Green Shoots Federation

Medical Policy and Procedures

Formally adopted by the Governing Board of:-	**Green Shoots Federation**
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Chair of Governors:-	**Tim Jermyn**
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** Throughout this document, the term 'parent' implies any person or body with parental responsibility such as foster parent, carer, guardian or local authority.*

Policy statement

St John's and Tunstead schools are both inclusive schools that aim to support and welcome pupils with medical conditions.

All staff aim to provide all pupils with all medical conditions the same opportunities as others at school.

We will help to ensure your child is:

- **healthy**
- **safe**
- **able to enjoy and achieve**
- **able to make a positive contribution**
- **looked after appropriately in the event of an emergency as all staff know and understand their duty of care**
- **created appropriately in the event of an emergency by staff who have received the appropriate training**
- **cared for by staff who understand that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood**
- **supported by staff who understand the importance of medication being taken as prescribed**
- **taught by and looked after by staff who understand the common medical conditions that can affect children**
- **taught and looked after by staff who have had training regarding the impact medical conditions can have on pupils**

Policy framework

1. Green Shoots Federation is an inclusive Federation that aims to support and welcome pupils with medical conditions.

2. Green Shoots medical conditions policy is drawn up in consultation with members of the school community.

3. The medical conditions policy is supported by a clear communication plan for staff, parents* and members of the local community.

4. All staff understand and are trained in what to do in an emergency for the most common serious medical conditions.

5. All staff understand and are trained in the school's general emergency procedures.

6. All staff have clear guidance on the administration of medication at school.

7. All staff have clear guidance on the storage of medication at school.

8. All staff have clear guidance about record keeping.

9. All staff ensure that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.

10. All staff are aware of the common triggers that can make common medical conditions worse or can bring on an emergency. The schools are continually working towards reducing or eliminating these health and safety risks.

11. Each member of the school and health community knows their roles and responsibilities in maintaining and implementing an effective medical conditions policy.

12. The medical conditions policy is reviewed, evaluated and updated annually. Updates are produced every year.

Policy and guidelines

1. **St John's and Tunstead are inclusive communities that aims to support and welcome pupils with medical conditions**

a. All staff at St John's and Tunstead understand that they have a responsibility to make the school welcoming and supportive to pupils with medical conditions who currently attend and to those who may enroll in the future.

b. All staff aim to provide every child with any medical conditions the same opportunities as others at school. We will help to ensure they can:

+ be healthy
+ stay safe
+ enjoy and achieve
+ make a positive contribution
+ achieve economic well-being.

c. If appropriate, pupils with medical conditions are encouraged to take control of their condition. Pupils will feel confident in the support they receive from the school to help them do this.

d. All staff aim to include every pupil with medical conditions in all school activities.

e. Parents and carers of pupils with medical conditions feel secure in the care their children receive at Green Shoots Federation.

f. The school ensures all staff understand their duty of care to children and young people in the event of an emergency.

g. All staff feel confident in knowing what to do in an emergency.

h. All staff understand that certain medical conditions are serious and can be potentially life-threatening, particularly if ill managed or misunderstood.

i. All staff understand the common medical conditions that affect children at our schools. Staff receive training on the impact this can have on pupils.

j. The medical conditions policy is understood and supported by the whole school and local health community.

2. The Medical Conditions Policy has been drawn up in consultation with members of the school community

a. All staff have been consulted on the development of this medical condition policy. Other people with whom consultation has taken place include:

+ pupils with medical conditions
+ parents

+ head teacher
+ teachers
+ special educational needs coordinator
+ Inclusion worker
+ members of staff trained in first aid
+ all other school staff

b. The views of pupils with various medical conditions were actively sought and considered central to the consultation process.

c. Consultation was held in two phases:

+ initial consultation during development of the policy
+ comments on a draft policy before publication.

d. All staff recognise the importance of providing feedback to those involved in the development process and are committed to acknowledging input and providing follow-up to suggestions put forward.

