



Supporting Pupils with Medical Needs Policy

For all schools in the Bosco Catholic Education Trust

This Policy has been approved and adopted by the Trust Board.

Approved:	For review:
May 2022	May 2023

Bosco Catholic Education Trust Mission Statement

Bosco Catholic Education Trust is a Christ-centered family of Catholic academies, within the Diocese of Arundel and Brighton, working together as one body to provide an outstanding education for all. As Catholic schools, we endeavor to develop confident, compassionate and faithful young people. Through partnership, collaboration and mutual support, we seek to enable all those entrusted to our care to become the person God called them to be.

“Serve the Lord joyfully”

Contents

1. Aims	3
2. Legislation and statutory responsibilities	3
3. Roles and responsibilities	3
4. Equal opportunities	5
5. Being notified that a child has a medical condition.....	5
6. Individual healthcare plans	5
7. Managing medicines.....	6
8. Emergency procedures.....	7
9. Training	8
10. Record keeping.....	8
11. Liability and indemnity	8
12. Complaints	8
13. Monitoring arrangements.....	8
14. Links to other policies	8
15. Appendix 1.....	9.

Context

The Bosco Trust is committed to providing pupils with a high-quality education whatever their health needs, disability or individual circumstances. We believe that all pupils should have access to education, as their condition allows, so that they maintain the momentum of their learning whether they are attending school or going through periods of treatment and recuperation.

Trust schools will promote inclusion and make all reasonable adjustments to ensure that children and young people with a disability, health need or SEN are included in all aspects of school and pastoral life. The Trust will ensure effective partnership and collaborative working between schools, families, education services, health services, pastoral services and all agencies involved with a child or young person. These are essential to achieving the best outcomes; making certain pupils are treated as individuals and are offered the level and type of support that is most appropriate for their circumstances.

Arrangements should give learners and parents confidence that provision is suitable and effective and that the individual school as well as the Bosco Trust are committed to the continuing care of the children and young people.

1. Aims

This policy aims to ensure that:

- › Pupils, staff and parents/carers understand how the trust and each individual school will support pupils with medical conditions
- › Pupils with medical conditions will be properly supported to allow them to access the same education as other pupils, including Catholic life within the school, school trips and sporting activities.

The Trust Board will implement this policy by:

- › Ensuring that the school's local governing committees understand their responsibilities and have delegated responsibility to the appropriate member of the school leadership team.
- › Making sure sufficient staff are suitably trained
- › Making staff aware of pupil's conditions, where appropriate
- › Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- › Providing supply teachers with appropriate information about the policy and relevant pupils
- › Developing and monitoring individual healthcare plans (IHPs)

The named person with responsibility for implementing this policy in the Trust's schools is the school's Headteacher.

2. Legislation and statutory responsibilities

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on governing boards to make arrangements for supporting pupils at their schools with medical conditions.

It is also based on the Department for Education's (DfE) statutory guidance: [Supporting pupils at school with medical conditions](#).

This policy also complies with our funding agreement and articles of association.

This policy takes into account the DfE statutory guidance 'Keeping Children Safe in Education' 2021 and 'Working Together to Safeguard Children' 2018.

The document should be read in conjunction with other relevant policies including, but not limited to, the Bosco Child Protection and Safeguarding Policy and SEND Policy.

3. Roles and responsibilities

3.1 The Trust Board and Local Governing Committees

The Trust Board has ultimate responsibility to make arrangements to support pupils with medical conditions. The Trust Board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions. The Trust Board delegates responsibility for the day-to-day implementation and delivery of the policy to the Headteacher at each of the Trust's schools.

The Schools' Local Governing Committees will

- › Maintain responsibility to oversee arrangements within individual schools with regards supporting pupils with medical needs.
- › Delegate responsibility to the named person for implementing this policy, in the Trust's schools this is the school's Headteacher.

3.2 The Headteacher

The Headteacher will:

- › Make sure all staff are aware of this policy and understand their role in its implementation
- › Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- › Take overall responsibility for the development of IHPs
- › Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- › Contact the school nursing service in the case of any pupil who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse
- › Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

3.3 Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training and will achieve the necessary level of competency before doing so. Any provision will need to be delivered with care and consideration to ensure the pupil feels supported

Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

All staff will be alert to the potential need for early help for a child who has a medical condition.

The needs of the pupil and their care, both educational and emotional, will remain the primary focus. All efforts should be made to ensure the pupil has access to all aspects of school life.

3.4 Parents/Carers

Parents/carers will:

- › Provide the school with sufficient and up-to-date information about their child's medical needs
- › Be involved in the development and review of their child's IHP and may be involved in its drafting
- › Carry out any action they have agreed to as part of the implementation of the IHP e.g., provide medicines and equipment

3.5 Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs. They will be encouraged to remain as an active member of the school community and support should be given to ensure this is possible.

3.6 School nurses and other healthcare professionals

Our school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible.

Healthcare professionals, such as GPs and Pediatricians, will liaise with the schools' nurses and notify them of any pupils identified as having a medical condition.

4. Equal opportunities

Our schools are clear about the need to actively support pupils with medical conditions to participate in school trips and visits, in sporting activities, and the Catholic life of the school and not prevent them from doing so.

The schools will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents/carers and any relevant healthcare professionals will be consulted.

5. Being notified that a child has a medical condition

When a school is notified that a pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an IHP.

The schools will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to the school ensuring that the pupil feels fully supported and included in school life as much as possible.

See Appendix 1.

6. Individual healthcare plans

The Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. The Headteacher may delegate this responsibility to a responsible member of staff such as the School Welfare Officer.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents/carers when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the Headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents/carers and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any statement of special educational needs (SEN) or education, health and care (EHC) plan. If a pupil has SEND but does not have a statement or EHC plan, the SEND will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The local governing committee and the Headteacher or Welfare Officer will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil'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 corridors, travel time between lessons
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions

- › The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- › Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- › Who in the school needs to be aware of the pupil's condition and the support required
- › Arrangements for written permission from parents/carers and the Headteacher 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 pupil can participate, e.g., risk assessments
- › Where confidentiality issues are raised by the parent/carer or pupil, the designated individuals to be entrusted with information about the pupil's condition
- › What to do in an emergency, including who to contact, and contingency arrangements

7. Managing medicines

Prescription and non-prescription medicines will only be administered at school:

- › When it would be detrimental to the pupil's health or school attendance not to do so **and** where we have parents'/carers' written consent

The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents/carers.

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents/carers will always be informed.

On 1st October 2014 the Human Medicines (Amendment) (No 2) Regulations 2014 has allowed schools to buy salbutamol inhalers, without a prescription, for use in emergencies. [Emergency asthma inhalers for use in school-Gov.UK\(www.gov.uk/government/publications/using-emergency-asthma-inhalers-for-use-in-schools\)](http://www.gov.uk/government/publications/using-emergency-asthma-inhalers-for-use-in-schools)

On the 1st October 2017 this was extended to the use of Adrenaline Auto-Injectors(AAIs) [Using emergency auto-injectors in schools -Gov.UK \(www.gov.uk/government/publications/using-emergency-adrenaline-auto-injectors-in-schools\)](http://www.gov.uk/government/publications/using-emergency-adrenaline-auto-injectors-in-schools)

All medicines should be stored safely to prevent inappropriate access. 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 such as asthma inhalers, blood glucose testing meters and adrenaline pens should always be readily available to children and not locked away. This is particularly important to consider when outside of the setting such as an off-site visit.

The school will only accept prescribed medicines that are:

- › In-date
- › Labelled
- › Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date. It is good practice to provide two (in-date) adrenaline auto-injectors.

Medicines will be returned to parents/carers to arrange for safe disposal when no longer required.

7.1 Controlled drugs

[Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

A pupil who has been prescribed a controlled drug must submit the information to the Welfare officer, the tablets are signed for and counted and locked in medical room. Pupil has permission to access as and when prescribed. All other controlled drugs are kept in a secure cupboard in the school office and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

7.2 Pupils managing their own needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents/carers and it will be reflected in their IHPs.

Pupils will be allowed to carry their own medicines and relevant devices wherever possible. Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform parents/carers so that an alternative option can be considered, if necessary.

7.3 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable to:

- › Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- › Assume that every pupil with the same condition requires the same treatment
- › Ignore the views of the pupil or their parents/carers
- › Ignore medical evidence or opinion (although this may be challenged)
- › Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- › If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- › Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- › Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- › Require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupil, including with toileting issues. No parent/carer should have to give up working because the school is failing to support their child's medical needs
- › Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents/carers to accompany their child
- › Administer, or ask pupils to administer, medicine in school toilets

8. Emergency procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent/carer arrives, or accompany the pupil to hospital by ambulance.

9. Training

The Trust will ensure that individual schools staff who are responsible for supporting pupils with medical needs receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Headteacher. Training will be kept up to date.

Training will:

- › Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
- › Fulfil the requirements in the IHPs
- › Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures
- › How best to support the emotional wellbeing of the pupil and ensure inclusion where possible.

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

10. Record keeping

The Trust Board will ensure that written records are kept by schools of all medicine administered to pupils. Parents/carers will be informed if their pupil has been unwell at school.

IHPs are kept in a readily accessible place which all staff are aware of.

11. Liability and indemnity

Bosco Trust Board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

We are a member of the DfE's risk protection arrangement (RPA) who will provide liability cover relating to the administration of medication and relevant medical procedures.

12. Complaints

Parents/carers with a complaint about their child's medical condition should discuss these directly with the Headteacher in the first instance. If the Headteacher cannot resolve the matter, they will direct parents/carers to the school's complaints procedure.

13. Monitoring arrangements

This policy will be reviewed and approved by the Trust Board annually.

14. Links to other policies

This policy links to the following policies:

- › Accessibility plan
- › Child Protection and Safeguarding
- › Complaints
- › Equality information and objectives
- › First aid

- Health and safety
- Special educational needs and disability

Appendix 1: Being notified a child has a medical condition

