

MEDICAL CONDITIONS POLICY

Most children will have at some time a medical condition that may affect their participation in school activities. For many this will be short-term; perhaps finishing a course of medication.

Other children have medical conditions that, if not properly managed, could limit their access to education. Such children are regarded as having **medical needs**. Most children with medical needs can attend school regularly and with some support from school, can take part in most normal school activities. However, staff may need to take extra care in supervising some activities to make sure that these children, and others, are not put at risk.

There will be some children whose access to the curriculum is impaired not so much by the need to take medication but that their condition brings with it a level of dependency on adult support to meet their personal needs. This policy seeks to include these children and their needs.

Parents or guardians have prime responsibility for their child's health and should provide school with the information about their child's medical condition. We encourage parents/carers to provide school with sufficient information about their child's medical condition and any treatment or special care needed at school, on admission, and keep us informed of any new or changing needs. If there are any special religious and /or cultural beliefs which may affect medical care that the child needs, particularly in the event of an emergency, we rely on parents/carers to inform us and confirm this in writing. Such information will be kept on the child's personal record. This policy provides information on our procedures for the storage and administration of medicines to children and the procedures for children who can self- administer.

*** There is no legal duty which requires school staff to administer medication; this is a voluntary role however school should take all reasonable steps to ensure a child can attend school without interruption to their education.** Staff who provide support for children with medical needs, or who volunteer to administer medication, should receive support from the head and parent, access to information and training, and reassurance about their legal liability. Staff should, whenever they feel it necessary, consult with their respective professional associations.

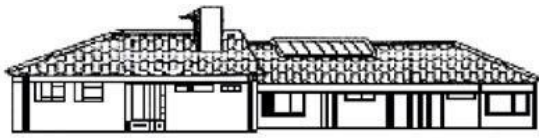
Good Practice

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. Pupils with a medical condition will not be denied admission or be prevented from taking up a place in school because arrangements for their medical condition have not been made.

POLICY

Children at Thomas Reade Primary School with medical conditions should be properly supported so that they can play an active part in school, remaining healthy and able to achieve their academic potential, with full access to education, including school trips and physical education.

Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained schools, to plan for supporting pupils at their school with medical conditions.

**Definition of the term Medical Condition used in this context:**

A medical condition that is long term with acute episodes, requires ongoing support, and involves the need for medication and/or care whilst at school. The condition will need monitoring and could require immediate intervention in emergency circumstances. Some children with medical conditions may be disabled. Where this is the case the Governing Board must comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEN) and may have an Education, Health and Care Plan (EHCP) which brings together health and social care needs, as well as their special educational provision. For children with SEND, this guidance should be read in conjunction with the SEND code of practice and the Local Offer and the school's SEND information which is available on the school website.

Statement of Intent

All children attending the school with a medical condition (meeting the above definition) must have an Individual Healthcare Plan (IHP) (appendix 3(i) Medical Needs or 3(ii) Severe Allergy) which should be devised in conjunction with school, parents and where relevant, healthcare professionals.

RESPONSIBILITIES

It is important that responsibilities for children's safety is clearly defined and that each person involved with children's medical needs is aware of what is expected of them. Close co-operation between school, parents, health professionals and other agencies will help provide a suitably supportive environment for children with medical needs.

Local Authority

The LA is responsible under the Health and Safety at Work Act 1974, for making sure that a school has a Health and Safety Policy. This should include procedures for supporting children with medical needs and managing medication. In the event of legal action over an allegation of negligence, the employer rather than the employee is likely to be held responsible. It is the employer's responsibility to ensure that correct procedures are followed.

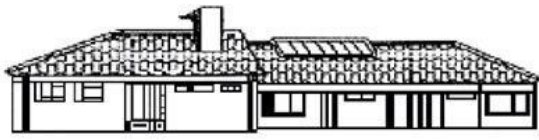
Where children would not receive a suitable education in a mainstream school because of their health needs, the Local Authority has a duty to make other arrangements. Please refer to the Local Offer for more details. Statutory guidance for local authorities sets out that they should be ready to make arrangements under this duty when it is clear that a child will be away from school for 15 days or more because of health needs.

Governors

The Governing Board must ensure that arrangements are in place in school to support children with medical conditions. In doing so, they should ensure that such children can access and enjoy the same opportunities at school as any other child.

The school, Local Authority, health professionals and other support services should work together to ensure that children with medical conditions receive a full education.