3. The medical conditions policy is supported by a clear communication plan for staff and parents to ensure its full implementation

a. Pupils are informed and regularly reminded about the medical conditions policy:

- **through the school council**
- **in the school newsletter at several intervals in the school year**
- **in personal, social and health education (PSHE) classes**
- **through school-wide communication about results of the monitoring and evaluation of the policy.**

b. Parents are informed and regularly reminded about the medical conditions policy:

- **by including the policy statement in the school's prospectus and signposting access to the policy**
- **at the start of the school year when communication is sent out about Healthcare Plans**
- **in the school newsletter at several intervals in the school year when their child is enrolled as a new pupil**
- **via the school's website, where it is available all year round**
- **through school-wide communication about results of the monitoring and evaluation of the policy.**

c. School staff are informed and regularly reminded about the medical conditions policy:

- ***through updated policy e-mailed to all members of staff at beginning of school year***

- ***at scheduled medical conditions training***
- ***through the key principles of the policy being displayed in several prominent staff areas***
- ***through school-wide communication about results of the monitoring and evaluation of the policy***
- ***all supply and temporary staff are informed of the policy and their responsibilities***

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d. Relevant local health staff are informed and regularly reminded about the school's medical conditions policy:

- **by e-mail to all parents / carers of children at school**
- **via primary care trust (PCT) links and the community nurse**
- **through communication about results of the monitoring and evaluation of the policy.**

4. All staff understand and are trained in what to do in an emergency for the most common serious medical conditions

a. All staff at St John's and Tunstead are aware of the most common serious medical conditions presented by pupils at the school

b. All staff at St John's and Tunstead understand their duty of care to pupils in the event of an emergency. In an emergency situation school staff are required under common law duty of care to act like any reasonably prudent parent. This may include administering medication.

c. All staff who work with groups of pupils at St John's and Tunstead receive training and know what to do in an emergency for the pupils in their care with medical conditions.

d. Training is refreshed for all staff every 3 years.

e. Health Care Plans for specific children are displayed for all staff in several locations including classrooms, the school office and the staff room.

f. All staff at St John's and Tunstead use Healthcare Plans to inform the appropriate staff (including supply teachers and support staff) of pupils in their care who may need emergency help.

g. At St John's and Tunstead, there are procedures in place so that a copy of the pupil's Healthcare Plan is sent to the emergency care setting/ hospital with the pupil. On occasions when this is not possible, the form is sent (or the information on it is communicated) to the emergency care setting /hospital as soon as possible.

5. All staff understand and are trained in the school's general emergency procedures

a. All staff know what action to take in the event of a medical emergency. This includes:

- **how to contact emergency services and what information to give**
- **who to contact within the school.**

b. Training is refreshed for most staff every 3 years.

c. Action to take in a general medical emergency is displayed in prominent locations for staff. These include classrooms, the staff room and food preparation areas.

d. If a pupil needs to be taken to hospital, a member of staff will always accompany them and will stay with them until a parent arrives. The school tries to ensure that the staff member will be one the pupil knows.

e. Generally, staff should not take pupils to hospital in their own car.

f. If this is unavoidable, 2 members of staff will accompany the child to hospital The member of staff to whom the car belongs will be responsible for ensuring they have the correct car insurance to do this.

6. The school has clear guidance on the administration of medication at school

Administration – emergency medication

a. All pupils at St John's and Tunstead with medical conditions have **easy access to their emergency medication**.

b. All pupils are encouraged to carry and administer their own emergency medication, when their parents and health specialists determine they are able to start taking responsibility for their condition. All pupils carry their emergency medication with them at all times, except if they are controlled drugs as defined in the Misuse of Drugs Act 1971. This is also the arrangement on any off-site or residential visits.

c. Pupils who do not carry and administer their own emergency medication know where their medication is stored and how to access it.

d. Pupils who do not carry and administer their own emergency medication understand the arrangements for a member of staff (and the reserve member of staff) to assist in helping them take their medication safely.

