



THE VALLEY PARTNERSHIP

Supporting Pupils at School with Medical Conditions Policy

This Policy was agreed by the Full Governing Board of
The Valley Partnership

Date: 1st July 2019

Signed:

A handwritten signature in black ink that reads "Maire Sealey". The signature is written in a cursive style.

Review Date: July 2020

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1. Policy statement

The Valley Partnership School of Webber's and Burlescombe Schools, wishes to ensure that students with medical conditions receive appropriate care and support at school. This policy has been developed in line with the Department for Education's guidance released in April 2014 – "Supporting students at school with medical conditions". Ofsted places a clear emphasis on meeting the needs of students with SEN and Disabilities.

Our Schools are inclusive communities that aim to support and welcome students with medical conditions.

They aim to provide all students with all medical conditions the same opportunities as others at school.

Key Principles

- TVP ensures all staff are aware of their duty of care to children and young people in the event of an emergency and know what to do in an emergency.
- All staff understand the common medical conditions that affect children at this school.
- Staff receive training on the impact medical conditions can have on students.
- The TVP understands that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood.
- The TVP understands the importance of medication being taken as prescribed

2. Policy framework

These points provide the essential framework of the TVP's medical conditions policy.

1. The TVP is an inclusive community that aims to support and welcome students with medical conditions.
2. This school's medical conditions policy is drawn up in consultation with a range of local key stakeholders within both the school and health settings.
4. Staff understand what to do in an emergency for the most common serious medical conditions at this school.
5. All staff understand and are trained in the school's general emergency procedures.
6. The TVP has clear guidance on the administration of medication at school.
7. The TVP has clear guidance on the storage of medication at school.
8. The TVP has clear guidance about record keeping.
9. The TVP aims for the whole school environment to be inclusive and favourable to students with medical conditions – within reasonable adjustment. This includes the physical environment, as well as social, sporting and educational activities.
10. The TVP is aware of the common triggers that can make common medical conditions worse or can bring on an emergency. The school is working towards reducing or eliminating these health and safety risks.
11. Each member of the school and health community knows their roles and responsibilities in maintaining and implementing an effective medical conditions policy.
12. This policy is regularly reviewed, evaluated and updated.

3. Key Roles and Responsibilities

3.1 The Governing Board is responsible for:

1. The overall implementation of the Supporting Students with Medical Conditions Policy and procedures at schools within The Valley Partnership.
2. 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.
3. Handling complaints regarding this policy as outlined in the school's Complaints Policy.
4. Ensuring that all students with medical conditions wherever possible are able to participate fully in all aspects of school life.
5. Ensuring that relevant training is delivered to staff members who take on responsibility to support children with medical conditions.
6. Guaranteeing that information and teaching support materials regarding supporting students with medical conditions are available to members of staff with responsibilities under this policy.
7. Keeping written records of any and all medicines administered to individual students and across the school population
8. Ensuring the level of insurance in place reflects the level of risk

3.2 The Executive Headteacher is responsible for:

1. The day-to-day implementation and management of the Supporting Students with Medical Conditions Policy and procedures of The Valley Partnership
2. Ensuring the policy is developed effectively with partner agencies.
3. Making staff aware of this policy.
4. Liaising with healthcare professionals regarding the training required for staff.
5. Ensuring relevant staff are aware of a child's medical condition.
6. Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHCPs in normal, contingency and emergency situations
7. If necessary, facilitating the recruitment of a member of staff for the purpose of delivering the promises made in this policy.
8. Ensuring the correct level of insurance is in place for teachers who support students in line with this policy

3.3 The SENDCo is responsible for:

1. Developing Individual Healthcare Plans (IHCPs) where necessary

3.4 All Staff are responsible for

1. Administering medication, if they have agreed to undertake that responsibility.
2. Undertaking training to achieve the necessary competency for supporting students with medical conditions, if they have agreed to undertake that responsibility.
3. Taking appropriate steps to support children with medical conditions.
4. Where necessary, making reasonable adjustments to include students with medical conditions into lessons.
5. Familiarising themselves with procedures detailing how to respond when they become aware that a pupil with a medical condition needs help.

3.5 School nurses are responsible for:

1. Notifying the school when a child has been identified with requiring support in school due to a medical condition.
2. Liaising locally with lead clinicians on appropriate support.

3.6 Parents and carers are responsible for:

1. Keeping the school informed about any changes to their child/children's health.
2. Completing a parental agreement for school to administer medicine form before bringing medication into school. Appendix 3
3. Providing the school with the medication their child requires and keeping it up to date.
4. Collecting any leftover medicine at the end of the course or year.
5. Discussing medications with their child/children prior to requesting that a staff member administers the medication.
6. Where necessary, developing an Individual Healthcare Plan (IHCP) –Appendix 2 - for their child in collaboration with the SENDCo other staff members and healthcare professionals.

4 Definitions

1. "Medication" is defined as any prescribed or over the counter medicine
2. "Prescription medication" is defined as any drug or device prescribed by a doctor.
3. A "staff member" is defined as any member of staff employed by The Valley Partnership and or Webber's & Burlescombe School (some are old contracts) including teachers.

5 Training of staff

1. Staff will receive training on the Supporting Students with Medical Conditions Policy as part of their new starter induction.
2. Staff will receive regular and ongoing training as part of their development. This will always be at the start of an academic year.
3. Staff who undertake responsibilities for delivering medical care under this policy will receive the following specific training:
Use of Epipen for anaphylaxis
Managing asthma training
Managing diabetes training
Managing epilepsy
Other specific training as required
Producing an IHCP
The clinical lead for this training is the School Nurse
4. No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the responsibility.
5. No staff member may administer drugs by injection unless they have received training in this responsibility
6. The Admin Officer will keep a record of training undertaken and a list of teachers qualified to undertake responsibilities under this policy.

6 The role of the child

1. Children who are competent will be encouraged to take responsibility for managing their own medicines and procedures.
2. Where possible, students will be allowed to carry their own medicines and devices. Where this is not possible, their medicines will be located in an easily accessible location.
3. If students refuse to take medication or to carry out a necessary procedure, parents will be informed so that alternative options can be explored.
4. Where appropriate, students will be encouraged to take their own medication under the supervision of a teacher.
5. When going on a trip outside of staff to collect children's medicines from WPS or BPS office and ensure that it is replaced.

7 Individual Healthcare Plans (IHCPs)

1. Where necessary, an Individual Healthcare Plan (IHCP) will be developed in collaboration with the pupil, parents/carers, Headteacher, Special Educational Needs Coordinator (SENDCO) and medical professionals.
2. IHCPs will be easily accessible whilst preserving confidentiality.
3. IHCPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.
4. Where a pupil has an Education, Health and Care plan or special needs statement, the IHCP will be linked to it or become part of it.
5. Where a child is returning from a period of hospital education or alternative provision or home tuition, we will work with the LA and education provider to ensure that the IHCP identifies the support the child needs to reintegrate and an adequate risk assessment is carried out.

8 Medicines

1. Where possible, it is preferable for medicines to be prescribed in frequencies that allow the pupil to take them outside of school hours.
2. If this is not possible, prior to staff members administering any medication, the parents/carers of the child must complete and sign a parental agreement for a school to administer medicine form. (Green)
3. No child will be given any prescription or non-prescription medicines without written parental consent.
4. Where a pupil is prescribed medication without their parents'/carers' knowledge, every effort will be made to encourage the pupil to involve their parents while respecting their right to confidentiality.
5. No child under 16 years of age will be given medication containing aspirin without a doctor's prescription.

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 dosage instructions. Medicines which do not meet these criteria will not be administered.
7. A maximum of four weeks supply of the medication may be provided to the school at one time.
8. 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 our Drug and Alcohol Policy.
9. Medications will be stored in the office
10. Any medications left over at the end of the course will, if possible, be returned to the child's parents.
11. Written records will be kept of any medication administered to children. Appendix 4
12. Students will never be prevented from accessing their medication.
13. The School cannot be held responsible for side effects that occur when medication is taken correctly.

9 Emergencies

1. Medical emergencies will be dealt with under the school's emergency procedures.
2. Where an Individual Healthcare Plan (IHCP) is in place, it should detail:
 - What constitutes an emergency.
 - What to do in an emergency.
 1. Students will be informed in general terms of what to do in an emergency such as telling a teacher
 2. If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents arrive. Staff should not take children to hospital in their own car.

10 Avoiding unacceptable practice

The Valley Partnership understands that the following behaviour is unacceptable:

- Assuming that students with the same condition require the same treatment.
- Preventing a student from accessing their medicine
- Ignoring the views of the pupil and/or their parents.
- Ignoring medical evidence or opinion.
- Sending students home frequently or preventing them from taking part in activities at school
- Penalising students with medical conditions for their attendance record where the absences relate to their condition.
- Making parents feel obliged or forcing parents to attend school to administer medication or provide medical support, including toilet issues.
- Creating barriers to children participating in school life, including school trips.
- Refusing to allow students to eat, drink or use the toilet when they need to in order to manage their condition.

