

Medical Policy

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Ownership & Control

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THE THOMAS LORD AUDLEY SCHOOLS MEDICAL POLICY

In each school, there is a dedicated Senior Leader Link (DHT Pastoral). The Responsible Member of Staff in TLA is the Medical Officer (Liz Hark - LHa).

Policy statement

The schools are an inclusive community that aim to support and welcome students with medical conditions. We aim to provide all students with all medical conditions the same opportunities as others at school and achieve this by ensuring that:

 \cdot All school staff understand their duty of care to children and young people in the event of an emergency.

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

• The school understands that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood.

· The school understands the importance of medication being taken as prescribed.

• All staff understand the common medical conditions that affect children at this school. •This school allows adequate time for staff to receive training on the impact medical conditions can have on students.

 \cdot Staff receive additional training about any children they may be working with who have complex health needs supported by an EHCP or IHP

This policy is followed and understood by our school community

1. The schools are an inclusive community that aim to support and welcome students with medical conditions

a. The school understands that it has a responsibility to make the school welcoming and supportive to students with medical conditions who currently attend and to those who may enrol in the future.

b. The school aims to provide all children with all medical conditions the same opportunities as others at school. We will help to ensure they can be healthy, stay safe, enjoy and make a positive contribution and achieve economic well-being.

c. Students with medical conditions are encouraged to take control of their condition.

d. The school aims to include all students with medical conditions in all school activities.

e. Parents/carers of students with medical conditions are aware of the care their children receive at this school.

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 have access to information about what to do in an emergency.

h. This school understands 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 may affect children at this school. Staff receive regular updates. The Headteacher is responsible for ensuring staff receive regular updates.

j. The medical conditions policy is understood and followed by the whole school.

2. The medical conditions policy is supported by a clear communication plan for staff, parents/carers and other key stakeholders to ensure its full implementation

a. Parent/carers are informed about the medical conditions policy and can be accessed via the school's website, where it is available all year round

b. School staff are informed and regularly reminded about the school's medical conditions policy:

 \cdot through the staff meetings and by accessing the school's intranet and Data Management Systems (ARBOR)

· through medical conditions updates

•Staff are made aware of any EHCPs/IHPs as they relate to their teaching/supervision groups. This is a role for the designated person (SLT link/SENCO).

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

3 (i). Relevant staff understand and are updated in what to do in an emergency for the most common serious medical conditions at this school

a. Relevant staff at this school are aware of the most common serious medical conditions at this school.

b. Staff at this school understand their duty of care to students both during, and at either side of the school day 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/carer and will inform the medical team.

c. Medical Staff know how to act in an emergency. Additional training is prioritised for key staff members who work with children who have specific medical conditions supported by an EHCP or IHP.

e. This school uses EHCPs/IHPs to inform the appropriate staff of students with complex health needs in their care who may need emergency help.

f. If a student needs to be taken to hospital, a member of staff will always accompany them and will stay with them until a parent arrives. The staff member concerned should inform a member of the school's senior management who will help support the management of the situation and support the member of staff.

3 (ii) Administration of Medicines/Medical Interventions

a. Medicine / medical interventions will only be administered at school when it would be detrimental to a student's health or attendance not to do so.

b. It is expected that parents/carers will normally administer medication / medical interventions to their children during their time at home, where at all possible.

c. No medication / medical intervention will be administered without prior written permission from the parents/carers.

d. The Headteacher will decide whether and by whom any medication or medical intervention will be administered in school, following receipt of written permission and after consultation with staff.

e. No changes to administration method or dosage of medication or changes in procedures relating to medical interventions will be carried out without written authority from the parents/carers. Any changes must be recorded in writing.

f. The Headteacher will decide whether a student is able to carry and self-administer any medication or self-administer any medical intervention, following consultation with staff as appropriate. This should be recorded in writing.

g. All medicines / medical interventions will normally be administered during school breaks and/or lunchtime.

h. If, for medical reasons, medicine has to be taken at other times during the day or a medical intervention delivered at a different time, arrangements will be made for the medicine / medical intervention to be administered at other prescribed times.

i. Students will be told where their / medication / medical intervention equipment and resources are kept and who will administer/support administration of them.

j. Any member of staff, on each occasion, giving medication / medical intervention to a student should check:

· Name of student

 \cdot Written instructions provided by the parent/cares or healthcare professional or as agreed in an IHP

· Prescribed dose, if appropriate

· Expiry date, if appropriate

k. Any member of staff, on each occasion, will make a written record of medication / medical intervention administered on the Record of Administration Sheet. In the case of a controlled drug this needs to be signed and witnessed by a second appropriate member of staff. No child under 16 will be given medicine containing **aspirin** unless prescribed by a doctor.