Use of emergency salbutamol inhaler in school

Since 1st October 2014, schools have been allowed to keep a salbutamol inhaler for use in emergencies when a child with asthma cannot access their own inhaler.
The inhaler can be used if the child's prescribe inhaler is not available, e.g. because it is broken or empty).
Keeping an inhaler for emergency use will have many benefits. It could prevent an unnecessary and traumatic trip to hospital for a child and potentially save their life.
The salbutamol inhaler should only be used by children for whom parental consent (Appendix 2) has been given and who have either been diagnosed with asthma or

who have been prescribed an inhaler as emergency medication.
A record of the administration of the emergency inhaler must be recorded and a letter sent to parents (Appendix 3).
For further information on using emergency inhalers, please refer to Emergency asthma inhalers for use in school – www.gov.uk published by the Department of Health.

Administration – general

e. All use of medication defined as a controlled drug, even if the pupil can administer the medication themselves, is done under the supervision of a member of staff at St John's or Tunstead.

f. All staff understand the importance of medication being taken as prescribed.

g. All staff are aware that there is no legal or contractual duty for any member of staff to administer medication or supervise a pupil taking medication unless they have been specifically contracted to do so.

h. Many other members of staff are happy to take on the voluntary role of administering medication. For medication where no specific training is necessary, any member of staff may administer prescribed and non-prescribed medication to pupils under the age of 16, but only with the written consent of the pupil's parent.

i. Training is given to all staff members who agree to administer medication to pupils, where specific training is needed. The local authority provides full indemnity.

j. All school staff have been informed through training that they are required, under common law duty of care, to act like any reasonably prudent parent in an emergency situation. This may include taking action such as administering medication.

l. Parents understand that if their child's medication changes or is discontinued, or the dose or administration method changes, that they should notify the school immediately.

m. If a pupil refuses their medication, staff know to record this and follow procedures. Parents are informed as soon as possible.

n. If a pupil needs supervision or access to medication during home to school transport organised by the local authority, properly trained escorts are provided. All drivers and escorts have the same training as school staff, know what to do in a medical emergency and are aware of any pupils in their care who have specific needs.

o. All staff attending off-site visits are aware of any pupils with medical conditions on the visit. They receive information about the type of condition, what to do in an emergency and any other additional support necessary, including any additional

medication or equipment needed. Copies of Healthcare plans will be taken on all off-site visits by the visit leader.

p. If both trained members of staff, who are usually responsible for administering medication, are not available, the Headteacher will make alternative arrangements to provide the service. This is always addressed in the risk assessment for off-site activities.

7. All staff have clear guidance on the storage of medication at school

Safe storage – emergency medication

a. Emergency medication is readily available to pupils who require it at all times during the school day or at off-site activities. If the emergency medication is a controlled drug and needs to be locked up, the keys are readily available and not held personally by members of staff.

b. Where appropriate, pupils carry their emergency medication on them at all times. Pupils keep their own emergency medication securely.

c. Pupils, whose healthcare professionals and parents advise the school that their child is not yet able or old enough to self-manage and carry their own emergency medication, know exactly where to access their emergency medication.

Safe storage – non-emergency medication

d. Each teacher is responsible for the correct storage of medication for the children in their class.

e. Staff ensure that medication is only accessible to those for whom it is prescribed.

