



**The Hawksmoor Learning Trust
("the Trust")
Supporting Pupils with Medical
Conditions Policy**

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Key:

*** Publication on website:**

THLT Website		School Website	
1	Statutory publication	A	Statutory publication
2	Mandatory publication	B	Mandatory publication
3	Good practice	C	Good practice
4	Not required	D	Not required

**** Policy level:**

1. Trust wide:

- ⇒ This one policy is relevant to everyone and consistently applied across all schools and Trust departments with no variations.
 - Approved by the THLT Board of Trustees.

2. Trust core values:

- ⇒ This policy defines the values to be incorporated fully in all other policies on this subject across all schools and Trust departments. This policy should therefore form the basis of a localised school / department policy that in addition contains relevant information, procedures and / or processes contextualised to that school / department.
 - Approved by the THLT Board of Trustees as a Trust Core Values policy.
 - Approved by school / department governance bodies as a relevantly contextualised school / department policy.
 - School / department policies:
 - These are defined independently by schools / departments as appropriate.
 - Approved by school / department governance bodies.

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1. Aims

This policy ensures that pupils, staff and parents understand how The Hawksmoor Learning Trust will support pupils with medical conditions and that pupils with medical conditions receive care and support to access the same education as other pupils, including trips and sporting activities. This policy should be read alongside the Trust First Aid statement.

2. Trust Values and Principles

The Trust approach is governed by four principles: child-centred; equity-based; collaborative; aspirational.

Child-centred

- Listen to the pupil and family; place the pupil at the centre of planning.
- Create an Individual Healthcare Plan when treatment or additional care is required during the school day.

Equity-based

- Make reasonable adjustments and carry out risk assessments to reduce barriers to full participation.

Collaborative

- Work in partnership with pupils, parents and healthcare professionals in planning and delivery.

Aspirational

- Find creative solutions so pupils access learning and extracurricular activities and achieve high aspirations.

3. Legislation and Guidance

This policy meets the requirements of Section 100 of the Children and Families Act 2014 and follows the Department for Education statutory guidance Supporting pupils at school with medical conditions. It also reflects safeguarding and equality duties.

4. Roles and responsibilities

4.1 Trust Board

The Trust Board has overall responsibility for arrangements supporting pupils with medical conditions across Trust schools and will ensure sufficient staff receive training and that appropriate insurance is in place.

4.2 Headteacher

Headteachers will:

- Ensure staff awareness and implementation of this policy;
- Ensure sufficient trained staff to deliver and cover IHPs and emergencies;
- Take overall responsibility for development of IHPs at school level;
- Ensure staff insurance arrangements are communicated;
- Maintain systems for up-to-date medical information.

4.3 Medical Conditions Lead

Each school will appoint a medical conditions lead who will:

- Coordinate arrangements for pupils with medical conditions;
- Liaise with parents, staff and healthcare professionals;
- Maintain records and IHPs;
- Arrange and record staff training.

4.4 Staff

- Any member of staff may be asked to support a pupil but cannot be required to do so. Staff who agree will receive training and must demonstrate competence before providing support.
- Teachers must consider medical needs when planning and delivering lessons.

4.5 Parents / Carers

- Provide up-to-date information about the pupil's medical needs;
- Be involved in developing and reviewing IHPs;
- Supply medicines and equipment as agreed.

4.6 Pupils

- Be involved in discussions about their support and contribute to IHPs when appropriate;
- Be encouraged to manage their own medicines and devices where competent.

5. Notification and Initial Arrangements

5.1 Initial notification

When notified that a pupil has a medical condition the medical conditions lead will:

- Liaise with parents to obtain an overview and documentation;
- Request existing healthcare plans or clinical letters;
- Update the pupil record and attach supporting documents.

5.2 Timescale

The school will make every effort to put arrangements in place within two weeks or by the start of the relevant term for new pupils.

5.3 Routine conditions

For common conditions such as asthma, allergies or continence needs the school will provide the IHP template for parents to complete, unless a plan is already provided by healthcare experts. Staff will check completeness and meet parents and the pupil to jointly agree and sign the plan.

5.4 Complex conditions

For complex needs the medical conditions lead will arrange a multidisciplinary meeting including parents, pupil, headteacher, SENCo and relevant health professionals to agree the IHP and responsibilities.

6. Individual Healthcare Plans (IHPs)

6.1 Who needs an IHP

Not all pupils with medical conditions require an IHP. The decision is made with parents and, where appropriate, healthcare professionals. If a school must administer ongoing medication or specialist care during the day, an IHP is likely required.

6.2 Creation and review

IHPs will be drawn up in partnership with parents, the pupil and relevant healthcare professionals. Plans will be reviewed at least annually or sooner if needs change.

6.3 Content

IHPs will proportionately record:

- Medical condition, triggers, signs, symptoms and treatments;
- Pupil needs including medication dose, side effects and storage;
- Support for educational, social and emotional needs;
- Level of support needed, specific procedures and emergency arrangements;
- Who provides support, training needs and cover arrangements;
- Consent for medication administration and use of school emergency devices;
- Arrangements for trips and off-site activities;
- Confidentiality and information-sharing arrangements.

6.4 IHPs and EHCPs

IHPs may be linked to or form part of any Education, Health and Care Plan where applicable. Where a pupil has SEN but no EHCP, this will be referenced in the IHP.

