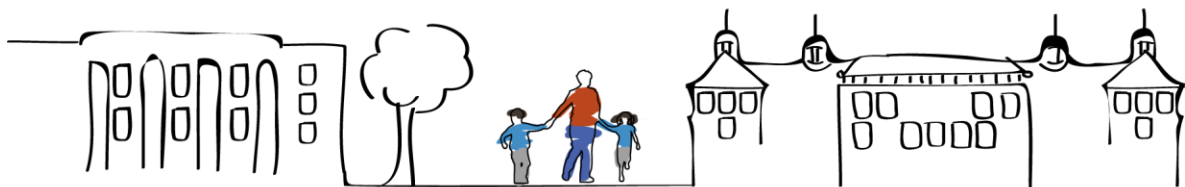


Pupils with Medical Conditions Policy

Growing Together, Learning for Life



BANNOCKBURN
Primary School

Policy updated March 2025
Policy review March 2027

Contents

1.0	Introduction.....	3
2.0	Definition of Medical Conditions.....	3
3.0	Responsibility.....	3
3.1	Senior Leaders	3
3.2	Staff	3
3.3	School Nurse.....	4
3.4	Parents.....	4
3.5	Pupils	4
5.0	Individual Healthcare Plans (IHCPs)	5
6.0	Administering Medicines.....	6
7.0	Avoiding Unacceptable Practice	7
8.0	Insurance	7
9.0	Complaints.....	7

1.0 Introduction

Section 100 of the Children and Families Act 2014 places a duty on the Governing Body to make arrangements for supporting pupils with medical conditions. Specifically, it requires the Governing Body to:

- Properly support pupils with medical conditions so that they have full access to education, including school trips and PE.
- Ensure school leaders consult health and social care professionals, pupils and parents, so that the needs of pupils with medical conditions are effectively supported.

2.0 Definition of Medical Conditions

Pupils' medical needs can be broadly summarised into two types:

- *Short-term* which affects their participation in activities because they are on a course of medication.
- *Long-term* which potentially limits their access to education because they require extra care and support.

3.0 Responsibility

3.1 Senior Leaders

Are responsible for:

- Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver Individual Healthcare Plans (IHCP) in normal, contingency and emergency situations.
- Providing training and cyclical refresher training.
- Making staff aware of a child's medical condition.
- Liaising with healthcare professionals regarding the training required for staff, including ensuring that the school nursing service is consulted in the case of any pupil who has a medical condition.
- Developing and implementing IHCPs with the Senior First Aid Officer, SENCO, Inclusion and SLT

3.2 Staff

Staff are responsible for:

- Taking appropriate steps to support children with medical conditions.
- Making reasonable adjustments to include pupils with medical conditions into lessons.
- Administering medication under controlled conditions, when medically necessary, if they have agreed to undertake that responsibility.

- Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, where the support may be emergency in nature, e.g. administering epipens or calling an ambulance.
- Familiarising themselves with procedures detailing how to respond when they become aware that a pupil with a medical condition needs help.
- Referring pupils to a First Aider if they have any concerns about a pupil's health.
- Referring pupils to the Designated Safeguarding Lead (DSL), if they have any concerns about a pupil's health or wellbeing.

3.3 School Nurse

The School Nurse is responsible for:

- Notifying the school when a pupil has been identified as requiring support in school due to a medical condition.
- Liaising locally with lead clinicians on appropriate support.

3.4 Parents

Parents are responsible for:

- Keeping the school informed about any changes to their child's health.
- Discussing medications with their child prior to requesting that a staff member administers their medication.
- Ensuring that they have provided written consent for the school to administer medicine.
- Providing the school with the medication that their child requires and keeping it up to date.
- Collecting any leftover medicine at the end of the course or year.
- Where necessary, developing an IHCP for their child in collaboration with relevant staff members and healthcare professionals.

3.5 Pupils

- Pupils (who are competent) will be encouraged to take responsibility for managing their own medicines and procedures.
- Where possible, pupils 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.
- If pupils refuse to take medication or to carry out a necessary procedure, parents will be informed so that alternative options can be explored.
- Where appropriate, pupils will be encouraged to take their own medication under the supervision of a teacher.