Safe storage – general

f. All controlled drugs are kept in a locked cupboard and all staff have access, even if pupils normally administer the medication themselves.

g. All members of staff, along with the parents of pupils with medical conditions will ensure that all emergency and non-emergency medication brought in to school is clearly labeled with the pupil's name, the name and dose of the medication and the frequency of dose. Both parties are responsible for checking that the medicine is in date.

h. All medication is supplied and stored, wherever possible, in its original containers. All medication is labelled with the pupil's name, the name of the medication, expiry date and the prescriber's instructions for administration, including dose and frequency. All non-emergency medication is stored in a sealed bag also labelled with the child's name and including the written consent form and the medication. The top

of the packaging will also be marked with the child's name.

i. Medication is stored in accordance with instructions, paying particular note to temperature.

j. Some medication for pupils may need to be refrigerated. All refrigerated medication is kept in the staff room fridge. It will be stored in an airtight container and clearly labelled. Refrigerators used for the storage of medication are in a secure area, inaccessible to unsupervised pupils or lockable as appropriate.

k. All medication is sent home with pupils at the end of the school year. Medication is not stored in summer holidays.

l. It is the parent's responsibility to ensure new and in date medication comes into school on the first day of the new academic year.

m. The emergency salbutamol inhaler is held in the School Office.

Safe disposal

m. Parents of pupils with medication stored will be asked to collect out-of-date medication.

n. If parents do not pick up out-of-date medication, or at the end of the school year, medication will be taken to a local pharmacy for safe disposal.

o. Sharps boxes are used for the disposal of needles. Parents obtain sharps boxes from the child's GP or pediatrician on prescription. All sharps boxes at St John's are stored in a safe and secure place unless arrangements are put in place on a case-by-case basis.

p. If a sharps box is needed on an off-site or residential visit, a named member of staff is responsible for its safe storage and return to a local pharmacy or to school or the pupil's parent. This will be recorded on the risk assessment form by the visit leader.

q. Collection and disposal of sharps boxes is arranged with parents.

8. All staff have clear guidance about record keeping

Admission forms

a. Parents of pupils are asked if their child has any health conditions or health issues on the admission form, which is filled out when the child begins at school.

Healthcare Plans

b. If a child is given a Healthcare Plan as a result of a long term medical condition, it

is the responsibility of the parents to provide school with a copy of this.

+ at the start of the school year
+ at admission
+ when a diagnosis is first communicated to the school.

c. If a pupil has a short-term medical condition that requires medication during school hours, parents will be asked to fill out the Medication in School form – see Appendix 10

School Healthcare Plan register

d. Healthcare Plans are used to create a centralised register of pupils with medical needs. The SENDCo will have responsibility for this, alongside another member of staff.

e. The responsible members of staff will follow up with the parents any further details on a pupil's Healthcare Plan required or if permission for administration of medication is unclear or incomplete.

Ongoing communication and review of Healthcare Plans

f. Parents of pupils with Healthcare plans will be requested to update their child's Healthcare Plan if their child has a medical emergency or if there have been changes to their symptoms (getting better or worse), or their medication and treatments change.

g. Staff will use opportunities such as teacher–parent interviews and home–school diaries to check that information held by the school on a pupil's condition is accurate and up to date.

Storage and access to Healthcare Plans

h. All members of staff who work with groups of pupils have access to the Healthcare Plans of pupils in their care.

i. Healthcare plans are prominently placed at strategic places throughout the school. Teachers of pupils with a Healthcare plan will keep a copy of that pupil's Healthcare plan.The Healthcare plan will be readily available for any adult working in that class.
j. All staff adhere to the rules regarding pupil confidentiality.

k. Permission from parents to allow the Healthcare Plan / Medication in School Form (Appendix 1) to be sent ahead to emergency care staff, should an emergency happen during school hours or at a school activity outside the normal school day, is included on both forms.