The Governing Board should ensure that the school's leaders liaise with health and social care professionals, children, and parents to ensure that the needs of children with medical conditions are effectively supported. The needs of each individual child must be considered and how their medical condition impacts on their school life.



The Governing Board should ensure that the arrangements they put in place are sufficient to meet their statutory responsibilities and should ensure that policies, plans, procedures, and systems are properly and effectively implemented. This aligns with their wider safeguarding duties. Policies should be reviewed regularly and be readily accessible to parents and school staff.

The Governing Board will ensure that:

- The Headteacher implements this policy effectively.
- The individual healthcare plans are devised, implemented, and monitored by the Headteacher /SENCO, working in partnership with the parents, child, and relevant healthcare professionals.
- Written records are kept of all medicines administered to children (appendix 4 (ii)).
- All Individual Healthcare Plans (IHPs) actively support children with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.
- That staff are properly trained to provide the support that children need.
- That the school's policy sets out what should happen in an emergency.
- That the appropriate level of insurance is in place and appropriately reflects the level of risk, with risk assessment being carried, when appropriate.
- That the school provides parents with information about the Local Offer and the School Offer including information displayed on the school website.
- That parents provide the school with sufficient and up-to-date information about their child's medical needs. This will be prompted with an annual data check.

Headteacher

The Headteacher:

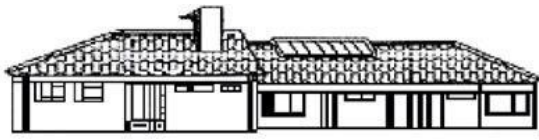
- Is responsible for implementing the Governing Board's policy in practice and for developing detailed procedures. (See Appendix 1)
- Should ensure that good lines of communications exist between parents and all relevant education and healthcare professionals.
- Should ensure that staff who volunteer should receive proper training and support.
- Is responsible for the day to day decisions on administering medication.
- Must share information with relevant staff to ensure the best care for the child after seeking parental agreement to do so.
- Should ensure that wherever possible the parent is not inconvenienced from work to support the pupil or administer medication at school.

Parents & Guardians

Parents, as defined in the Education Act 1944, are a child's main carers. They are responsible for making sure that their child is well enough to attend school.

Parents should:

- Provide the Headteacher with sufficient information about their child's medical condition and treatment to allow the appropriate arrangements to be put in place in school.
- Reach agreement jointly with the school on the school's role in helping with their child's medical needs.
- Share information to ensure the best care for the child.



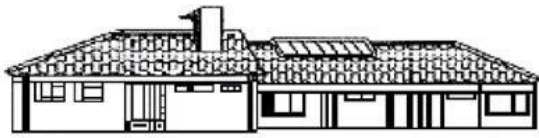
School

The school will:

- Ensure that children with medical conditions are identified as they transfer to the school and through the ongoing annual data check process.
- Arrange for written permission from parents/carers and the Headteacher for medication to be administered by a member of staff (see Appendix 4 (i), or self-administered by the child during school hours (see Appendix 4 (iii),
- Have arrangements in place for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments.
- Designate individuals to be entrusted with information about a child's condition, where confidentiality issues are raised by the parent/child.
- Have an identified key worker trained to specifically meet the needs of children with a statement of SEN / Education Health and Care Plan linked to a medical condition.
- Always have a minimum of two members of staff available trained in first aid response with knowledge of the children with medical conditions and access to their IHCPs.
- Be clear about what to do in an emergency, including who to contact, and contingency arrangements. (Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their Individual Healthcare Plan.)
- Make all staff working directly with children aware of the children in the school with medical conditions, through regular meetings and displays in staffroom.
- Provide sufficient training for staff to meet the needs of children at the school with medical conditions.
- Ensure that prescription medicines and health care procedures will only be given by staff following appropriate training from medical professionals.

School Staff

- Staff should use their discretion and judge each case on its merits with reference to the child's Individual Healthcare Plan. Staff should make inhalers and medication easily accessible to children and administer their medication when and where necessary in line with the prescribed dosage.
- Staff should give individual, personalised care to children even those with the same condition.
- Staff should take the views of the children and their parents into account; act on medical evidence and opinion but challenge it when appropriate.
- Staff should encourage children with medical conditions to remain in school for normal school activities, including lunch, unless this is specified in their Individual Healthcare Plans.
- Staff should supervise children with medical conditions if they become ill and contact relevant care authorities.
- Staff should not penalise children for their attendance record if their absences are related to their medical conditions e.g. hospital appointments.
- Staff should encourage children to drink, eat and take toilet or other breaks whenever they need to to manage their medical condition effectively.
- Staff will not force children to take medicines or have necessary procedures against their will. They will aim to follow the procedure agreed in the Individual Healthcare Plan and contact parents when alternative options may need to be considered.