7. Managing Medicines and Devices

7.1 General Principles

The Trust will administer prescription and non-prescription medicines where it would be detrimental to the pupil's health or attendance not do to so, where medicines cannot be scheduled outside school hours, and with written parental consent. Administration of non-prescription medicines is at the Headteacher's discretion. Children under 16 will not be given aspirin-containing medicines unless prescribed.

7.2 Acceptance of Prescribed Medicines

The school will accept medicines that are in date, labelled and in the original container with pharmacy instructions. Insulin in a pen or pump is acceptable when in date.

7.3 Storage and Access

All medicines will be stored safely. Pupils will know where medicines are and be able to access them when appropriate. Inhalers, glucose meters and adrenaline pens will be readily available and not locked away. Schools will request two emergency devices where possible: these will be kept in a named and labelled box, along with any other emergency medicine close to where the pupil is based, usually their classroom. Medicines will be kept out of sight but not locked away so that it is easily accessible when needed.

7.4 Controlled Drugs

Controlled drugs will be stored securely. A record of doses administered and amounts held will be maintained. Competent pupils may carry prescribed controlled drugs when appropriate.

7.5 Self-Management

Competent pupils will be encouraged to self-manage medicines; this will be recorded in the IHP. Staff will not force pupils to take medication and will follow the IHP and inform parents if refusal occurs.

8. Unacceptable Practice

It is not acceptable to:

- Prevent pupils accessing inhalers or medication;
- Assume identical treatment for pupils with the same condition;
- Ignore pupil or parent views;
- Send pupils home for reasons related to their condition unless specified in the IHP or unless treatment is required;
- Penalise attendance for condition-related absences;
- Require parents to attend school to administer prescribed medication;
- Administer medication in school toilets.

9. Emergency Procedures

IHPs will define emergencies and required actions. Staff will follow normal emergency procedures, including contacting emergency services. Staff will stay with the pupil until a parent arrives or accompany them to hospital if required. If the school holds emergency backup devices, they will obtain advance written parental consent for their use where applicable.

10. Training

Staff who support pupils will receive training from relevant healthcare professionals sufficient to ensure competence and confidence. Training needs will be identified during IHP development, refreshed annually and recorded. Healthcare professionals will confirm staff proficiency where required.

11. Record Keeping

A written record will be kept whenever medication is administered. IHPs will be stored in an accessible location known to relevant staff and also on the electronic pupil record. Parents will be informed if their child has been unwell at school.

12. Complaints

Parents with complaints should raise them with the Headteacher or Medical Lead in school. If unresolved they should follow the Trust complaints procedure.

13. Safeguarding

If staff have concerns that a pupil's illness may be fabricated or induced, they must follow safeguarding procedures and raise concerns with the Designated Safeguarding Lead.

14. Appendix A - Relevant Pupil Rights and References

- Statutory guidance Supporting pupils at school with medical conditions, Department for Education.
- Children and Families Act 2014 Section 100.
- Trust linked policies: safeguarding and Child Protection, Equality, First Aid and Medical

15. Appendix B: Example Individual Healthcare Plan (IHP) Template

Template A: Individual Healthcare Plan



Name of school/setting

--

Child's name

--

Group/class/form

--

Date of birth

--

Child's address

--

Medical diagnosis or condition

--

Date

--

Review date

--

Family Contact Information

Name

--

Phone no. (work)

--

(home)

--

(mobile)

--

Name

--

Relationship to child

--

Phone no. (work)

--

(home)

--

(mobile)

--

Clinic/Hospital Contact

Name

Phone no.

G.P.

Name

Phone no.

**Who is responsible for providing support
in school**

**Describe medical needs and give details of child's symptoms, triggers, signs, treatments,
facilities, equipment or devices, environmental issues etc**

**Name of medication, dose, method of administration, when to be taken, side effects, contra-
indications, administered by/self-administered with/without supervision**

Daily care requirements

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 (*state if different for off-site activities*)

--

Plan developed with

--

Staff training needed/undertaken – who, what, when

--

Form uploaded to pupil record and shared with:

Signed Parent:	Date:
Signed Medical Lead:	Date:
Signed Class Teacher	Date:

16. Appendix C: Medication Consent Form



Medication Consent Form

Staff at <school name> will not administer any medication to your child unless you have completed and signed this form.

Pupil Details			
Full Name:		Gender:	
Date of Birth:		Class:	
Address:			

Medication Details	
Reason for medication:	
Name of medication:	
Duration of medication:	
Date dispensed / first day of medication:	
<p>PLEASE NOTE THAT WE WILL ONLY ADMINISTER PARACETOMOL/ IBUPROFEN FOR A MAXIMUM OF 5 DAYS UNLESS PROVIDED WITH A DOCTOR'S NOTE.</p>	

Directions for Use/ Dosage Instructions			
Dosage:		Method (eg. spoon/syringe):	
<p>Please note that we will not exceed the dose stated on the packaging/ patient information leaflet unless advised by a doctor's note.</p>			
Timing:		Self-Administration:	YES / NO
Special precautions if any:			

Contact Details			
Name:		Relationship to child:	
Address:			
Contact telephone number:			

I confirm that the first dose has been administered at home.

I understand that all medications must be handed directly by a responsible person to a school staff member.

I understand that all medications will be stored safely and securely in school.

I accept that this is a service which the school supports but which individual staff members are not obliged to undertake.

I accept that staff will aim to administer medication at stated times and acknowledge that timings may differ slightly depending on staff capacity / situation. Timings will always be recorded.

Signed:

Date: