



St Bede's

Catholic School
& Sixth Form College

Supporting Students with Medical Conditions Policy

Statutory duty - 1st September 2014



Reviewed: September 2022

St Bede's Catholic School & Sixth Form College wishes to ensure that students with medical conditions receive appropriate care and support at school. All students have an entitlement to a full-time curriculum or as much as their medical condition allows. This policy has been developed in line with the Department for Education's statutory guidance released in April 2014 and updated in December 2015 – "Supporting students at school with medical conditions" under a statutory duty from Section 100 of the Children and Families Act 2014. The statutory duty came into force on 1st September 2014.

The school will have regard to the statutory guidance issued. We take account of it; carefully consider it and we make all efforts to comply.

Ofsted places a clear emphasis on meeting the needs of students with SEN and Disabilities, also including those students with medical conditions.

Signed by:

Executive Headteacher		Date: 29.9.22
Chair of Governors		Date: 29.9.22

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1) Key roles and responsibilities

a) The Local Authority (LA) is responsible for:

- 1) Promoting co-operation between relevant partners regarding supporting students with medical conditions.
- 2) Making joint commissioning arrangements for education, health and care provision for children and young people with SEN or disabilities (Section 26 of the Children and Families Act 2014).
- 3) Providing support, advice /guidance and training to schools and their staff to ensure Individual Healthcare Plans (IHP) are effectively delivered.
- 4) Working with schools to ensure students attend full-time or make alternative arrangements for the education of students who need to be out of school for fifteen days or more due to a health need and who otherwise would not receive a suitable education.

b) The Local Governing Committee of St Bede's Catholic School & Sixth Form College is responsible for:

- 1) Ensuring arrangements are in place to support students with medical conditions to enable the fullest participation possible in all aspects of school life.
- 2) Ensuring the policy is developed collaboratively across services, clearly identifies roles and responsibilities and is implemented effectively.
- 3) Ensuring that the Supporting Students with Medical Conditions Policy does not discriminate on any grounds including, but not limited to protected characteristics: ethnicity/national/ origin, religion or belief, sex, gender reassignment, pregnancy & maternity, disability or sexual orientation.
- 4) Ensuring the policy covers arrangements for students who are competent to manage their own health needs.
- 5) Ensuring that all students with medical conditions are able to play a full and active role in all aspects of school life, participate in school visits / trips / sporting activities, remain healthy and achieve their academic potential.
- 6) Ensuring that relevant training is delivered to a sufficient number of staff who will have responsibility to support children with medical conditions and that they are

signed off as competent to do so. Staff to have access to information, resources and materials as needed.

- 7) Ensuring written records are kept of any and all, medicines administered to students.
- 8) Ensuring the policy sets out procedures in place for emergency situations.
- 9) Ensuring the level of insurance in place reflects the level of risk.
- 10) Handling complaints regarding this policy as outlined in the school's Complaints Policy.
- 11) Ensuring that children and young people with medical conditions are entitled to a full education and have the same rights of admission to school as other children. This means that no child with a medical condition can be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made. However, in line with their safeguarding duties, the governing body will ensure that a students' health is not put at unnecessary risk from, for example, infectious diseases. They therefore do not have to accept a child in school at times where it would be detrimental to the health of that child or others to do so.
- 12) Ensuring that the arrangements put in place are sufficient to meet their statutory responsibilities and that policies, plans, procedures and systems are properly and effectively implemented.

c) The Executive Headteacher is responsible for ensuring that:

- 1) the policy is developed effectively with partner agencies and then making staff aware of this policy.
- 2) The day-to-day implementation and management of the Supporting Students with Medical Conditions Policy and procedures of St Bede's Catholic School & Sixth Form College.
- 3) The relevant staff are appointed to liaise with healthcare professionals regarding the training required for staff.
- 4) Staff are identified who need to be aware of a student's medical condition.
- 5) The relevant staff are appointed to develop Individual Healthcare Plans (IHPs).
- 6) A sufficient number of trained members of staff are available to implement the policy and deliver IHPs in normal, contingency and emergency situations.

