



# Supporting Children with Medical Needs Policy

Approved by  
Education Committee

Date  
October 2023

Last reviewed on  
September 2023

Next review due  
September 2025

**RELEASING THE  
IMAGINATION:  
CELEBRATING  
THE ART OF  
THE POSSIBLE**



## Aims

Children at school with medical conditions should be properly supported so that they can play an active part in school, remaining healthy and able to achieve their academic potential, with full access to education, including school trips and physical education. Section 100 of the **Children and Families Act 2014** places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting children at their school with medical conditions.

## Definition of the term Medical Condition used in this context

A medical condition that is long-term with acute episodes, requires ongoing support, and involves the need or possible need for medication and/or care whilst at school. The condition will need monitoring and could require immediate intervention in emergency circumstances.

Some children with medical conditions may be disabled. Where this is the case the Governing Body must comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEN) and have a Education Health & Care Plan (EHCP) which brings together health and social care needs, as well as their special educational provision. For children with SEND, this guidance should be read in conjunction with the SEND code of practice and the school's Local Offer.

## Responsibilities

The Governing Body must ensure that the school function in line with parents/carers in order to support children with medical conditions. In doing so, they should ensure that such children can access and enjoy the same opportunities at school as any other child. The school, Local Authority, health professionals and other support services should work together to ensure that children with medical conditions receive a full education.

The Governing Body should ensure that the school's leaders and class teachers liaise with health and social care professionals and parents/carers to ensure that the needs of children with medical conditions are effectively supported. The needs of each child must be considered on an individually assessed basis and the school must be fully informed on how the child's medical condition impacts on their school life.

The Governing Body must ensure that the arrangements they put in place are sufficient to meet their statutory responsibilities and should ensure that policies, plans, procedures and systems are properly and effectively implemented. This aligns with their wider safeguarding duties. Policies should be reviewed on a regular basis as determined by the Governing Body and be readily accessible to parents/carers and the school team.

Where children would not receive a suitable education in a mainstream school because of their health needs, the local authority has a duty to make other arrangements. If a child is unable to attend school for a period of time due their medical condition and if they are well enough to engage in learning activities. The class teacher will provide learning activities for the child to complete at home.

## The Role of the UCPS Team

The UCPS Team will be aware of the medical conditions of children in school including the locations in which the medicines are safely stored and any other category of need in which they are registered in order to comply with the law.

If a child is deemed to have a long-term medical condition, the school will ensure that arrangements are in place to support them. In doing so, we will ensure that such children can access and enjoy the same opportunities as far as is practically and safely possible at school as any other child and always in line with a previously agreed plan with their parents/carers, medical professionals and/or the community nursing team. UCPS, health professionals, parents/carers and other support services will work together to ensure that children with medical conditions receive a full education, unless this would not be in their best interests because of their health needs. In some cases this will require flexibility and involve, for example, programmes of study that rely on part time attendance at school in combination with alternative provision arranged by the health professionals. Consideration will also be given to how children will be reintegrated back into school after long periods of absence.

Adults must not give prescription or non-prescription medicines or undertake health care procedures without paediatric first aid training. At UCPS, we recognise that a first-aid certificate does not constitute appropriate training in supporting children with medical conditions. Healthcare professionals who we have regular access to, will provide training and subsequent confirmation of the proficiency of supporting adults in a medical procedure, or in providing medication. This will occur at induction (or when convenient) and reviewed annually for specific named adults when a new condition is identified, as per the First Aid policy and care plans.

## Procedures to be followed when notification is received that a child has a medical condition

We will ensure that the correct procedures will be followed whenever we are notified that a child has a medical condition, procedures will also be in place to cover any transitional arrangements between schools. For children starting at UCPS, arrangements will be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or children moving to UCPS mid-term, we will make every effort to ensure that arrangements are put in place immediately through consultation with the Health Care Service and parents/carers.

In making the arrangements, UCPS will take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. We will also acknowledge that some will be more obvious than others. We will therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life. UCPS will ensure that arrangements give parent's/carer's and the child confidence in UCPS's ability to provide effective support for medical conditions in school. The arrangements will show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care (when appropriate). We will ensure that the team are properly trained and provided refresher training to provide the support that a child needs. UCPS will ensure that arrangements are clear and unambiguous about the need to support children with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. UCPS will make arrangements for the inclusion of children in such activities with any adjustments, as

required, unless evidence from a clinician such as a GP states that this is not possible. The school will always seek the viewpoint of parents/carers who will make the final decision as to whether their child may participate in a sport or activity. UCPS will make sure that no child with a medical condition is denied admission or prevented from attending UCPS because arrangements for their medical condition have not been made. However, in line with our safeguarding duties, we will ensure that child's health is not put at unnecessary risk from, for example, infectious diseases. We will therefore not accept a child in school at times where it would be detrimental to the health of that child or others.

UCPS does not have to wait for a formal diagnosis before providing support to children. In cases where a child's medical condition is unclear, or where there is a difference of opinion, judgments will be needed about what support to provide based on the available evidence. This would normally involve a form of consultation with the parents/carers which takes into account, medical evidence and then a Health Care Plan can be agreed and completed. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place. This will usually be led by the Executive Headteacher and/or the Associate Headteacher and may involve other senior leaders.