Records

School will keep a record of all medicines / medical interventions administered to individual students on each occasion, including the following:

- · Name of student
- \cdot Date and time of administration
- \cdot Name of the person who supervised the administration
- · Name of the medication
- · Dosage
- \cdot A note of any side effects / reactions observed
- \cdot If authority to change protocol has been received and agreed

Student's Role in Managing their own Medical Needs

a. After discussion with parents/carers, children who are competent will be encouraged to take responsibility for managing their own medicines and medical interventions.b. Students who can take medicines or manage medical interventions independently may still require a level of adult supervision e.g. in the event of an emergency. In this situation agreed procedures will be documented in an IHP.

Refusing Medication / Medical Intervention

 \cdot If a student refuses to take their medication/medical intervention, staff will not force them to do so. Refusal to take medication will be recorded and dated on the student's record sheet. Reasons for refusal must also be recorded as well as the action then taken by the member of staff. (Record of administration

sheet)

• Parents/carers will be informed as soon as possible. Where the student is potentially placing themselves at risk by refusal, parents/carers will be informed immediately.

3 (iii) Administration – emergency medication

a. The school will seek to ensure that students with medical conditions have **easy access to their emergency medication.**

b. The school will ensure that all students understand the arrangements for a member of staff (and the reserve member of staff) to assist in helping them take their emergency medication safely.

3 (iv) Administration – general

a. This school understands the importance of medication being taken as prescribed.

b. All use of medication is done under the appropriate supervision of a member of staff at this school unless there is an agreed plan for self-medication. Staff should be aware if students are using their medication in an abnormal way and should discuss this with the child. c. All staff are aware that there is no legal or contractual duty for any member of staff to administer medication or supervise a student taking medication unless they have been specifically contracted to do so or unless the situation is an emergency and falls under their regular duty of care arrangements.

d. 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 medication to students under the age of 16, but only with the written consent of the student's parent.

e. All school staff in the school 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 includes taking action such as assisting in administering medication or calling an ambulance.

f. In some circumstances, medication is only administered by an adult of the same gender as the student, and preferably witnessed by a second adult. This will be agreed in the EHCP or IHP.

g. Parents/carers at this school 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. Parents/carers should provide the school with any guidance regarding the administration of medicines and/or treatment from the GP, clinics or hospital.

h. All staff attending off-site visits are aware of any students on the visit who have medical conditions. They will complete a risk assessment and 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.

i. If a trained member of staff, who is usually responsible for administering medication, is not available, this school makes alternative arrangements to provide the service. This is always addressed in the risk assessment for off-site activities.

j. If a student misuses medication, either their own or another student's, their parents/carers are informed as soon as possible. The school will seek medical advice by ringing A+E if this situation arises. In such circumstances, students will be subject to the school's usual disciplinary procedures.

k. Staff must not give prescription medicines or undertake healthcare procedures without appropriate training. A First Aid Certificate does NOT constitute appropriate training in supporting children with medical conditions.

m. All staff will be made aware of the School's Policy for supporting students with medical

conditions and their role in implementing that policy through, for example, whole school awareness training, involvement in development of IHPs, staff briefing sessions etc. n. Specialist training and advice will be provided by appropriate healthcare professionals, e.g. specialist epilepsy nurse, asthma training by school nurse etc, for staff involved in supporting students with medical conditions including the administration of relevant medicines / medical interventions.

I. Training for all staff will be provided on a range of medical needs, including any resultant learning needs, as and when appropriate.

m. Supporting a student with a medical condition during school hours is not the sole responsibility of one person.

n. Training will ensure that sufficient numbers of staff are competent and have confidence in their ability to support students with medical conditions, and to fulfil the requirements as set out in IHPs.

o. Training will be sufficient to ensure staff are competent and have confidence in their ability. The school will make every effort to ensure that specialist training will be completed as quickly as possible to ensure that a student is able to attend school safely.

p. A record of staff training carried out will be kept, identifying the date review or refresher training will be required where appropriate.