- 7) If necessary, facilitating the recruitment of staff for the purpose of delivering the promises made in this policy. Ensuring more than one staff member is identified, to cover holidays / absences and emergencies.
- 8) The correct level of insurance is in place for teachers who support students in line with this policy.
- 9) Continuous two-way liaison with school nurses and school in the case of any student who has or develops an identified medical condition.
- 10) Confidentiality and data protection is maintained in line with our procedures.
- 11) The appropriate accommodation for medical treatment/ care is available.
- 12) The school voluntarily holds a 'spare' salbutamol asthma inhalers for emergency use.
- 13) Schools, local authorities, health professionals, commissioners and other support services should work together to ensure that children with medical conditions receive a full education. 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 local authority. Consideration will also be given to how children will be reintegrated back into school after periods of absence.

d) Staff members are responsible for:

- 1) Ensuring that they read any documents or information sent to them regarding the medical condition of a student.
- 2) Taking appropriate steps to support children with medical conditions and familiarising themselves with procedures which detail how to respond when they become aware that a student with a medical condition needs help.
- 3) Familiarising themselves with the medical condition icons on SIMs/ClassCharts and ensuring that they are aware of any students with medical conditions in their class.
- 4) Taking account of the needs of students with medical conditions in lessons.
- 5) Undertaking training to achieve the necessary competency for supporting students with medical conditions, with particular specialist training if they have agreed to undertake a medication responsibility.
- 6) Allowing inhalers, adrenalin pens and blood glucose testers to be held in an accessible location, following DfE guidance.

e) SEND Lead/School nurses/First Aider in Charge are responsible for:

- 1) Collaborating on developing an IHP in anticipation of a child with a medical condition starting school.
- 2) Notifying the school when a child has been identified as requiring support in school due to a medical condition at any time in their school career.
- 3) Supporting staff to implement an IHP and then participate in regular reviews of the IHP. Giving advice and liaison on training needs.
- 4) Liaising locally with lead clinicians on appropriate support. Assisting the Executive Headteacher in identifying training needs and providers of training.
- 5) Updating the medical register and ensuring that the relevant staff have access to the information.

f) Parents and carers are responsible for:

- 1) Keeping the school informed about any new medical condition or changes to their child/children's health or medical needs.
- 2) Participating in the development and regular reviews of their child's IHP.
- 3) Completing a parental consent form to administer medicine or treatment before bringing medication into school.
- 4) Providing the school with the medication their child requires and keeping it up to date including collecting leftover medicine.
- 5) Carrying out actions assigned to them in the IHP with particular emphasis on, they or a nominated adult, being contactable at all times.

g) Students are responsible for:

- 1) Providing information on how their medical condition affects them.
- 2) Contributing to their IHP.
- 3) Complying with the IHP and self-managing their medication or health needs including carrying medicines or devices, if judged competent to do so by a healthcare professional and agreed by parents. After discussion with parents, children who are competent should be encouraged to take responsibility for managing their own medicines and procedures. This should be reflected within individual healthcare plans.
- 4) 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. Children who can take their medicines themselves or manage

procedures may require an appropriate level of supervision. If it is not appropriate for a child to self-manage, relevant staff should help to administer medicines and manage procedures for them.

2) Training of staff

- a) Newly appointed teachers, supply or agency staff and support staff will receive training on the 'Supporting Students with Medical Conditions' Policy as part of their induction.
- b) The clinical lead for each training area/session will be named on each IHP.
- c) No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the condition and signed off as competent.
- d) School will keep a record of medical conditions supported, training undertaken, and a list of teachers qualified to undertake responsibilities under this policy.
- e) Staff will have awareness training to ensure that they are aware of the school's policy for support students with medical conditions and their role in implementing the policy.
- f) Generic information to raise awareness relating to medical conditions e.g., asthma, anaphylaxis etc. are displayed in the staffroom.

3) Medical conditions register /list

- a) Schools' admissions forms should request information on pre-existing medical conditions. Parents must inform the school at any point in the school year if a condition develops or is diagnosed. Consideration could be given to seeking consent from GPs to have input into the IHP and also to share information for recording attendance.
- b) A medical conditions list or register should be kept, updated and reviewed regularly by the nominated member of staff. Each class / form tutor should have an overview of the list for the students in their care, within easy access.
- c) Supply staff and support staff should similarly have access on a need-to-know basis. Parents should be assured data protection and sharing principles are adhered to.
- d) For students on the medical conditions list, key stage transition points meetings should take place in advance of transferring to enable parents, school and health professionals to prepare IHP and train staff if appropriate.