Where a child has an Individual Health Care Plan, this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other children at UCPS should know what to do in general terms, such as informing a teacher immediately if they think help is needed. If a child (regardless of whether they have an Individual Health Care Plan) needs to be taken to hospital, an adult should stay with the child until the parent/carer arrives, or accompany a child taken to hospital by ambulance. If this happens the Director of Business must be informed.

## Individual Health Care Plans

Individual Health Care Plans will be written with information supplied by the parent/carer and medical professionals (if any) forming an action plan but it will be the responsibility of all members of the UCPS team supporting the individual children to ensure that the Plan is followed. The class teacher will be responsible for the child's development and ensuring that they and their medical conditions are supported at school. It is the duty of any paediatric first aid trained adult to carry out first aid procedures if needed.

Individual Healthcare Plans will help to ensure that UCPS effectively supports children with medical conditions. They will provide clarity about what needs to be done, when and by whom. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. They are likely to be helpful in the majority of other cases too, especially where medical conditions are long-term and complex. However, not all children will require one. At UCPS, the health care professionals and parents/carers should agree, based on evidence, when a Health Care Plan would be inappropriate or disproportionate. If consent cannot be reached, the Executive or Associate Headteacher, is best placed to make a decision. Following this, the parents/carers will be requested to formally consent to this course of action. **Appendix A** contains a Model of the care plan process and **Appendix B** a care plan template.

Individual Health Care Plans will be easily accessible to the team who need to refer to them, while preserving confidentiality. Plans will capture the key information and actions that are required to support the child effectively. The level of detail within plans will depend on the complexity of the child's condition and the degree of support needed. This

is important because different children with the same health condition may require very different support. Where a child has SEND but does not have an EHC plan, their SEND should be mentioned in their Individual Health Care Plan. **Appendix B** shows a template for the Individual Health Care Plan and the information needed to be included. Individual Health Care Plans may be initiated in consultation with the parent/carer, by a member of the school team or a healthcare professional involved in providing care to the child. The Individual Health Care Plan must be completed by the class teacher or learning coach with support from parents/carers, and a relevant healthcare professional, e.g. school, specialist or children's community nurse, who can best advise on the particular needs of the child. Children should also be involved whenever appropriate. The responsibility for ensuring it is finalised and implemented rests with the Executive Headteacher.

UCPS will ensure that Individual Health Care Plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed. They will be developed and reviewed with the child's best interests in mind and ensure that the UCPS team assesses and manages risks to the child's education, health and social wellbeing and minimises disruption.

**Appendix B** provides a template for the Individual Health Care Plan but it is a necessity that each one includes:

- each medical condition, its triggers, signs, symptoms and treatments
- the child'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. crowded/noisy conditions, travel time between lessons;
- specific support for the child's educational, social and emotional needs, e.g. how absences will be managed, use of rest periods or additional support in catching up with lessons, counselling sessions;
- the level of support needed (some children will be able to take responsibility for their own health needs), including in emergencies. If a child is self-managing their medication, this should be clearly stated with appropriate arrangements
- if a child refuses to self-manage their medicine or other procedures or refuses adult support with either of these, the steps to be taken need to be identified:
- monitoring who will provide this support, their training needs, expectations of their role
- and confirmation of proficiency to provide support for the child's medical condition
- from a healthcare professional, and cover arrangements for when they are not available;
- who in the school needs to be aware of the child's condition and the support required;
- arrangements for written permission from parents/carers 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 child can participate, e.g. risk assessments
- where confidentiality issues are raised by the parents/carers or child, the designated individuals to be entrusted with information about the child's condition;
- what to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an Emergency Health Care Plan prepared by their lead clinician that could be used to inform development of their Individual Health Care Plan. UCPS will not be held responsible for writing or reviewing the Emergency Health Care Plan.

## Child's Role in managing their Own Medical Needs

If it is deemed, after discussion with the parents/carers, that a child is competent to manage their own health needs and medicines, UCPS will encourage them to take responsibility for managing their own medicines and any medical procedures. This will be reflected within Individual Health Care Plans.

Wherever possible, children should be allowed to carry their own medicines and relevant devices or should be able to access their medicines for self-medication quickly and easily; these will be stored in the child's classroom (or Staff Room fridge (secure box) if the medicine requires it) to ensure that the safeguarding of other children is not compromised. UCPS also recognises that children who can take their medicines themselves or manage procedures may require an appropriate level of supervision. If a child is not able to self-medicate then relevant member of the team should help to administer medicines and manage procedures for them.

If a child refuses to take medicine or carry out a necessary procedure, the team should not force them to do so but instead follow the procedure agreed in the Individual Health Care Plan. Parents/carers should be informed, outside of the review, so that alternative options can be considered.