Use of Healthcare Plans and Medication in School Form (Appendix 1)

Healthcare Plans will be used to:

- **inform the appropriate staff and supply teachers about the individual needs of a pupil with a medical condition in their care**
- **remind pupils with medical conditions to take their medication when they need to and, if appropriate, remind them to keep their emergency medication with them at all times**
- **identify common or important individual triggers for pupils with medical conditions at school that bring on symptoms and can cause emergencies. All staff at St John's and Tunstead will use this information to help reduce the impact of common triggers**
- **ensure that all medication stored at school is within the expiry date**
- **ensure any local emergency care services have a timely and accurate summary of a pupil's current medical management and healthcare in the event of an emergency**
- **remind parents of pupils with medical conditions to ensure that any medication kept at school for their child is within its expiry dates. This includes spare medication.**

Consent to administer medicines

l. If a pupil requires regular prescribed or non-prescribed medication at school, parents are asked to provide consent on Medication in School form (Appendix 1) giving staff permission to administer medication on a regular/daily basis, if required.

m. All parents of pupils with a medical condition who may require medication in an emergency are asked to provide consent on the Medication in School form (Appendix 1) for staff to administer medication.

n. If a pupil requires regular/daily help in administering their medication this is outlined on the Healthcare plan / Medication in School form (Appendix 1)

Residential visits

o. Parents are sent a residential visit form to be completed and returned to school shortly before their child leaves for an overnight or extended day visit. This form, issued by the off-site provider, e.g. Hautbois Activity Centrerequests up-to-date information about the pupil's current condition and their overall health. This provides essential and up-to-date information to relevant staff to help the pupil manage their condition while they are away. This includes information about medication not normally taken during school hours. In addition, parents will need to complete the school medication form – Appendix 1

p. All residential visit forms are taken by the visit leader on visits and for all out-of-school hours activities where medication is required. These are accompanied by a copy of the pupil's Healthcare Plan / Medication in School Form (Appendix 1).

q. Staff who agree to go on residential visits must be aware that pupils going on the trip may require medication to be administered during the night / in the morning.

Other record keeping

r. An accurate record of each occasion an individual pupil is given or supervised taking medication will be kept. Details of the supervising staff member, pupil, dose, date and time are recorded. If a pupil refuses to have medication administered, this is also recorded and parents are informed as soon as possible.
See Appendix 1

s. All staff at St John's and Tunstead have received training on First Aid and common medical conditions every 3 years. All staff attending receive a certificate confirming the type of training they have had. A log of the medical condition training and First Aid training is kept by the school and reviewed every 12 months to ensure all new staff receive training.

t. If pupils are identified who have new conditions which require specialist medical treatment, specific training will be given by Health professionals.

u. All school staff who volunteer to administer medication will be provided with training by a healthcare professional. The school keeps a central register of staff who have had the relevant training.

v. Every child with asthma should ideally have a Personal Asthma Action Plan (Appendix 4). These will be requested when a child starts school and thereafter annually.

9. All staff at Green Shoots ensure that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities

Physical environment

a. All staff are committed to providing a physical environment that is accessible to pupils with medical conditions.

b. Pupils with medical conditions are included in the consultation process to ensure the physical environment is accessible.

c. Staff also recognise that the commitment to providing an accessible physical environment includes out-of-school visits. It is recognised that this may sometimes means changing activities or locations.

Social interactions

d. All staff at ensure the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured social activities, including during breaks and before and after school.

e. All staff ensure the needs of pupils with medical conditions are adequately

considered to ensure they have full access to extended school activities such as school discos, school productions, after school clubs and residential visits.

f. All staff at are aware of the potential social problems that pupils with medical conditions may experience. Staff use this knowledge to try to prevent and deal with problems in accordance with the school's anti-bullying and behaviour policies.

g. Staff use opportunities such as personal, social and health education (PSHE) lessons to raise awareness of medical conditions amongst pupils and to help create a positive social environment.

Exercise and physical activity

h. All staff understand the importance of all pupils taking part in sports, games and activities.

i. Class teachers and the Headteacher will ensure that all visitors to the school who provide extracurricular events make appropriate adjustments to sports, games and other activities to make physical activity accessible to all pupils. They will also be made aware of the potential triggers for pupils' medical conditions when exercising and how to minimize these triggers.

j. All staff understand that pupils should not be forced to take part in an activity if they feel unwell and should inform the adult in charge accordingly.

k. Teachers and sports coaches will be made aware of pupils in their care who have been advised to avoid or to take special precautions with particular activities.

l. Adults teaching pupils with a Healthcare Plan will ensure they have the appropriate medication or food with them during physical activity and that pupils take them when needed. A copy of the Healthcare Plan will be taken with the child whenever they leave the classroom.

m. All staff ensure all pupils with medical conditions are actively encouraged to take part in out-of-school clubs and team sports.