- Staff should support parents in meeting the medical needs of their child in school by accepting responsibility for the child's medical needs at school and encourage children with medical conditions to participate, in all aspects of school life, including school trips.
- Staff should log in school records any concerns they have on a child's health and wellbeing and report these concerns to parents on the same day.

Emergency Procedures (see Appendix 2)

If an ambulance needs to be called any member of staff should:

- Ring the emergency service stating the medical condition
- Endeavour to contact the parent.
- Accompany the child in the ambulance, if the parent is unavailable
- Take a copy of all medical details including medication.
- Remain with the child until the parent arrives.

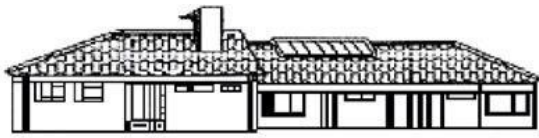
Generally, staff should not take pupils to hospital in their own car. If it is required, then the member of staff should be accompanied by another adult and have public liability vehicle insurance.

Individual Healthcare Plans (see Appendix 3i)

The school, healthcare professionals and parents/carers should agree, based on evidence, when an Individual Healthcare Plan would be inappropriate or disproportionate. Where there is a discrepancy an appropriate healthcare professional should be asked to arbitrate.

Individual Healthcare Plans must:

- Be clear and concise.
- Be written in partnership with parents, child, healthcare professional and key staff.
- Be reviewed annually or when there is a change in the condition of the child.
- Be easily accessible whilst preserving confidentiality.
- Securely stored by the SENCO.
- Outline educational provision if the child is unable to attend school.
- Contain details of the medical condition, its triggers, signs, symptoms and treatments.
- Include relevant SEND information.
- Provide details of the child's resulting needs, including written permission agreement for 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, modifications to buildings, furniture or equipment, and environmental issues e.g. crowded corridors, travel time between breaks and lessons, managing lunch queues etc. What needs to happen before, during and after PE. How to manage exam situations.
- Outline specific support for the child's educational, social and emotional needs – for example, how absences will be managed, changes to the school day and details of a personalised curriculum, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions etc.
- Outline the level of support needed, (what they need, what they can do themselves and what they need from others), including in emergencies. If a child is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring.



- State who will provide this support and when, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable.
- State contingency plan and plan of action in the event of an emergency.

Complaints

Parents/carers' concerns about the support provided for their child with a medical condition should be directed, in the first instance, to the Headteacher, Mrs Day. Where parents/carers feel their concerns have not been addressed, they should contact the Chair of Governors to make a formal complaint via the school's complaint procedure which can be found on the school website.

Supporting documents:

Equality Act 2010

SEND Code of Practice

SEN Local Offer

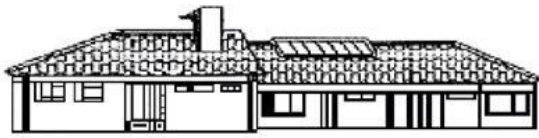
Supporting Children at school with Medical Conditions-DfE April 2014

Children and Families Act 2014 Section 100 Duty on Governors (in force from September 2014)