4. This school has clear guidance on the storage of medication at school

All students will know where their medicines/medical intervention equipment/resources are at all times and they will be readily available. All medicines and medical equipment/resources will be stored safely as agreed with parents/carers or described in the student's EHCP or IHP

Safe storage – emergency medication

a. All emergency medication is stored in a lockable cupboard in a secure environment that is readily available to students who require it at all times during the school day or at off-site activities. All controlled drugs are also locked up, and the keys are readily available and not held personally by members of staff.

b. If the student concerned is involved in extended school services then specific arrangements and risk assessments should be agreed with the parent and appropriate staff involved.

Safe storage - non-emergency medication

c. All non-emergency medication is kept in a secure place, in a lockable cupboard in a cool dry place. Students with medical conditions know where their medication is stored and how to access it.

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

Safe storage – general

a. This school has an identified member of staff who ensures the correct storage of medication at school.

b. All controlled drugs are kept in a non-portable locked cabinet and only named staff have access - at TLA this is in the area behind the Student Office. A student who is prescribed a controlled drug may legally have it in their possession if they are competent to do so but passing it to anyone else for use is an offence. At TLA we require all controlled drugs to be locked away on the premises

c. The identified member of staff, along with the parents/carers of students with medical conditions, ensures that all emergency and non-emergency medication brought in to school is clearly labelled with the student's name, the name of the medication, route of administration, dose and frequency, an expiry date of the medication.

d. All medication is supplied and stored in its original containers. All medication is labelled with the student's name, the name of the medication, expiry date and the prescriber's instructions for administration, including dose and frequency.

e. Medication is stored in accordance with the manufacturer's instructions, paying particular note to temperature.

f. Some medication for students at this school may need to be refrigerated. All refrigerated medication is stored in an airtight container and is clearly labelled. Refrigerators used for the storage of medication are inaccessible to unsupervised students or lockable as appropriate. g. It is the parent/carer's responsibility to ensure new and in date medication comes into

school with the appropriate instructions and ensures that the school receives this.

Safe disposal

a. Parents/carers at this school are asked to collect out-of-date medication.

b. The Identified member of staff is responsible for checking the dates of medication and arranging for the disposal of any that have expired. This check is done at least 3 times a year and is always documented.

c. Sharps boxes are used for the disposal of needles. Parents/carers obtain sharps boxes from the child's GP or paediatrician on prescription. All sharps boxes in this school are stored in a locked cupboard unless alternative safe and secure arrangements are put in place on a case-by-case basis.

d. 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, to school or to the student's parent.

e. Collection and disposal of sharps boxes is arranged with the local authority's environmental services.

5. This school has clear guidance about record keeping for students with medical conditions

Enrolment forms

a. Parents/carers at this school are asked if their child has any medical conditions b. This information is kept accessible on the school management system and on the EHCPs/IHPs

EHCPs/IHPs

Drawing up a Individual Healthcare Plan

Where appropriate, an IHP will be drawn up in consultation with the school, parents/carers, health professionals and any other professionals.

The content of an individual student's IHP (EHCP if relevant) will be dependent on the complexity of their needs and may include the following:

 \cdot An overview (Pen Portrait/One Page Profile) of the student's needs and provision in place in school to manage those needs.

· A description of the medical condition, its presentation (signs, symptoms, triggers etc.) and impact on access to the school environment and learning opportunities. · Arrangements around administration of medication(s) / medical interventions(s). · Arrangements around management of medical emergency situations.

• Arrangements around management and support for personal care needs, including intimate and invasive care e.g. catheterisation, toileting support, gastro-tube feeding etc.

• Risk assessment for access to the school environment and curriculum. • Arrangements for evacuation in the event of an emergency.

The level of support required in school, who will provide this support, their training needs and cover arrangements for when they are unavailable.
How, if agreed, the student is taking responsibility for their own health needs.

· A reference to staff confidentiality.

Individual Healthcare Plans will be reviewed annually or sooner if needs change.

a. This school uses an Individual Healthcare Plan for children with complex health needs to record important details about the individual children's medical needs at school if not detailed on an EHCP. Further documentation can be attached to the IHP if required. Examples of complex health needs which may generate an IHP may include:

- · diabetes
- · gastrostomy feeds
- · a tracheostomy
- · anaphylaxis
- \cdot a central line or other long-term venous access
- \cdot Severe asthma that has required a hospital admission within the last 12 months
- \cdot epilepsy with rescue medication

b. An IHP is sent to all parents/carers of students with a complex health need. This is sent at the start of the school year; at enrolment; when a diagnosis is first communicated to the school; transition discussions; new diagnosis.

c. It is the parent's responsibility to fill in the IHP and return the completed form to the school. If the school does not receive an IHP, all school staff should follow standard first aid measures in an emergency. The school will contact the parent/carer if health information has not been returned. If an IHP has not been completed the Medical Officer or AHOH (or designated member of the pastoral team) / SENCO / school nurse will contact the parents and may convene a TAC meeting or consider safeguarding children procedures if necessary. d. A copy of the finalised plan will be given to parents/carers, school and any other relevant person e.g. school nurse.

e. This school ensures that a relevant member of school staff is present, if required, to help draw up an IHP for students with complex health or educational needs.