Education and learning

n. All staff ensure that pupils with medical conditions can participate fully in all aspects of the curriculum and that appropriate adjustments and extra support are provided where necessary.

o. If a pupil is missing a lot of time at school, they have limited concentration or they are frequently tired, all teachers will be supported to understand that this may be due to their medical condition.

p. Teachers are aware of the potential for pupils with medical conditions to have special educational needs (SEN). Pupils with medical conditions who are finding it difficult to keep up with their studies will be referred to the SENDCo. The school's SENDCo will consult with the pupil, parents and the pupil's healthcare professional

to ensure the effect of the pupil's condition on their schoolwork is properly considered.

q. All staff will ensure that lessons about common medical conditions are incorporated into PSHE lessons and other parts of the curriculum.

10. All staff are aware of the common triggers that can make medical conditions worse or can bring on an emergency. The schools are actively working towards reducing or eliminating these health and safety risks and has a written schedule of reducing specific triggers to support this

a. All staff are committed to reducing the likelihood of medical emergencies by identifying and reducing triggers both at school and on out-of-school visits.

b. School staff have been given training on medical conditions. This training includes detailed information on how to avoid and reduce exposure to common triggers for common medical conditions.

c. All staff use Healthcare Plans to identify individual pupils who are sensitive to particular triggers. The school has a detailed action plan to ensure these individual pupils remain safe during all lessons and activities throughout the school day.

d. The school reviews medical emergencies and incidents to see how they could have been avoided. Appropriate changes to policy and procedures can be implemented after each review.

11. Each member of the school and health community knows their roles and responsibilities in maintaining an effective medical conditions policy

a. All staff work in partnership with all interested and relevant parties including the school's governing body, all school staff, parents, employers, community healthcare professionals and pupils to ensure the policy is planned, implemented and maintained successfully.

b. The following roles and responsibilities are used for the medical conditions policy. These roles are understood and communicated regularly.

<u>Employer</u>

Green Shoots employer has a responsibility to:

- **ensure the health and safety of their employees and anyone else on the premises or taking part in school activities (this includes all pupils). This responsibility extends to those staff and others leading activities taking place off-site, such as visits, outings or field trips**
- **ensure health and safety policies and risk assessments are inclusive of the needs of pupils with medical conditions**

- **make sure the medical conditions policy is effectively monitored and evaluated and regularly updated**
- **report to parents, pupils, school staff and the local authority about the successes and areas for improvement of the medical conditions policy**
- **provide indemnity for staff who volunteer to administer medication to pupils with medical conditions.**

Head teacher

The Headteacher has a responsibility to:

- **ensure the school is inclusive and welcoming and that the medical conditions policy is in line with local and national guidance and policy frameworks**
- **liaise between interested parties including pupils, school staff, special educational needs coordinators, pastoral support/welfare officers, teaching assistants, , parents, governors, the school health service, the local authority transport service, and local emergency care services**
- **ensure the policy is put into action, with good communication of the policy to all**
- **ensure every aspect of the policy is maintained**
- **ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place using pupils' Healthcare Plans and Medication in School form (Appendix 1)**
- **ensure pupil confidentiality**
- **assess the training and development needs of staff and arrange for them to be met**
- **ensure all supply teachers and new staff know the medical conditions policy**
- **ensure staff check the expiry date of medicines kept at school and maintain the school medical conditions register**
- **monitor and review the policy at least once a year, with input from pupils, parents and staff**
- **update the policy at least once a year according to review recommendations and recent local and national guidance and legislation**

