



WANSTEAD HIGH SCHOOL

Supporting Pupils with Medical Conditions Policy

Person Responsible	Ms D Cini
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Related Policies:

- Attendance & Punctuality Policy
- Accessibility Plan
- Equal Opportunities Policy
- Mental Health Policy
- First Aid Policy

1. Aims

This policy aims to ensure that:

- Pupils, staff and parents understand how the school will support pupils with medical conditions.
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities.

The governing board will implement this policy by:

- Ensuring sufficient staff are suitably trained.
- Ensuring staff are made aware of pupil's conditions, where appropriate.
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions.
- Providing supply teachers with appropriate information about the policy and relevant pupils.
- Developing and monitoring Individual Healthcare Plans (Individual Healthcare Plans).

The named person with responsibility for implementing this policy is:

Ms Donna Cini, Director of Inclusion / Designated Safeguarding Lead.

2. Introduction

Parents of children with medical conditions are often concerned that their child's health will deteriorate when they attend school. This is because pupils with long-term and complex medical conditions may require ongoing support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. It is therefore important that parents feel confident that schools will provide effective support for their child's medical condition and that pupils feel safe. In making decisions about the support they provide, schools should establish relationships with relevant local health services to help them. It is crucial that schools receive and fully consider advice from healthcare professionals and listen to and value the views of parents and pupils.

In addition to the educational impacts, there are social and emotional implications associated with medical conditions. Children may be self-conscious about their condition and some may be bullied or develop emotional disorders such as anxiety or depression around their medical condition. In particular, long-term absences due to health problems affect children's educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health. Reintegration back into school should be properly supported so that children with medical conditions fully engage with learning and do not fall behind when they are unable to attend. Short-term and frequent absences, including those for appointments connected with a pupil's medical condition (which can often be lengthy), also need to be effectively managed and appropriate support put in place to limit the impact on the child's educational attainment and emotional and general wellbeing.

Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case governing bodies must comply with their duties under that Act. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For children with SEN, this guidance should be read in conjunction with the Special educational needs and disability (SEND) code of practice⁴ The Special educational needs and disability code of practice explains the duties of local authorities, health bodies, schools and colleges to provide for those with special educational needs under part 3 of the Children and Families Act 2014. For pupils who have medical conditions that require EHC plans, compliance with the SEND code of practice will ensure compliance with this guidance with respect to those children.

3. 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 pupils 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](#).

4. Roles and responsibilities

The Governing Body

The Governing Body has ultimate responsibility to make arrangements to support pupils with medical conditions. They will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

The Director of Inclusion / Designated Safeguarding Lead will:

- Ensure all staff are aware of this policy and understand their role in its implementation.
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (Individual Healthcare Plans), including in contingency and emergency situations.
- Take overall responsibility for the development of Individual Healthcare Plans.
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way.
- Contact the school nursing service in the case of any pupil 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.
- Ensure a member of the Pastoral Team participates in any professional meetings in relation to a pupil's health needs to which they have been invited.

Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.

The school has a **Lead First Aider Miss Shelly Smith** who is responsible for the daily running of the medical area which includes providing first aid to children as required and monitoring the administration of any medications.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

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

Parents will:

- Provide the school with sufficient and up-to-date information about their child's medical needs, this includes incidents where pupils have fractured or broken a limb and/or may have reduced mobility which requires a risk assessment.
- Be involved in the development and review of their child's Individual Healthcare Plan and may be involved in its drafting.
- Carry out any action they have agreed to as part of the implementation of the Individual Healthcare Plan eg. provide medicines and equipment.

Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their Individual Healthcare Plans. They are also expected to comply with their Individual Healthcare Plans.

School nurses and other healthcare professionals

Our school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible. Healthcare professionals, such as GPs and pediatricians, will liaise with the schools nursing service and notify them of any pupils identified as having a medical condition.

5. Equal Opportunities

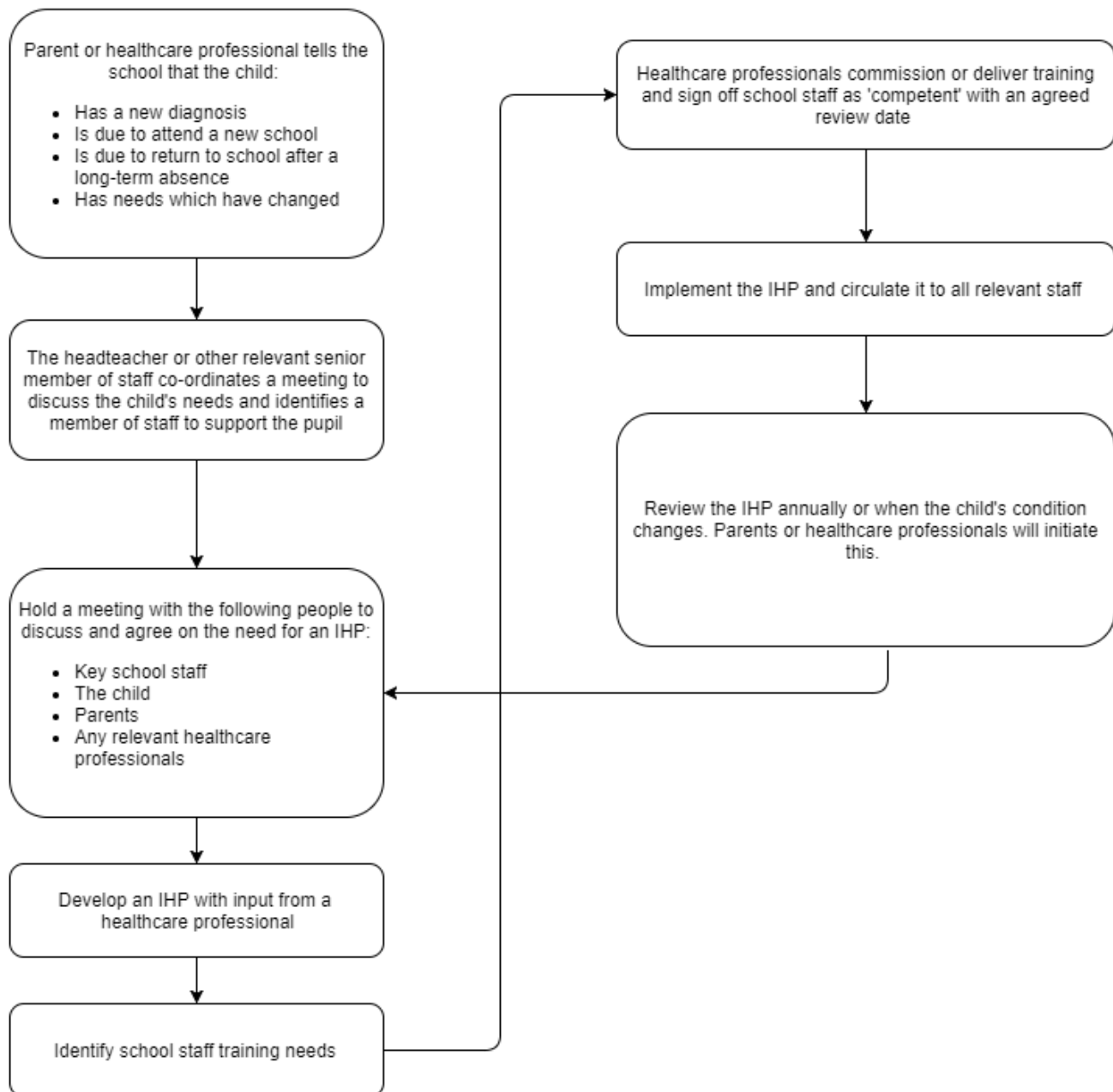
Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully 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 pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals may need to be consulted.

6. Being Notified that a Child has a Medical Condition

When the school is notified that a pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an Individual Healthcare Plan.

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 pupils who are new to our school. However, a significant part of this process is dependent on the availability of the school nursing team.



7. Individual Healthcare Plans

The Headteacher has overall responsibility for the development of Individual Healthcare Plans for pupils with medical conditions. This has been delegated to the Director of Inclusion / Designated Safeguarding Lead Ms Donna Cini.

Individual Healthcare Plans will be reviewed if there is a change to the pupil's health needs and/or condition or where a new condition is diagnosed or being explored by medical professionals.

Individual Healthcare Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done (ie. medicine administration, in the event of an emergency)?
- When (ie. at which time of day)?
- By whom (ie. who is responsible)?