School Health Care Plan register

a. IHPs are used to create a centralised register of students with complex health needs. A designated member of school staff has responsibility for the register at this school. This school has ensured that there is a clear and accessible system for identifying students with individual health plans/medical needs such as names being 'flagged' on the ARBOR system. A robust procedure is in place to ensure that the child's record, contact details and any changes to the administration of medicines, condition, treatment or incidents of ill health in the school is updated on the schools' record system.

b. The Medical Officer / AHOH / Pastoral Team / SENCO follows up with the parents/carers and health professional if further detail on a student's IHP is required or if permission or administration of medication is unclear or incomplete.

Ongoing communication and review of IHP

Parents/carers at this school are regularly reminded to update their child's IHP 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.

Parents will be communicated with annually to ensure that IHP are kept up to date. (See appendix 1)

Storage and access to Individual Healthcare Plans

a. Parents/carers, staff and students (where appropriate) at this school are provided with a copy of the student's current agreed IHP.

b. Health Care Plans are kept in a secure central location at school.

c. When a member of staff is new to a student group, for example due to staff absence, the school makes sure that they are made aware of the Individual Health Plans and needs of the students in their care.

d. This school ensures that all staff protect students' confidentiality.

e. This school informs parents/carers that the Individual Healthcare Plan would be sent ahead to emergency care staff, should an emergency happen during school hours or at a school activity outside the normal school day. This is included on the IHP.

f. The information in the IHP will remain confidential unless needed in an emergency

Use of Individual Healthcare Plans

Individual Health Plans are used by this school to:

 \cdot inform the appropriate staff about the individual needs of a student with a complex health need in their care

 \cdot identify important individual triggers for students with complex health needs at school that bring on symptoms and can cause emergencies. This school uses this information to help reduce the impact of triggers

• ensure this school's emergency care services have a timely and accurate summary of a student's current medical management and healthcare in an emergency

Consent to administer medicines

If a student requires regular prescribed medication at school, parents/carers are asked to provide consent on their child's medication plan giving the student or staff permission to administer medication on a regular/daily basis, if required.

Residential visits

a. Parents/carers are sent a residential visit form to be completed and returned to school before their child leaves for an overnight or extended day visit. This form requests up-to-date information about the student's current condition and their overall health. This provides essential and up-to-date information to relevant staff and school supervisors to help the student manage their condition while they are away. This includes information about medication not normally taken during school hours.

b. All residential visit forms are taken by the relevant staff member on visits where medication is required. These are accompanied by a copy of the student's IHP.

c. All parents/carers of students with a medical condition attending a school trip or overnight visit are asked for consent, giving staff permission to supervise administration of medication at night or in the morning if required.

d. The school may ask parents / carers to provide a letter from a Doctor stating that the student is fit to travel.

Record of Awareness Raising Updates and Training

a. All school staff who volunteer or who are contracted to administer emergency medication are provided with training, if needed, by a specialist nurse, doctor or school nurse. The school keeps a register of staff who have had the relevant training, it is the school's responsibility to arrange this

b. This school risk assesses the number of first aiders it needs and ensures that the first aiders are suitably trained to carry out their responsibilities.

7. This school ensures that the whole school environment is inclusive and favourable to students with medical conditions. This includes the physical environment, as well as social, sporting and educational activities Physical environment

a. This school is committed to providing a physical environment that is as accessible as possible to students with medical conditions.

b. This school aims to meet the needs of students with medical conditions and to ensure that the physical environment at this school is as accessible as possible.

c. This school's commitment to an accessible physical environment includes out-of-school; it also recognises that this may sometimes mean changing activities or locations.

Social interactions

a. This school ensures the needs of students with medical conditions are adequately considered to ensure their involvement in structured and unstructured social activities, including during breaks and before and after school.

b. This school ensures the needs of students with medical conditions are adequately considered to ensure they have access to extended school activities such as school discos, breakfast club, school productions, after school clubs and residential visits.

c. All staff at this school are aware of the potential social problems that students 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.

