical needs

Description of the pupil's symptoms, triggers, signs, facilities, equipment or devices, environmental issues, etc.:	
--	--

Description of the pupil's medication, including dose, method of administration, when it should be taken, all side effects relating to the medication, contraindications, administered by/self-administered with/without supervision:	
--	--

If the pupil's medication is stored at the school, where is it located, who has access, and how is it stored?

Who is responsible for administering medication to the pupil, has this been authorized by parents/the Headteacher?

If the pupil is self-managing their medication, this should be clearly stated

Daily care requirements

Does the pupil require any change to their routine, e.g. amended eating times?

Does the pupil require any extra care when eating, what care is required?

Include details of how the pupil's routine will be monitored to help manage their condition:

Physical activity

Are there any physical restrictions caused by the pupil's medical condition?

Arrangements for school visits and trips

Include details of any extra care required before, during or after physical activity:

Does the pupil need additional care when attending a trip or visit away from the school, who will be responsible for this care?

Include details of what care the pupil needs, e.g. when and where the care will need to take place, and what medication or equipment will be required?

Staff training

Who will be responsible for administering extra care to the pupil, including cover?

Will these people require extra training, if so what training will be required?

Has the training been completed and signed off by the Headteacher and a healthcare professional?

School environment

Does the school environment have any affect on the child's medical condition?

How does the school environment affect the pupil's medical condition?

What reasonable adjustments can be put in place to mitigate the risk of these affects?

Other information

Who is the responsible person in an emergency?

What constitutes an emergency, e.g. symptoms?

What procedure should be followed in an emergency?

Specific support for the pupil's educational, social and emotional needs, e.g. how will catching up with lessons, absences and rest periods be handled?

Form copied to, the information in this IHP will remain private and confidential – consider when sharing this information how relevant it is to the recipient: