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Supporting Students with Medical Conditions Policy

1.Introduction

Supporting students with medical conditions, to ensure their health, safety, wellbeing, inclusivity and achievement while at Open Box Education, is a priority for us all.

2. Scope

This policy meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty on a governing body to make arrangements for supporting Students at their school with medical conditions.

It is also based on the Department for Education (DfE)'s statutory guidance on supporting pupils with medical conditions at school.

3. Aims

This policy aims to ensure that:

- Students, staff and parents/carers understand how our school will support students with medical conditions
- Students with medical conditions are properly supported to allow them to access the same education as other students, including timetabled off-site lessons, school trips and sporting activities

4. Responsibilities

4.1 The governing body

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

The governing body will implement this policy by:

- Making sure sufficient staff are suitably trained
- Ensuring staff have been provided with appropriate information about the policy and relevant students
- Ensuring the development and monitoring of systems in this policy to ensure the safety of students with medical conditions
- Making sure that school staff are appropriately insured and aware that they are insured to support Students in this way
- Having oversight of student cohort status, with respect to medical conditions

The named person with responsibility for implementing this policy is Alison Dolan, Principal.

4.2 The Principal

The Principal will:

- Make sure Governors have oversight of student cohort status, with respect to medical conditions, and confirmation of appropriate staff training

- 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 against all individual healthcare plans (IHPs), including in contingency and emergency situations
- Making sure there are cover arrangements to ensure someone is always available to support students with medical conditions
- Ensure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development of Medical Risk Assessments (MRA) and any individual health care plans (IHP), as necessary
- Contact the school nursing service in the case of any student 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

4.3 Staff

Supporting students 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 students with medical conditions.

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. This includes the administration of medicines.

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.

4.4 Parents/carers

Parents/carers 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 MRA and/or IHP as appropriate, and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the MRA and/or IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times

4.5 Students

Students with medical conditions will often be best placed 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 MRA and/or IHP. They are also expected to comply with the information in these documents.

4.6 School nurses and other healthcare professionals

The Local Authority 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. They may also support staff to implement a child's MRA and/or IHP.

Healthcare professionals, such as GPs and Pediatricians, will liaise with the school's nurses and notify them of any students identified as having a medical condition. They may also provide advice on developing the MRA and/or IHP.

5. Procedures

5.1 Equal opportunities

Our school is clear about the need to actively support students with medical conditions to participate in school timetabled off-site lessons, 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 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/carers and any relevant healthcare professionals will be consulted.

5.2. 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 MRA and/or 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.

5.3. Medical Risk Assessments (MRA) and Individual healthcare plans (IHPs)

The Principal has overall responsibility for the development of MRAs and IHPs for students with medical conditions, and will work in conjunction with the SEND, Health & Care Manager to ensure the MRAs and IHPs are complete.

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 student's best interests in mind and will set out:

- What needs to be done
- When
- By whom

While all students with a medical condition will require an MRA, not all students with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents/carers when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the Principal will make the final decision.

Plans will be drawn up in partnership with the school, parents/carers 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 may be linked to, or become part of, any education, health and care (EHC) plan. If a student has special educational needs (SEN) but does not have an EHC plan, the SEN will be mentioned 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 Principal and the SEND, Health & Care Manger 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. availability of quiet space and supervision at break times
- 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 education, and counselling sessions
- 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 this 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
- Creation of an individual Medical Risk Assessment in the Student Profile record, to update staff on medical condition information.
- Arrangements for written permission from parents/carers and the Principal 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 timetabled off-site lessons and school trips, that will ensure the student can participate, e.g. risk assessments
- Where confidentiality issues are raised by the parent/carer or 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

5.4 Managing medicines

Prescription and non-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/carers' written consent

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

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/carers will always be informed, and a record will be kept on the student information in our Management Information System.

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 staff will 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 students and not locked away.

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

Medication will be stored, recorded and audited, to ensure compliance with individual items as required, and to maintain transparency and clarity in the safe handling of both prescription and non-prescription medication held in the School Office.

The audit will be carried out by the School Business Manager each half term and the audit record kept in the Office Shared Area, in Sharepoint.

5.5 Register of students with AAIs

The school maintains a record of students who have been prescribed AAIs or where a doctor provides a written plan recommending AAIs to be used in the event of anaphylaxis. The record includes:

- Known allergens and risk factors for anaphylaxis
- Whether a student has been prescribed AAI(s) (and if so, what type and dose)
- Where a student has been prescribed an AAI, whether parental consent has been given for use of the spare AAI, which may be different to the personal AAI prescribed for the student

The record is kept in the Office Shared Area, in Sharepoint..

Information relating to students who have been prescribed their own AAI can be found in their individual health risk assessment, which is accessible to all staff. The Individual First Aid kits for students are easily accessible in the main office, as part of initiating an emergency response.

Students who have their own AAI(s) have their own labelled First Aid kit bag, containing the AAI(s) and emergency information and procedures.

There is also a spare AAI in the main office with the general First Aid Kit.

For students who need immediate assistance, there is anonymised emergency information and procedures on the first aid kit door in the main office.

5.6 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 will be kept in a secure cupboard in the school office and only named staff will 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.

5.7 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/carers and it will be reflected in the MRA and/or 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 MRA and/or IHP and inform parents/carers so that an alternative option can be considered, if necessary.

5.8 Unacceptable practice

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

- Prevent students from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every student with the same condition requires the same treatment

- Ignore the views of the student or their parents/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
- If the student becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- Penalise students for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- Prevent students 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 child.
- Prevent students from participating, or create unnecessary barriers to students participating in any aspect of school life, including school trips.

5.9 Emergency procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All students' MRAs and/or 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/carer arrives, or accompany the student to hospital by ambulance.

5.10 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, as appropriate. Otherwise, staff will be updated by the Principal following the development or review meeting.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Principal. 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 all MRAs and/or 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.

5.11 Record keeping

The governing body will ensure that written records are kept of all medicine administered to students for as long as these students are at the school. Parents/carers will be informed if their student has been unwell at school.

IHPs are kept in a readily accessible place that all staff are aware of.

5.12 Liability and indemnity

The governing body 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:

MARKEL INSURANCE – POLICY NUMBER S10827

Professional liability insurance cover is £2,000,000

Markel Insurance will cover staff providing support to students with medical conditions, subject to adherence to this policy and procedures.

5.13 Complaints

Parents/carers with a complaint about the school's actions in regard to their child's medical condition should discuss these directly with the Principal in the first instance. If the Principal cannot resolve the matter, they will direct parents/carers to the school's complaints procedure.

Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equal Opportunities
- First aid
- Health and safety
- Safeguarding
- Allergy Policy
- School Food Policy

Approved by: ..... (Principal) ..... (date)

Authorised by: ..... (Chair of Governors) ..... (date)

To be reviewed every: Two Years

Next review date: November 2026

Date of Review	Reviewed by	Ratified by Governors	Date of next review
MAY 2025	Marie Black/ Alison Dolan		May 2027

Appendix 1: Being notified a child has a medical condition