All staff

All staff have a responsibility to:

- **be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency**
- **understand the school's medical conditions policy**
- **know which pupils in their care have a medical condition and be familiar with the content of the pupil's Healthcare Plan and Medication in School Form (Appendix 1)**
- **allow all pupils to have immediate access to their emergency medication**

- **maintain effective communication with parents including informing them if their child has been unwell at school**
- **ensure pupils who carry their medication with them have it when they go on a school visit or out of the classroom**
- **be aware of pupils with medical conditions who may be experiencing bullying or need extra social support**
- **understand the common medical conditions and the impact it can have on pupils (pupils should not be forced to take part in any activity if they feel unwell)**
- **ensure all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in**
- **ensure pupils have the appropriate medication or food with them during any exercise and are allowed to take it when needed.**

Teachers

Teachers have a responsibility to:

- **ensure pupils who have been unwell catch up on missed school work**
- **be aware that medical conditions can affect a pupil's learning and provide extra help when pupils need it**
- **liaise with parents, the pupil's healthcare professionals, special educational needs coordinator and Inclusion worker if a child is falling behind with their work because of their condition**
- **use opportunities such as PSHE and other areas of the curriculum to raise pupil awareness about medical conditions.**

First aiders

First aiders have a responsibility to:

- **give immediate help to casualties with common injuries or illnesses and those arising from specific hazards with the school**
- **when necessary ensure that an ambulance or other professional medical help is called.**

Special educational needs / Disability coordinator (SENDCo)

The SENDCo has the responsibility to:

- **update the school's medical condition policy alongside the Headteacher**
- **know which pupils have a medical condition and which have special educational needs because of their condition**
- **work alongside the Head and teachers to make the necessary arrangements if a pupil needs special consideration or access arrangements in exams.**

Pastoral support

The Inclusion worker has the responsibility to:

- **know which pupils have a medical condition and which have special educational needs because of their condition**
- **ensure all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in.**

Pupils

The pupils have a responsibility to:

- **treat other pupils with and without a medical condition equally**
- **tell their parents, teacher or nearest staff member when they are not feeling well**
- **let a member of staff know if another pupil is feeling unwell**
- **let any pupil take their medication when they need it, and ensure a member of staff is called**
- **treat all medication with respect**
- **know how to gain access to their medication in an emergency**
- **if mature and old enough, know how to take their own medication and to take it when they need it**
- **ensure a member of staff is called in an emergency situation.**

Parents*

The parents of a child have a responsibility to:

- **stetensure the school has a complete and up-to-date Healthcare Plan for their child**
- **inform the school about the medication their child requires during school hours and fill in Medication in School Form Appendix 1)inform the school of any medication their child requires while taking part in visits, outings or field trips and other out-of-school activities**
- **tell the school about any changes to their child's medication, what they take, when, and how much**
- **inform the school of any changes to their child's condition**
- **ensure their child's medication and medical devices are labelled with their child's full name**
- **provide the school with appropriate spare medication labelled with their child's name**
- **ensure that their child's medication is within expiry dates**
- **keep their child at home if they are not well enough to attend school**
- **ensure their child catches up on any school work they have missed**
- **ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional**

12. The medical conditions policy is regularly reviewed evaluated and updated.

Updates are produced every year

a. This medical condition policy will be reviewed, evaluated and updated every year in line with the school's policy review timeline.

b. In evaluating the policy, the relevant staff will seek feedback on the effectiveness and acceptability of the medical conditions policy with a wide-range of interested parties within the school and health settings. These can include:

+ *pupils*
+ *parents*
+
+ *headteacher*
+ *teachers*
+ *special education needs coordinator*
+ *Inclusion worker*
+ *first aider*
+ *all other school staff*
+ *local emergency care service staff (including accident & emergency and ambulance staff)*
+ *local health professionals*
+ *the school employe*