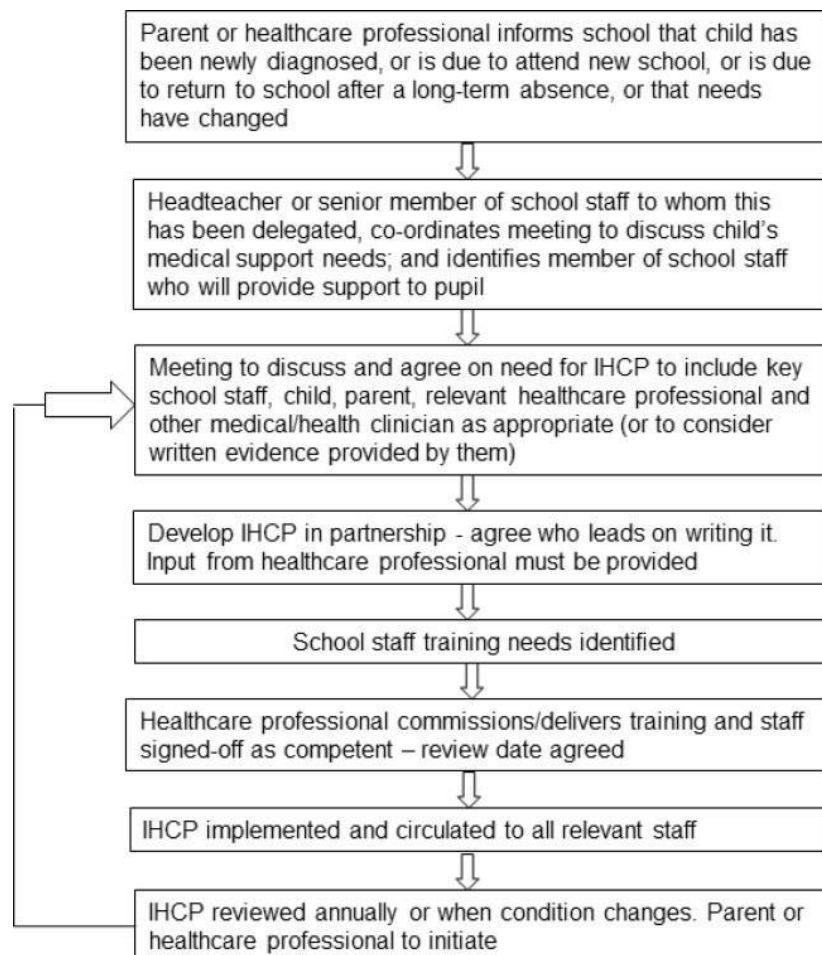
5.0 Individual Healthcare Plans (IHCPs) otherwise known as care plans

Where necessary, an IHCP) or EHCP will be developed in collaboration with the pupil, parents/carers, first aid staff, SENCO and medical professionals.

The template for an IHCP is included in the appendix.

All IHCP will be signed off by Senior staff, and will be easily accessible whilst preserving confidentiality.

The process for developing IHCPs is summarised below.



IHCPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.

Where a pupil has an EHCP, the IHCP will be linked to it or become part of it.

Where a pupil is returning from a period of hospital education, alternative provision or home tuition, the school will work with the LA and education provider to ensure that the IHCP identifies the support the child needs to reintegrate.

6.0 Administering Medicines

The following should be adhered to in relation to administering medicines:

- Medicines should only be administered when it would be detrimental to a child's health or school attendance not to do so.
- No pupil under 16 should be given prescription or non-prescription medicines without their parent's written consent – except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, every effort should be made to encourage the child or young person to involve their parents while respecting their right to confidentiality.
- A pupil under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents should be informed, where clinically possible, that medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- The school will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date, but will generally be available inside an insulin pen or a pump, rather than in its original container.
- All medicines should be stored safely. Children should know where their medicines are at all times and be able to access them immediately. Where relevant, they should know who holds the key to the storage facility. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to children and not locked away. This is particularly important to consider when outside of school premises, e.g. on school trips.
- A pupil who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. The school will keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff will have access to it whilst still ensuring that it is easily accessible in an emergency. A record should be kept of any doses used and the amount of the controlled drug held in school.
- Staff may administer a controlled drug to the child for whom it has been prescribed providing that they have received specialist training/instruction. A first-aid certificate does not constitute appropriate training in supporting children with medical conditions.
- Staff administering medicines should do so in accordance with the prescriber's instructions. The school will keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered will also be noted.
- When no longer required, medicines should be returned to the parent to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharp objects.

7.0 Avoiding Unacceptable Practice

The school understands that the following behaviour is unacceptable:

- Assuming that pupils with the same condition require the same treatment.
- Ignoring the views of the pupil and/or their parents.
- Ignoring medical evidence or opinion.
- Sending pupils home frequently or preventing them from taking part in activities at school.
- Sending a pupil to the medical room or school office alone if they become ill.
- Penalising pupils 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, unless it is necessary to do so.
- Creating barriers to children participating in school life, including school trips.
- Refusing to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

8.0 Insurance

Staff who undertake responsibilities within this policy are covered by insurance.

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

9.0 Complaints

The details of how to make a complaint can be arranged via the school.