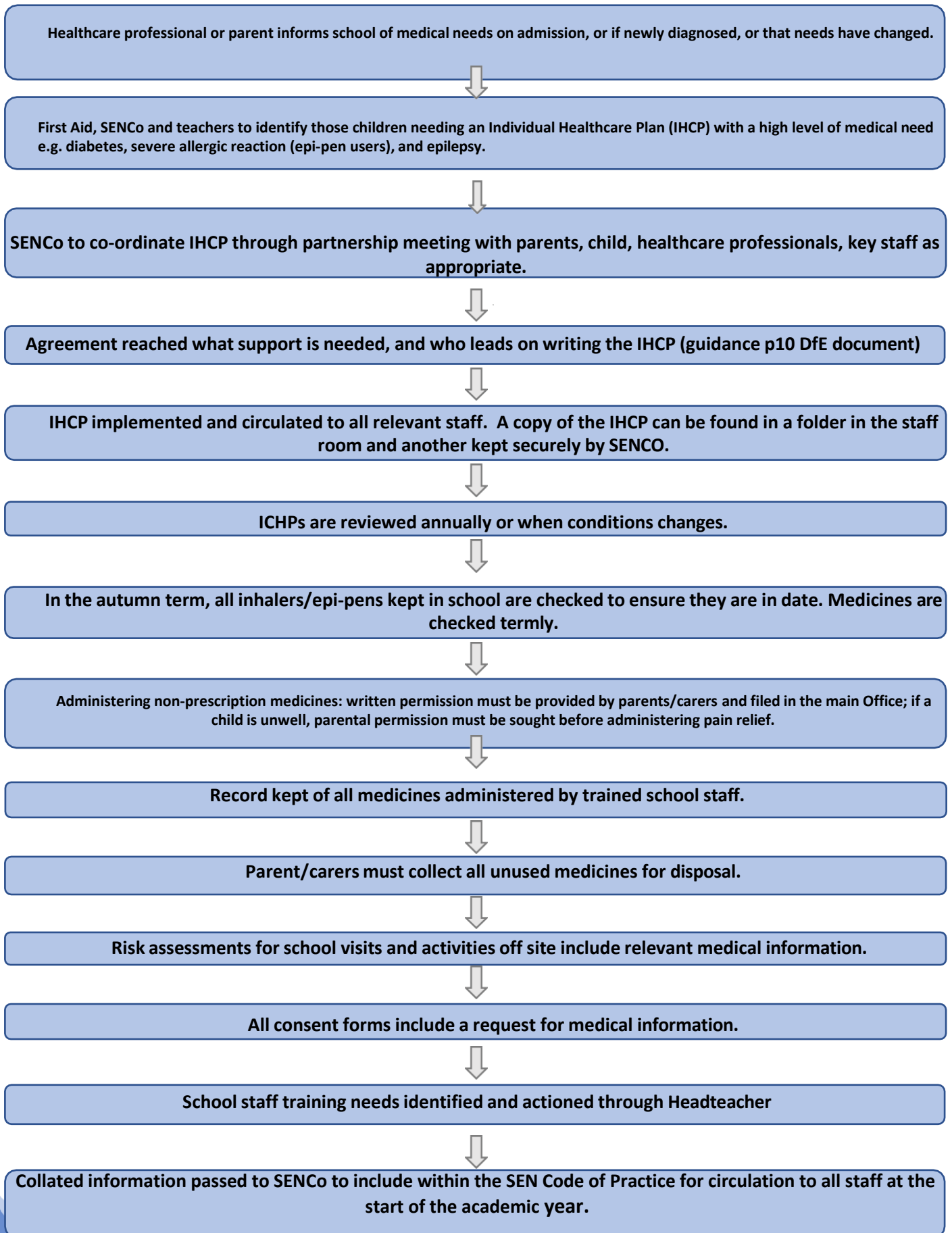
Guidance on the use of emergency salbutamol inhalers in school DfE September 2014

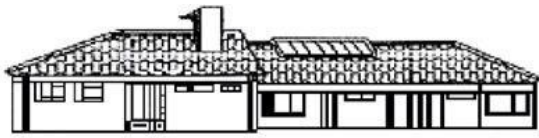
Health and Safety at Work Act 1974

Reviewed	November 2024
Date of Next Review	November 2025
Appendices	1. School Procedures on being informed of a medical need 2. Emergency Planning 3 (i) Individual Health care plan - Medical Needs 3 (ii) Individual Health care plan - Severe Allergy 4(i) Parental Agreement for school to administer medicine 4(ii) Record of medicine issued to a child 4(iii) Request for child to carry his/her medicine



Appendix 1 School procedures on being informed of a medical need





Appendix 2

EMERGENCY PLANNING

Request for an Ambulance:

Dial 999, ask for ambulance and be ready with the following information.

Speak clearly and slowly and be ready to repeat information if asked.

Your telephone number: 01235 554795

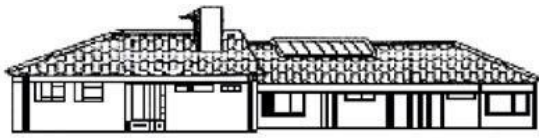
Give your location as follows: Thomas Reade Primary School, Radley Road, Abingdon OX14 3RR.