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

Exercise and physical activity

a. This school understands the importance of all students taking part in sports, games and activities.

b. This school seeks to ensure all classroom teachers, PE teachers and sports coaches make appropriate adjustments to sports, games and other activities to make physical activity accessible to all students.

c. This school seeks to ensure that all classroom teachers, PE teachers and sports coaches understand that if a student reports they are feeling unwell, the teacher should seek guidance before considering whether they should take part in an activity.

d. Teachers and sports coaches are aware of students in their care who have been advised, by a healthcare professional, to avoid or to take special precautions with particular activities.

e. This school ensures all PE teachers, classroom teachers and school sports coaches are aware of the potential triggers for students' medical conditions when exercising and how to minimise these triggers.

f. This school seeks to ensure that all students have the appropriate medication or food with them during physical activity and students take them when needed.

g. This school ensures all students with medical conditions are actively encouraged to take part in out-of-school clubs and team sports.

Education and learning

a. This school ensures that students with medical conditions can participate fully in all aspects of the curriculum and ensures that appropriate adjustments and extra support are provided.

b. Teachers at this school are aware of the potential for students with medical conditions to have special educational needs (SEN). Students with medical conditions who are finding it difficult to keep up with their studies are referred to the SEN coordinator.

c. This school includes lessons about common medical conditions. This can be incorporated into PSHE lessons.

d. Students at this school learn how to respond to common medical conditions.

Risk Assessments

a. Risk assessments are carried out by this school prior to any out-of-school visit or off-site provision and medical conditions are considered during this process. This school considers: how all students will be able to access the activities proposed; how routine and emergency medication will be stored and administered, where help can be obtained in an emergency, and any other relevant matters.

b. This school understands that there may be additional medication, equipment or other factors to consider when planning residential visits or off-site activities. This school considers additional medication and facilities that are normally available at school.

c. This school carries out risk assessments before students start any work experience or off-site educational placement. It is this school's responsibility to ensure that the placement is suitable, including travel to and from the venue for the student. Permission is sought from the student and their parents/carers before any medical information is shared with an employer or other education provider.

8. This school is aware of the triggers that can make medical conditions worse or can bring on an emergency. The school is actively working towards reducing these health and safety risks.

This school is committed to working towards reducing the likelihood of medical emergencies by identifying and reducing triggers.

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

a. This school works in partnership with all interested and relevant parties including the school's governing body, school staff, and community healthcare professionals and any relevant emergency practitioners to ensure the policy is planned, implemented and maintained successfully.

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

Governors have a responsibility to:

 \cdot ensure the health and safety of their staff and anyone else on the premises or taking part in school activities (this includes all students). This responsibility extends to those staff and others leading activities taking place off-site, such as visits, outings or field trips

 \cdot ensure the schools health and safety policies and risk assessments are inclusive of the needs of students with medical conditions and reviewed annually.

 \cdot make sure the medical conditions policy is effectively implemented, monitored and evaluated and regularly updated

 \cdot ensure that the school has robust systems for dealing with medical emergencies and critical incidents, at any time when students are on site or on out of school activities.

The Headteacher has a responsibility to:

 \cdot ensure the school is inclusive and welcoming and that the medical conditions policy is in line with local and national guidance and policy frameworks

 \cdot ensure the policy is put into action, with good communication of the policy to all staff, parents/carers and governors

 \cdot ensure every aspect of the policy is maintained

 \cdot ensure that if the oversight of the policy is delegated to another senior member of staff ensure that the reporting process forms part of their regular supervision/reporting meetings

 \cdot monitor and review the policy at regular intervals, with input from governors,

parents/carers, staff and external stakeholders

 \cdot report back to governors about implementation of the health and safety and medical conditions policy.

 \cdot ensure through consultation with the governors that the policy is adopted and put into action.

All Thomas Lord Audley School staff have a responsibility to:

 \cdot be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency

· Contact a suitable member of staff and/or an ambulance in an emergency

 \cdot understand the school's medical conditions policy

 \cdot know which students in their care have a complex health need and be familiar with the content of the student's Health Care Plan

 \cdot know the schools registered first aiders and where assistance can be sought in the event of a medical emergency

 \cdot know the members of the schools SLT if there is a need to seek assistance in the event of an emergency.

 \cdot maintain effective communication with parents/carers including informing them if their child has been unwell at school

 \cdot ensure students who need medication have it when they go on a school visit or out of

the classroom

 \cdot be aware of students with medical conditions who may be experiencing bullying or need extra social support

 \cdot understand the common medical conditions and the impact these can have on students.

 \cdot ensure that all students with medical conditions are not excluded unnecessarily from activities they wish to take part in

 \cdot ensure that students have the appropriate medication or food during any exercise and are allowed to take it when needed.

 \cdot follow universal hygiene procedures if handling body fluids

• ensure that students who present as unwell should be questioned about the nature of their illness, if anything in their medical history has contributed to their current feeling of being unwell, if they have felt unwell at any other point in the day, if they have a EHCP or IHP and if they have any medication. The member of staff must remember that while they can involve the student in discussions regarding their condition, they are in loco parentis and as such must be assured or seek further advice from a registered first aider if they are in doubt as to the child's health, rather than take the child's word that they feel better.

Teaching staff have an additional responsibility to also:

 \cdot endeavours to support students who have had a period of absence for medical reasons to have the opportunity to catch-up on missed work

 \cdot be aware that medical conditions can affect a student's learning and provide extra help when students need it, in liaison with the SENCO.

 \cdot liaise with parents/carers, special educational needs coordinator and pastoral staff if a child is falling behind with their work because of their condition.

 \cdot use opportunities such as PSHE and other areas of the curriculum to raise student awareness about medical conditions

School nurse or healthcare professional has a responsibility to:

 \cdot help provide regular updates for school staff in managing the most common medical conditions at school at the schools' request

 \cdot provide information about where the school can access another specialist training.

First aiders have an additional responsibility to:

- · give immediate, appropriate help to casualties with injuries or illnesses
- \cdot when necessary ensure that an ambulance is called.
- \cdot ensure they are trained in their role as 1st aider
- \cdot ensure that they are trained in paediatric first aid.

Special educational needs coordinator / Exams Officer have the additional responsibility to:

 \cdot ensure teachers make the necessary arrangements if a student needs special consideration or access arrangements in exams or coursework.

Students have a responsibility to:

· treat other students with and without a medical condition equally

 \cdot tell their parents/carers, teacher or nearest staff member when they are not feeling well

- · let a member of staff know if another student is feeling unwell
- · treat all medication with respect

Parents/carers have a responsibility to:

- \cdot tell the school if their child has a medical condition or complex health need
- \cdot ensure the school has a complete and up-to-date IHP if their child has a complex health need
- \cdot inform the school about the medication their child requires during school hours
- \cdot inform the school/provider of any medication their child requires while taking part in visits, outings or field trips and other out-of-school activities
- \cdot tell the school about any changes to their child's medication, what they take, when, and how much
- \cdot inform the school of any changes to their child's condition
- \cdot ensure their child's medication and medical devices are labelled with their child's full name
- \cdot ensure that the school has full emergency contact details for them
- · provide the school with appropriate spare medication labelled with their child's name
- \cdot 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
- \cdot ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional
- if the child has complex health needs, ensure their child has a written Individual Healthcare Plan for school and if necessary an asthma management plan from their doctor or specialist healthcare professional to help their child manage their condition. • have completed/signed all relevant documentation including the IHP

10. The medical conditions policy is regularly reviewed, evaluated and updated.

a. This school's medical condition policy is reviewed, evaluated and updated in line with the school's policy review timeline – every three years, or earlier if necessary.

b. The views of students with various medical conditions may be sought and considered central to the evaluation process.

Appendix 1 – Template Letter from School to Parent

Dear Parent

Re: The Individual Healthcare Plan

Thank you for informing the school of your child's medical condition. With advice from the Department for Children, Schools and Families and the school's governing bodies, we are working with schools to follow our shared medical conditions policy.

As part of this policy, we are asking all parents/carers of children with a complex health need to help us by completing a Healthcare Plan for their child. Please complete the plan enclosed and return it to me at If you would prefer to meet me to complete the Individual Healthcare Plan or if you have any questions then please contact me on [insert school contact number].

Your child's completed plan will store helpful details about your child's medical condition, current medication, triggers, individual symptoms and emergency contact numbers. The plan will help school staff to better understand your child's individual condition.

Please make sure the plan is regularly checked and updated and the school are kept informed about changes to your child's medical condition or medication. This includes any changes to how much medication they need to take and when they need to take it.

Thank you for your help.

Yours sincerely