Legislation and guidance

Introduction

+ Local authorities, schools and governing bodies are responsible for the health and safety of pupils in their care.
+ Areas of legislation that directly affect a medical conditions policy are described in more detail in Managing Medicines in Schools and Early Years Settings. The main pieces of legislation are the Disability Discrimination Act 1995 (DDA), amended by the Special Educational Needs and Disability Act 2001 (SENDA) and the Special Educational Needs and Disability Act 2005. These acts make it unlawful for service providers, including schools, to discriminate against disabled people.
Other relevant legislation includes the Education Act 1996, the Care Standards Act 2000, the Health and Safety at Work Act 1974, the Management of Health and Safety at Work Regulations 1999 and the Medicines Act 1968.
This section outlines the main points from the relevant legislation and guidance that schools should consider when writing a medical conditions policy.

Managing Medicines in Schools and Early Years Settings (2004)

This provides guidance from the DfES (now DfE) and DH on managing medicines in schools and early years settings. The document includes the
following chapters:
+ developing medicines policies
+ roles and responsibilities
+ dealing with medicines safely
+ drawing up a Healthcare Plan
+ relevant forms.

Medical Conditions at School: A Policy Resource Pack is designed to work alongside Managing Medicines in Schools and Early Years Settings.

Disability Discrimination Act 1995 (DDA) and the Special Educational Needs and Disability Acts (2001 and 2005)

+ Many pupils with medical conditions are protected by the DDA and SENDA, even if they don't think of themselves as 'disabled'.
+ The Commission for Equality and Human Rights (CEHR) (previously the Disability Rights Commission) publishes a code of practice for schools, which sets out the duties under the DDA and gives practical guidance on reasonable adjustments and accessibility. The CEHR offers information about who is protected by the DDA, schools' responsibilities and other specific issues.

Schools' responsibilities include:

+ not to treat any pupil less favourably in any school activities without material and sustainable justification
+ to make reasonable adjustments that cover all activities – this must take into consideration factors such as financial constraints, health and safety requirements and the interests of other pupils. Examples of reasonable adjustments can be found

in the DfES resource: Implementing the DDA in Schools and Early Years Settings*
+ to promote disability equality in line with the guidance provided by the DfE and CEHR through the Disability Equality Scheme.
*DfES publications are available through the DfE

The Education Act 1996

Section 312 of the Education Act covers children with special educational needs, the provisions that need to be made and the requirements local health services need to make to help a local authority carry out its duties.

The Care Standards Act 2000

This act covers residential special schools and responsibilities for schools in handling medicines.

Health and Safety at Work Act 1974

This act places duties on employers for the health and safety of their employees and anyone else on their premises. This covers the head teacher and teachers, non-teaching staff, pupils and visitors.

Management of Health and Safety at Work Regulations 1999

These regulations require employers to carry out risk assessments, manage the risks identified and to communicate these risks and measures taken to employees.

Medicines Act 1968

This act specifies the way that medicines are prescribed, supplied and administered.

Additional guidance

Other guidance resources that link to a medical conditions policy include:
+ Healthy Schools Programme – a medical conditions policy can provide evidence to help schools achieve their healthy school accreditation
+ National Service Framework for Children and Young People and Maternity Services (2004) – provides standards for healthcare professionals working with children and young people including school health teams
+ Health and Safety of Pupils on Educational Visits: A Good Practice Guide (2001) – provides guidance to schools when planning educational and residential visits
+ Misuse of Drugs Act 1971 – legislation on the storage and administration of controlled medication and drugs
+ Home to School Travel for Pupils Requiring Special Arrangements (2004) – provides guidance on the safety for pupils when traveling on local authority provided transport
+ Including Me: Managing Complex Health Needs in School and Early Years Settings (2005).

- Norfolk and Waveney Asthma in Schools Policy (2023) – promoting the safety

of children and young people with asthma during pre-school, primary and secondary school years.
- Department of Health (2014) Guidance on the use of emergency salbutamol inhalers in schools

Further advice and resources

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