Give your name _____

Give child's name and age _____

Give brief description of pupil's symptoms/known medical condition/current condition reason for emergency

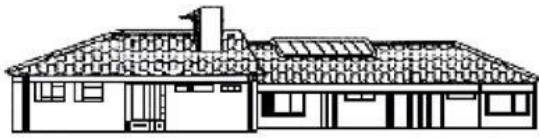
1. Inform Ambulance Control of the best entrance and state that the crew will be met and taken to patient.
2. Ensure school records and IHCP on child are available to emergency team.
3. Ensure parents are informed immediately and stay with child until parents arrive.
4. If child goes to hospital take IHCP and pupil details with you. Take a mobile telephone.



Appendix 3(i)

Individual healthcare plan

Child's name	
Class	
Teacher	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date (<i>min.annually</i>)	
Family Contact Information 1	
Name	
Relationship to child	
Phone no. (work)	
Home and mobile	
Email	
Family Contact Information 2	
Name	
Relationship to child	
Phone no. (work)	
Home and mobile	
Email	
Clinic/Hospital Contact	
Name	



Phone no.	
Email	
G.P.	
Name	
Phone no.	

Who is responsible for providing support in school

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SEN needs (*if applicable*)

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

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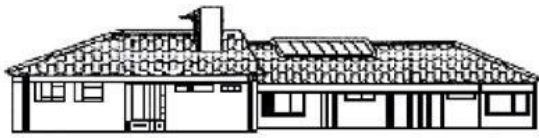
Level of support needed: what does the child need? What can they do themselves? What do they need from us?

--

Who will provide this support? Their training needs and cover arrangements if unavailable

--

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



Dietary requirements

Daily care requirements: what needs to happen before/during/after PE and exams/assessments (*where applicable*)

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc. Risk assessments:

Other information

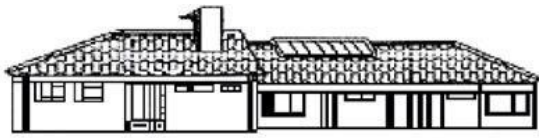
Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Form copied to

Risk Assessment attached? Yes / No



Parent name:

Parent signature:

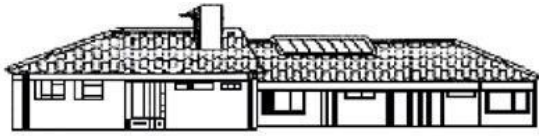
SENCO name:

SENCO signature:

Child's Name:				DOB:	
School:				Keyworker:	
Brief description of diagnosis/difficulties/reason for RA					
Information available to inform risk assessment: e.g multiple sources, parents, CAMHS, Individual, teacher.					
Risk (Please enter all relevant risk issues under the headings below.	Low (0-1)	Medium (2-3)	High (4-5)	Description of risk (Please use Risk Assessment Information and Scoring Sheet for assistance if required)	Recommended Measures taken to prevent or reduce risk / Risk management Plans. (you may cross reference with any part of the referral form or attachments) (To include specific details/useful information which help the individual to cope and or help the professional to assist in improving engagement in teaching and learning sessions; Clear actions and responsibility stated)
Risk to Self:					
Risk to others:					
Vulnerability e.g At risk from others, Neglect, Child protection					
Risk within the Environment (include where relevant e.g home, hub)					

Plans for positive risk taking:

(e.g. N/A, or Please use Risk Assessment Information Guide and Scoring Sheet for assistance if required)



Thomas Reade Primary School

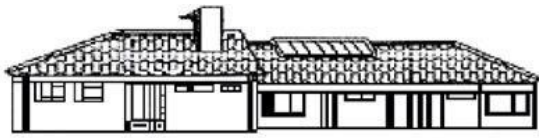
Any Incidents while at school – Date//brief description below.

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Network of Support (e.g. other professionals involved, carer, CAMHS Worker)

Name:	Role:	Contact details:

Signature of assessor:



Appendix 3(ii)

Healthcare Plan for a Pupil with a Severe Allergy

Surname:	Forename:	Sex: M / F
Date of Birth:	NHS No:	
Address:		
Name of School:		Class:
Date completed:	Date 1 st Review:	Date 2 nd Review:

Emergency contact 1

Name_____

Relationship_____

Tel No (mobile) _____

Tel No (work) _____

Emergency Contact 2

Name_____

Relationship_____

Tel No (mobile)_____

Tel No (work) _____

GP Name & Tel Number:

ALLERGIC TO:

MEDICATION:

Severe Reaction (rare)

- Wheeze, difficulty in breathing or a choking feeling
- Swelling of the tongue or throat
- Floppiness, collapse or deteriorating consciousness.