4) Individual Healthcare Plans (IHPs)

- a) Where necessary (the Executive Headteacher will make the final decision) an Individual Healthcare Plan (IHP) will be developed in collaboration with the student, parents/carers, First Aider in charge, Executive Headteacher, Senior Assistant Headteacher and medical professionals.
- b) IHPs will be easily accessible to all relevant staff, including supply/agency staff, whilst preserving confidentiality. Staffrooms are inappropriate locations under Information Commissioner's Office (ICO) advice for displaying IHP as visitors' /parent helpers etc. may enter. If consent is sought from parents a photo and instructions may be displayed. More discreet location for storage such as Intranet or locked file is more appropriate. ***P.S. However, in the case of conditions with potential life-threatening implications the information should be available clearly and accessible to everyone.***
- c) IHPs will be reviewed at least annually or when a student's medical circumstances change, whichever is sooner.
- d) Where a student has an Education, Health and Care plan or special needs statement, the IHP will be linked to it or become part of it.
- e) Where a student is returning from a period of hospital education or alternative provision or home tuition, collaboration between the LA and school is needed to ensure that the IHP identifies the support the student needs to reintegrate.

5) Transport arrangements

- a) Where a student with an IHP is allocated school transport the school should invite a member of DCC Transport team who will arrange for the driver or escort to participate in the IHP meeting. A copy of the IHP will be copied to the Transport team and kept on the student record. The IHP must be passed to the current operator for use by the driver /escort and the Transport team will ensure that the information is supplied when a change of operator takes place.
- b) For some medical conditions the driver/ escort will require adequate training. For students who receive specialised support in school with their medical condition this must equally be planned for in travel arrangements to school and included in the specification to tender for that student's transport.
- c) When prescribed, controlled drugs need to be sent in to school, parents will be responsible for handing them over to the adult in the car in a suitable bag or container. They must be clearly labelled with name and dose etc.
- d) Controlled drugs will be kept under the supervision of the adult in the car throughout the journey and handed to a school staff member on arrival. Any change in this arrangement will be reported to the Transport team for approval or appropriate action.

6) Education Health Needs (EHN) referrals

- a) All students of compulsory school age who because of illness, lasting 15 days or more, would not otherwise receive a suitable full-time education are provided for under the local authority's duty to arrange educational provision for such students.
- b) In order to provide the most appropriate provision for the condition the EHN team accepts referrals where there is a medical diagnosis from a medical consultant.

7) Medicines

- a) Where possible, medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so
- b) no child 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.
- c) No student under 16 years of age will be given medication containing aspirin without a doctor's prescription.
- d) 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.
- e) A maximum of four weeks' supply of the medication may be provided to the school at one time.
- f) A student 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 student for use is an offence. Monitoring arrangements may be necessary. Schools should otherwise keep controlled drugs that have been prescribed for a student securely stored in a non-portable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency.
- g) School staff may administer a controlled drug to the student for whom it has been prescribed. Staff administering medicines should do so in accordance with the prescriber's instructions. Schools should keep a record of all medicines administered to individual students, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted in school.
- h) Medications will be stored in a medical cabinet in the medical room, located at Student Support. Students will 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 students.

- i) Any medications left over at the end of the course will be returned to the student's parents to arrange for safe disposal.
- j) Sharps boxes should always be used for the disposal of needles and other sharps, located in the Medical Room.
- k) Written records will be kept of any medication administered to children.
- l) Students will never be prevented from accessing their medication.
- m) Emergency salbutamol inhaler kits may be kept voluntarily by school.
- n) General posters about medical conditions (diabetes, asthma, epilepsy etc.) are recommended to be visible in the MI room.
- o) St Bede's Catholic School & Sixth Form College cannot be held responsible for side effects that occur when medication is taken correctly.
- p) Staff will not force a student, if the student refuses to comply with their health procedure, and the resulting actions will be clearly written into the IHP which will include informing parents.

8) Emergencies

- a) Medical emergencies will be dealt with under the school's emergency procedures which will be communicated to all relevant staff, so they are aware of signs and symptoms.
- b) Where a student has an individual healthcare 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 students in the school should know what to do in general terms, such as informing a teacher immediately if they think help is needed.
- c) Students will be informed in general terms of what to do in an emergency such as telling a teacher.
- d) If a student needs to be taken to hospital, a member of staff will remain with the child until their parents arrive.

9) Day trips, residential visits and sporting activities

- a) Staff must submit the finalised list of students participating in an educational visit at least two weeks before the trip is due to take place to the First Aider in Charge (Mrs E. Stemp) to that any medical conditions can be discussed.
- b) Teachers should be aware of how a student's medical condition will impact on their participation, but unambiguous arrangements should be made and be flexible enough to ensure students with medical conditions can participate in school trips, residential stays, sports activities and not prevent them from doing so unless a clinician states it is not possible.
- c) To comply with best practice risk assessments should be undertaken, in line with H&S executive guidance on school trips, in order to plan for including students with medical conditions. Consultation with parents, healthcare professionals etc. on trips and visits will be separate to the normal day to day IHP requirements for the school day.

10) Defibrillator

- a) Sudden cardiac arrest is when the heart stops beating and can happen to people of any age and without warning. If this does happen, quick action (in the form of early CPR and defibrillation) can help save lives. A defibrillator is a machine used to give an electric shock to restart a patient's heart when they are in cardiac arrest.
- b) St Bede's has purchased two defibrillators, which are located in the School Managers Office and T13, in clearly identified red backpacks.
- c) All staff members appointed as First Aiders, have received training in the use of the defibrillator. (Please refer to our Defibrillator Policy).

11) Asthma Inhalers

- a) St Bede's has a salbutamol inhaler on site for students use in emergencies only, located securely in the medical room. (Please refer to our Asthma Policy).

12) Avoiding unacceptable practice

The following behaviour is unacceptable at St Bede's Catholic School & Sixth Form College:

- a) Preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- b) Assuming that students with the same condition require the same treatment.
- c) Ignoring the views of the student and/or their parents or ignoring medical evidence or opinion.

- d) Sending students home frequently or preventing them from taking part in activities at school.
- e) Sending the student to the medical room or school office alone or with an unsuitable escort if they become ill.
- f) Penalising students with medical conditions for their attendance record where the absences relate to their condition.
- g) Making parents feel obliged or forcing parents to attend school to administer medication or provide medical support, including toilet issues.
- h) Creating barriers to children participating in school life, including school trips.
- i) Refusing to allow students to eat, drink or use the toilet when they need to in order to manage their condition.

13) Insurance

- a) Teachers who undertake responsibilities within this policy will be assured by the Executive Headteacher that are covered by the school's insurance.
- b) Full written insurance policy documents are available to be viewed by members of staff who are providing support to students with medical conditions. Those who wish to see the documents should contact the Executive Headteacher.

14) Complaints

- a) All complaints should be raised with the school in the first instance.
- b) The details of how to make a formal complaint can be found in the School Complaints Policy.