11 Insurance

1. Teachers who undertake responsibilities within this policy are covered by the schools' insurance.

Please ask in the school office for DETAILS

12 Complaints

The details of how to make a complaint can be found in the Complaints Policy:

- Stage 1 - Complaint Heard by Staff Member
- Stage 2 - Complaint Heard by Headteacher
- Stage 3 – Complaint Heard by Governing Bodies' Complaints Appeal Panel (CAP)

13 Appendices

Appendix A - Individual healthcare plan implementation

Appendix B- IHP Template

Appendix C- Staff who may be asked to lead on the creation of a IHCP

Appendix D- Administration of medication in school- parental

Appendix E- Record of administration of medication in school

Appendix A - Individual healthcare plan implementation procedure

1. Parent or healthcare professional informs school that child has medical condition or is due to return from long-term absence, or that needs have changed.
2. A meeting is co-ordinated meeting to discuss child's medical needs and identifies member of school staff who will provide support to the pupil.
3. Meeting held to discuss and agree whether IHCP is needed to include key school staff, child, parent and relevant healthcare professionals.
4. Develop IHCP in partnership with healthcare professionals and agree on who leads.
5. School staff training needs identified.
6. Training delivered to staff - review date agreed.
7. IHCP implemented and circulated to relevant staff.
- 8 .IHCP reviewed annually or when condition changes. Parent/carer or healthcare professional to initiate. (Back to 3.)

Appendix B: TVP Individual Health Care Plan

Plan number :		Date:
School:		
Child's name:		
Group/class/form		
Date of birth		
Child's address		
Medical diagnosis or condition		
Review date		
Plan Number:		
Family Contact Information		
KEY Contact 1 Name:		
Relationship to child		
Phone no. Work		
Home:		
Mobile:		
Clinic/Hospital Contact		
Name:		
Phone:		
GP Name:		
Phone number		
Surgery Address		
Who is responsible for support in school:		
<p>Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.</p>		
<p>Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision.</p>		
<p>Daily care requirements</p>		

Specific support for the pupil's educational, social and emotional needs
Arrangements for school visits/trips etc.
Other information
Describe what constitutes an emergency, and the action to take if this occurs:
Who is responsible in an emergency (<i>state if different for off-site activities</i>)
Plan developed with:
Staff training needed/undertaken – who, what, when
Form copied to:

Appendix C

Staff who may be asked to lead on the creation of a IHCP:

- Executive head teacher
- SENDCo
- School Specifically Designated First Aider on site/class teacher in liaison with SENDCo

Appendix D: PARENTAL AGREEMENT TO ADMINISTER PRESCRIPTION MEDICINE

The Valley Partnership

Notes to Parent / Guardians

Note 1: This school will only give your student medicine after you have completed and signed this form.

Note 2: All medicines must be in the original container as dispensed by the pharmacy, with the student's name, its contents, the dosage and the prescribing doctor's name

Note 3: The information is requested, in confidence, to ensure that the school is fully aware of the medical needs of your student.

Prescribed Medication

Date	
Student's name	
Date of birth	
Group/class/form	
Reason for medication	

Name / type of medicine (as described on the container)	
Expiry date of medication	
How much to give (i.e. dose to be given)	
Time(s) for medication to be given	
Special precautions /other instructions (e.g. to be taken with/before/after food)	
Are there any side effects that the school needs to know about?	
Procedures to take in an emergency	
I understand that I must deliver the medicine personally to <i>Miss Titheridge OR Kelly Parkinson/Carolyn Ayres</i>	
Number of tablets/quantity to be given	

Time limit – please specify how long your student needs to be taking the medication	_____day/s _____week/s
I give permission for my son/daughter to be administered the emergency inhaler held by the school in the event of an emergency	Yes / No/ Not applicable
I give permission for my son/daughter to carry their own asthma inhalers	Yes / No / Not applicable
I give permission for my son/daughter to carry their own asthma inhaler and manage its use	Yes / No / Not applicable
I give permission for my teenage son/daughter to carry their adrenaline auto injector for anaphylaxis (epi pen)	Yes / No / Not applicable
I give permission for my son/daughter to carry and administer their own medication in accordance with the agreement of the Academy and medical staff	Yes / No / Not applicable

Details of Person Completing the Form:

Name of parent/guardian	
Relationship to student	
Daytime telephone number	
Alternative contact details in the event of an emergency	
Name and phone number of GP	
Agreed review date to be initiated by [named member of staff]	

I confirm that the medicine detailed overleaf has been prescribed by a doctor, and that I give my permission for the Principal (or his/her nominee) to administer the medicine to my son/daughter during the time he/she is at Webber’s Church of England Primary School

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. I also agree that I am responsible for collecting any unused or out of date supplies and that I will dispose of the supplies.

The above information is, to the best of my knowledge, accurate at the time of writing.

Parent’s Signature _____ Date _____
(Parent/Guardian/person with parental responsibility)

Appendix E

RECORD OF MEDICINE ADMINISTERED TO AN INDIVIDUAL YOUNG PERSON

Name of Establishment

Name of Young Person	
Date of Birth	
Tutor/ Class / group	
Date medicine provided by parent	
Name and strength of medicine	
Quantity received	
Dose and frequency of medicine	
Expiry date	
Quantity returned	

Staff signature _____ Initials _____

Log of Medicines Administered

Date	Time given	Dose given	Staff Name/Initials	Notes/ problems