Not all pupils with a medical condition will require an Individual Healthcare Plan. It will be agreed with a healthcare professional and the parents when an Individual Healthcare Plan would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the Director of Inclusion 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 pupil's specific needs. The pupil will be involved wherever appropriate.

Individual Healthcare Plans will be linked to, or become part of, any statement of special educational needs (SEND) or education, health and care (EHC) plan. If a pupil has SEND but does not have a statement or EHC plan, the SEND will be mentioned in the Individual Healthcare Plan.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The school will consider the following when deciding what information to record on Individual Healthcare Plans:

- 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, eg. 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, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring.
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil'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 pupil's condition and the support required.
- Arrangements for written permission from parents 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 pupil can participate, eg. risk assessments.
- Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition.
- What to do in an emergency, including who to contact, and contingency arrangements.

8. Managing Medicines

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

- When it would be detrimental to the pupil's health or school attendance not to do so.
- Where we have parents' written consent (see Appendix A).
- The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents.
- 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 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. 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 to arrange for safe disposal when no longer required.

9. 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 pupil 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 pupil to use. 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.

10. Pupils Requiring Risk Assessments

Pupils who have fractured or broken a limb and/or may have reduced mobility will require a risk assessment. This helps support the pupil's movement around the school and ensures they are safe on the school site. Control measures may include staggered transition times, priority gate and lunch passes and support with carrying/storing bags from a member of the welfare team. It is the responsibility of the parents to inform the school when their child experiences a break or a fracture which would require a risk assessment.

11. Pupils Managing their Own Needs

Pupils 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 Individual Healthcare Plans.

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

12. Unacceptable Practice

School staff should use their discretion and judge each case individually with reference to the pupil's Individual Healthcare Plan, 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 parents.
- 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 Individual Healthcare Plans.
- If the pupil becomes ill, send them 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, 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 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, eg. by requiring parents to accompany their child.
- Administer, or ask pupils to administer, medicine in school toilets.

13. Children who are Unable to Attend School because of their Health

The school will ensure that sufficient work is provided for pupils whose attendance is significantly disrupted because of their health to enable them to maintain access to the curriculum. This will be coordinated by the Head of Year with the support of the pastoral team. For absences of 15 days or more referrals to the Borough (in which the pupil resides) Inclusion Team will be discussed with parents. Further details can be found in the Children who cannot attend school because of health needs policy.

14. Emergency Procedures

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

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance.

15. Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of Individual Healthcare Plans. Staff who provide support to pupils 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 Director of Inclusion. 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 pupils
- Fulfil the requirements in the Individual Healthcare Plans
- 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.

16. Record Keeping

The Governing Body will ensure that written records are kept of all medicine administered to pupils. In addition, records will be kept for those pupils requiring regular monitoring for conditions such as Diabetes and Epilepsy. Parents will be informed if their pupil has been unwell and/or received first aid treatment during the school day.

Individual Healthcare Plans are kept in a readily accessible place which all staff are aware of.

17. Liability and Indemnity

The Governing Body will ensure that the appropriate level of assurance is in place, reflecting the school's level of risk. The school is a member of the Risk Protection Arrangement (RPA), which provides third-party liability coverage. Further details can be found <https://www.rpaclaimforms.co.uk/faqs/>

The details of the school's insurance policy are available from Ms Sarah Williams, School Business Manager.

18. Complaints

Parents with a complaint about their child's medical condition should discuss these directly with the Director of Inclusion, Ms Donna Cini, in the first instance. If the Director of Inclusion cannot resolve the matter, they will direct parents to the school's complaints procedure.

19. Monitoring Arrangements

This policy will be reviewed and approved by the governing board every 3 years.



Appendix A: Wanstead High School Medication Administration Permission Form

Name of child

Date of birth

Tutor Group

Medical condition or illness

Medicine

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

Expiry date

Dosage and method

Timing

Special precautions/other instructions

Are there any side effects that Wanstead High School needs to know about?

Self-administration – Yes/No

Procedures to take in an emergency

This medication has been prescribed for my child by the GP/ other appropriate medical professional whom you may contact for verification. Contact details:

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

Parent/Carer Contact Details

Name

Daytime telephone no.

Relationship to child

Address

Ms Shelly Smith – Lead First Aider

I understand that I must deliver the medicine personally to

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to Wanstead High School staff administering medicine in accordance with Wanstead High School policy. I will inform the Wanstead High School immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____

Date _____