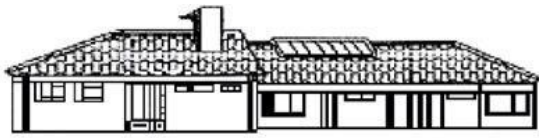
Treatment:

1. Send someone to call for an ambulance *immediately*

(Dial 999). Tell the operator this is an **emergency** case of **anaphylaxis**.

2. If there is collapse or severe difficulty breathing give the adrenaline pen injection (epinephrine)

- Pull off grey safety cap
- Place black tip onto side of thigh, at right angles to the leg
- Press hard into the thigh until you hear the pen click
- Hold in place for 10 seconds
- Massage injection site for 10 seconds
- Place in recovery position if appropriate
- **Do not allow to stand up**



3. If the adrenaline pen is used the child/young person must always go to hospital.

Any additional instruction's e.g. asthma care:

Please note that it is the parent/carers responsibility to ensure that the adrenaline pen is not out of date
Mild or Moderate Reactions (very common)

Possible symptoms: (Please delete or add as appropriate as symptoms may vary).

Itching skin, rash, tickly throat, mild swelling (such as face or lips)

Medication:

Antihistamines..... syrup/tablets (delete as appropriate)

Syrup give..... 5ml spoonful immediately **OR**

Tablets give mg tablet immediately

Any additional instructions e.g. asthma medication

Agreement and Conclusion:

Both school and parents should hold a copy of this Healthcare Plan. Please send a copy to the School Nurse to be put in the Child Health records. Any necessary revisions will be between the school and parents.

Agreed and Signed:

Parent _____ Date _____

Head Teacher _____ Date _____

School Nurse _____ Date _____

1st Review:

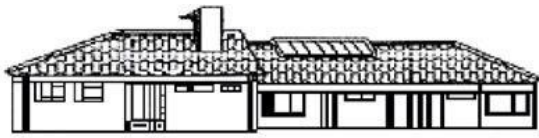
Parent _____ Date _____

Head Teacher _____ Date _____

2nd Review:

Parent _____ Date _____

Head Teacher _____ Date _____



Appendix 4(i)

Thomas Reade Primary School - Parental Agreement for school to administer medicine

The school cannot give your child medicine unless you complete and sign this form.

Name of School:	
Name of Child:	
Date of Birth:	
Class:	
Medical condition/illness:	
Name/Type of Medicine (as described on the container):	
Date dispensed:	
Expiry date:	
Dosage and method:	
Timing:	
Special Precautions:	
Are there any side effects that the school needs to know about?	
Self-Administration: Yes/No	
Procedures to take in an emergency:	
NB: all medicines must be in the original container as dispensed by the pharmacy	
Contact Details	
Name:	
Daytime Telephone No:	
Relationship to child:	
Address:	

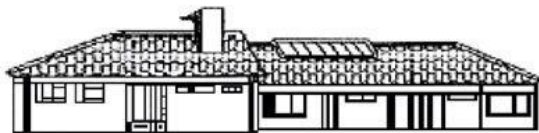
The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy.

I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature/s:

Date:

Relationship to child:



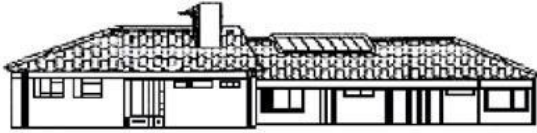
Appendix 4(ii)

Thomas Reade Primary School Record of medicine administered to an individual child

Personal Details	
Name of child:	D.O.B
Class:	
Medication Details	
Date medicine provided by parent:	Expiry Date:
Name and strength of medicine:	Dose & Frequency of Medicine:
Quantity of medicine received: (If pack/bottle unopened)	Quantity of medicine returned:
Consent	
Staff Signature:	

Medication Log

Date										
Time Given										
Dose Given										



Thomas Reade Primary School

Staff initials										
Print name										

[Type here]

Appendix 4(iii)

**Thomas Reade Primary School
Request for child to carry his/her medicine**

THIS FORM MUST BE COMPLETED BY PARENT/GUARDIAN

If staff have any concerns discuss this request with school healthcare professionals.

Name of child:	Class:
Address:	
Name and strength of medicine:	
Procedures to be taken in an emergency:	
Contact Information	
Name:	Contact Telephone No:
Relationship to child:	

I would like my son/daughter to keep his/her medicine on him/her for use as necessary.

Signed: _____ Date: _____

****If more than one medicine is to be given, a separate form should be completed for each one****