## Managing Medicines at UCPS

The following are the procedures to be followed for managing medicines:

Medicines should only be administered by the paediatric first aid trained member of the team and staff trained to support that specific child at UCPS when it would be:-

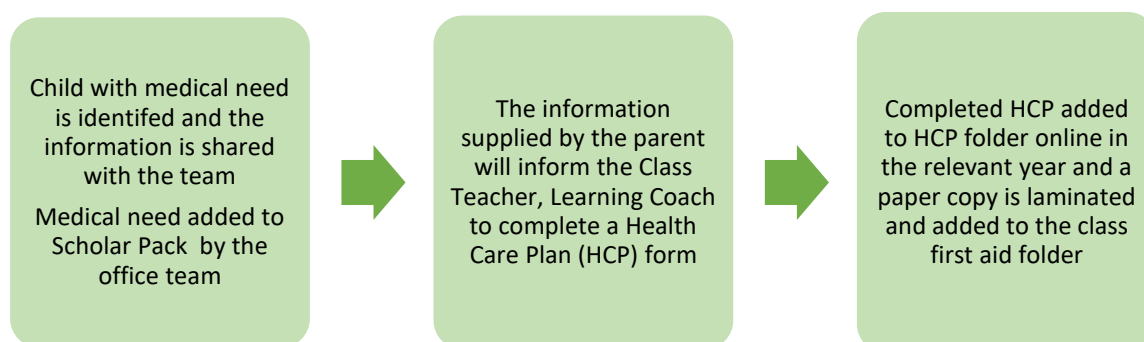
- detrimental to a child's health or school attendance not to do so
- no child should be given prescription or non-prescription medicines without their parents/carers written consent
- UCPS will only accept medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist (Prescription medication). Parent's consent must then be obtained, and the dosage measured with instructions on 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 will be stored safely in the child's classroom in the cupboard (or Staffroom fridge if the medicine requires it);
- medicines will be accessible at all times
- medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to children with a child knowing how to access them: these will be stored in the child's classroom.
- during school trips, the first aid trained member of the team in charge of first aid/or the class Teacher will carry all medical devices and medicines required;
- adults administering medicines should do so in accordance with the prescriber's recommendations.
- Any side effects of the medication to be administered at the school should be noted and in the event of such side effects, a record should be made and parents/carers informed immediately by telephone.
- The administering of medicines will be recorded on Medical Tracker. This will provide a record for the school and for parents/carers.

## Contact with Parents/Carers

Parents/carers will always be contacted if their child has suffered an 'attack' due to any medical conditions. This will normally be done by a member of the office team. However, in an emergency, an ambulance will be called first and parents/carers contacted as soon as practicably possible thereafter.

**There is no legal or contractual duty on school staff to administer medicine or to supervise a child taking it. This is a voluntary role and adults at UCPS have the right to refuse to administer any medication. While staff at UCPS have a general legal duty of care to the children, this does not extend to a requirement to routinely administer medicines. The duty of care & safeguarding does extend to medical emergencies.**

## Appendix A



### Responsibility

- Admin team to add information from the admissions form to scholar pack
- Admin team to gain as much information as possible about the medical need. Hospital and GP notes to be scanned and added to Scholar Pack
- Further information is to be obtained when necessary **Appendix B**
- Class Teacher, Learning Coach and Parents to complete the Health Care Plan asap
- All epi-pens and emergency medicines to be stored in the first aid cupboard by the classroom door, or classroom cupboard. Any second Epi-pens are to be located in the Circle Café

## Appendix B

### **Model letter inviting parents to contribute to individual healthcare plan development**

Dear Parent/Carer,

#### DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support each child needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents/carers, children, and the relevant healthcare professionals who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. We will need to make judgements about how your child's medical condition impacts on their ability to

participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

Please could you supply us with any information from medical professionals you may have. Such as letters detailing treatment , Inhaler routine when your child develops symptoms or the protocol

Yours sincerely

### Appendix C

Photo	Betsy Armstrong Skylarks
<b>Medical Condition</b>	Allergy to kiwi fruits & sesame seeds Asthmatic
<b>Child's Individual Symptoms</b>	<b>Sniffly, itchy eyes</b> <b>Tingling sensation in the tongue and swollen lips</b>
<b>Treatment</b>	<b>Administer Cetrizine (as directed by the bottle)</b> <b>If symptoms do not reduce administer Epi-Pen and dial 999</b>
<b>Times/Schedule</b>	N/A
<b>Facilities/Equipment</b>	N/A
<b>Dietary Requirements</b>	No Kiwi fruit or sesame seeds
<b>SMEH: Additional Information</b>	N/A
<b>Managed Absences Due to Medical Condition</b>	N/A
<b>Who to Contact if Child Refuses Medication</b>	Mother or Father
<b>Who Will Support Child Whilst in School</b>	Learning Coach Team
<b>Who Will Support Child When on a School Trip</b>	N/A
<b>Who Will Support Child If on a Residential</b>	N/A
<b>What To Do In An Emergency</b>	<b>If symptoms do not reduce after antihistamine administer Epi-Pen and dial 999</b>
<b>Location of Medication</b>	<b>First Aid Cupboard</b>



<b>Child to Manage own Medical Needs</b>	YES/NO
--	--------