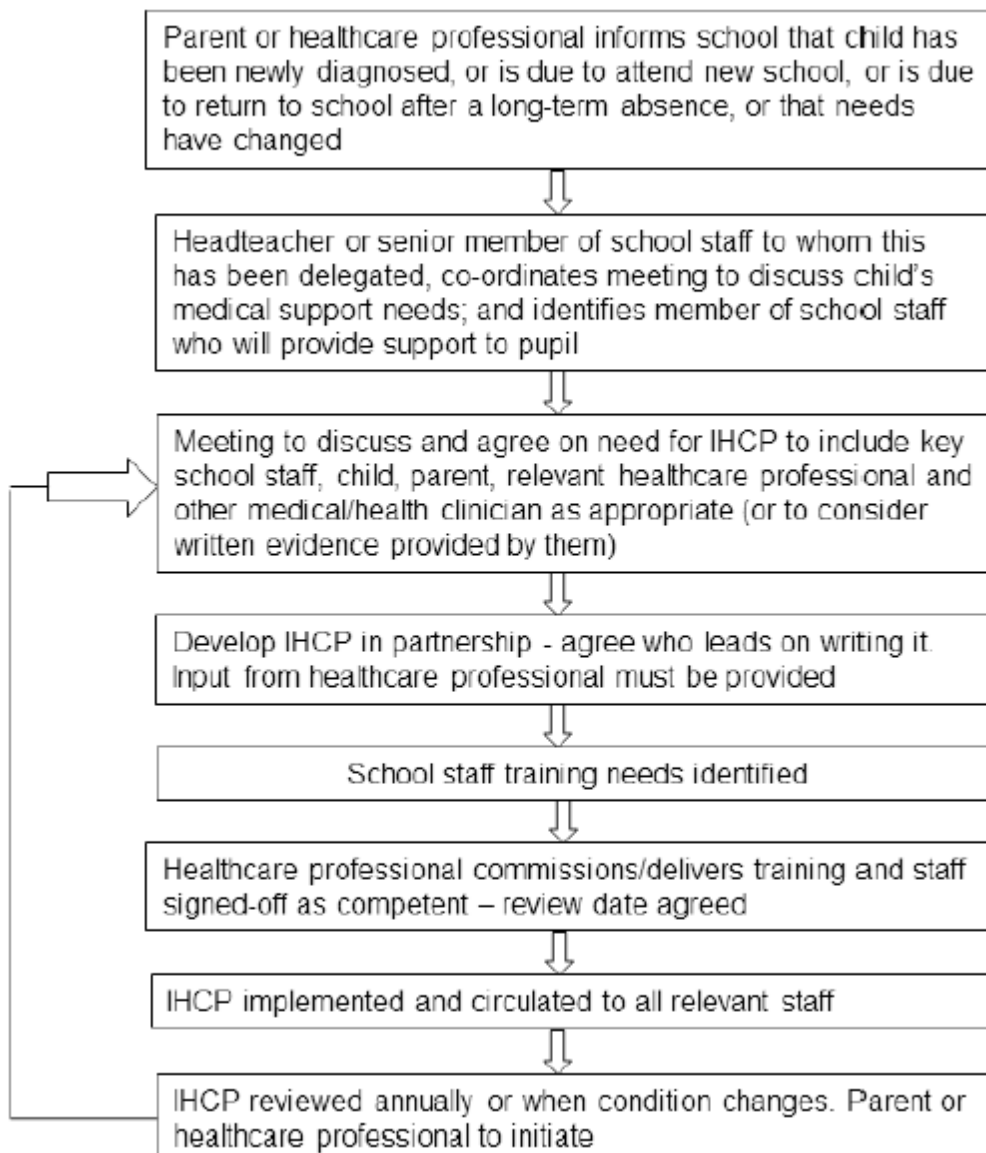
15) Definitions

- a) 'Parent(s)' is a wide reference not only to a student's birth parents but to adoptive, step and foster parents, or other persons who have parental responsibility for, or who have care of, a student.
- b) 'Medical condition' for these purposes is either a physical or mental health medical condition as diagnosed by a healthcare professional which results in the student or young person requiring special adjustments for the school day, either ongoing or intermittently. This includes a chronic or short-term condition, a long-term health need or disability, an illness, injury or recovery from treatment or surgery. *Being 'unwell' and common childhood diseases are not covered.*
- c) 'Medication' is defined as any prescribed or over the counter treatment.

- d) 'Prescription medication' is defined as any drug or device prescribed by a doctor, prescribing nurse or dentist and dispensed by a pharmacist with instructions for administration, dose and storage.
- e) A 'staff member' is defined as any member of staff employed at school.

Appendix A

Process for developing individual healthcare plans



Appendix B

Administration of Medication Consent



St Bede's
 Catholic School
 & Sixth Form College

Administration of Medication

Personal Information			
Name:		Form Group:	
D.O.B:		Teaching Group:	
Address			GP Name:
			GP Contact No:
Emergency Contact No:			

I request that my son/daughter (details given above) be given the following medication, which has been prescribed by a registered medical practitioner: *

Name of medication:	
Time(s) to be taken:	
Dosage to be taken:	
Method of administering:	

Start Date:	
End Date:	

Please read the following carefully before signing:

I understand that the medicines must be delivered personally by me to the Student Reception and that this is a service which is subject to the agreement with St. Bede's Catholic School & Sixth Form College. The above information is accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I acknowledge that school staff are not medical professionals and so can only follow the instructions which I have provided on this document. I also agree that it is the responsibility of my son/daughter to report to The Student Support Centre to receive their medication. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication. I accept that:

- Medication will not be administered by the school unless this authorisation is completed and signed by the parent/carer of the student.
- The Governors and Headteacher reserve the right to withdraw this service.
- This agreement must be renewed once the agreed end date is reached.
- All medication must be in the original containers.

* If your child requires over the counter medication e.g. paracetamol/ibuprofen please call to discuss.

Signature of student		Date	
Signature of parent		Date	
Signature of school representative		Date	

