Supporting Students with Medical Conditions

Purpose

The purpose of this policy is to explain how Bingley Grammar School implements its procedures on dealing with pupils who have medical conditions, in line with government requirements, with a view that all pupils will receive the best education possible for them, despite any medical conditions that they may have to contend with.

Aims

At Bingley Grammar School we believe that pupils with medical conditions should be supported, as best we can, to play an active role in school life, enjoy the same opportunities as any other pupil and have full access to all aspects of education. The governing body has arrangements in place to see that this is achieved. It is important that parents/carers feel confident that the school will provide effective support for their child’s medical condition and that pupils themselves feel safe. For these reasons, the school will liaise with health and social care professionals, pupils and their parents to achieve this.

Action plan

The school’s governing body is ultimately responsible for the implementation of this policy. The Headteacher is in charge on a day-to-day basis and named individuals are responsible for the provision of support to individual pupils with medical conditions.

The role of the Headteacher

The Headteacher will ensure that:

- Sufficient staff are suitably trained and available to implement the policy.
- All staff are aware of the policy and staff are supported in their role in implementing it. Relevant staff will be made aware of any child with a medical condition.
- Cover arrangements are in place in case of staff absence, staff turnover and in emergency and contingency situations, to ensure someone is always available.
- Any supply teachers are aware of the medical condition where appropriate. Staff are appropriately insured and are aware that they are insured to support pupils with medical conditions.
- The Medical Needs Co-ordinator / Lead first aider is aware of any child who has a medical condition that may require support at school, and is also aware of any child with a medical condition who has not yet had a formal diagnosis but for whom information has been received in school from parents.
• Risk assessments for school visits, holidays, and other school activities outside of the normal timetable include consideration for any child with a medical condition.

• Individual healthcare plans (IHPs) are initiated, monitored and reviewed at least annually.

• The focus of support is on the needs of each individual child and how their medical condition impacts on their school life.

• The school has a designated member of staff to liaise with the local authority (LA) and other partners to ensure that the provision of education for a child unable to attend school because of illness or injury will start as quickly as possible.

• Consideration is given as to how children will be reintegrated back into school after periods of absence due to their medical condition.

The role of school staff
Any member of staff may be asked to provide support to pupils with medical conditions, in a specific context relevant to their role. Administering medicines is not part of teachers’ professional duties but they are expected to take into account the needs of pupils with medical conditions that they teach. All school staff will receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know what to do or where to get support, when they become aware that a pupil with a medical condition needs help.

The role of the school nurse/school nursing service
Bingley Grammar School has access to the school nursing service which is responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, this will be done before the child starts at the school. The school nursing service will liaise between medical practitioners and school staff on implementing a child’s IHP and provide advice and training.

The role of other healthcare professionals, including GPs and paediatricians
The GP or other healthcare professional will notify the school nurse when a child has been identified as having a medical condition that will require support at school. They will be involved in drawing up IHPs. Specialist local health teams are also available to provide support for children with particular conditions (eg asthma, diabetes).

The role of the individual pupil
Pupils with medical conditions will be fully involved in discussions about their medical support needs and expected to comply with their IHP.

After discussion with parents, children who are competent are encouraged to take responsibility for managing their own medicines and procedures and this will be reflected within their IHP. Wherever possible, children will be allowed to carry their own medicines and relevant devices or will be able to access their medicines for self-
medication quickly and easily. Children who can take their medicines themselves or manage procedures may require an appropriate level of supervision.

If it is not appropriate for a child to self-manage, then relevant staff will help to administer medicines and manage procedures for them. If a child refuses to take medicine or carry out a necessary procedure, staff will not force them to do so, but follow the procedure agreed in the IHP. Parents will be informed so that alternative options can be considered.

The role of the parents
Parents are expected to provide the school with sufficient and up-to-date information about their child’s medical needs. Parents are key partners and will be involved in the drafting, development and review of their child’s IHP. They are expected to carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment, and must ensure they or another nominated adult are contactable at all times.

The role of the local authority
Local authorities (LAs) provide school nurses for maintained schools and academies. The LA provides support, advice and guidance, including suitable training for school staff, to ensure that the support specified within IHPs can be delivered effectively. The LA works with Bingley Grammar School to support pupils with medical conditions to attend full time but has a duty to make other arrangements when it is clear that a child will be away from schools for 15 days or more because of health needs (whether consecutive or cumulative across the school year). The school works with the LA and other partners to ensure that such provision will start as soon as possible.

Procedure to be followed when notification is received that a pupil has a medical condition
Where possible the school will not wait for a formal diagnosis before providing support to a pupil with medical needs. Support will be provided based on the available medical evidence and after consultation with parents.

For children starting at Bingley Grammar School, arrangements should be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or changed circumstances, every effort will be made to ensure that arrangements are put in place within two weeks. For children moving on to another school, relevant information will be passed to the new school as soon as possible.

Individual healthcare plans (IHPs)
Many pupils with medical conditions will require an IHP which will help to ensure that each pupil’s medical conditions are supported. The school, healthcare professionals and parents will agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached, the Headteacher will take a final view.

- IHPs may be initiated, in consultation with the parent, by a member of school staff (usually the Medical Needs Co-ordinator) or a healthcare professional
involved in providing care to the child. Those involved will agree who will take
the lead in writing the plan, but responsibility for ensuring it is finalised and
implemented rests with the school.

- IHPs will be developed with the child’s best interests in mind
- IHPs will ensure that the school assesses and manages risks to the child’s
  education, health and social well-being and minimise disruption
- IHPs will be drawn up in partnership between the school, parents, and a named
  relevant healthcare professional who can best advise on the particular needs of
  the child. Pupils will also be involved whenever appropriate.
- When a child is returning to school following a period of hospital education or
  alternative provision (including home tuition) the school will work with the LA
  and education provider to ensure that the IHP identifies the support the child
  will need to reintegrate effectively
- The IHP will state the steps the school will take to help the child manage their
  condition and overcome any potential barriers to getting the most from their
  education. The format of IHPs will vary to enable the school to choose what is
  most effective for the specific needs of each pupil, and the level of detail within
  plans will depend on the complexity of the child’s condition and the degree of
  support needed. However, all will contain the following information:
  - The medical condition, its triggers, signs, symptoms and treatments.
  - The pupil’s resulting needs, including medication (dose, side-effects and
    storage) and other treatments, time, facilities, equipment, testing, access to
    food and drink (where this is used to manage their condition), dietary
    requirements and environmental issues (e.g. crowded corridors), travel time
    between lessons.
  - Specific support for the pupil’s educational, social and emotional needs –
    e.g. how absences will be managed, requirements for extra time to complete
    exams, use of rest periods or additional support in catching up with lessons,
    counselling sessions.
  - Level of support needed including in emergencies. If a child is self-managing
    their medication this will be clearly stated with appropriate arrangements for
    monitoring.
  - Who will provide this support, their training needs, expectations of their role
    and confirmation of proficiency to provide support for the child’s medical
    condition from a healthcare professional.
  - Cover arrangements for when the usual support person is unavailable.
  - Who in the school needs to be aware of the child’s condition and the support
    required.
  - Arrangements for written permission from parents and the Headteacher for
    medication to be administered by a member of staff, or self-administered by
the pupil during school hours. Parents will have a copy of the procedures to be followed when administering medicines.

- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments.

- Where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child’s condition.

- What to do in an emergency, including whom 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 IHP).

- IHPS will be easily accessible to all who need to refer to them while preserving confidentiality.

- Where a child has SEN but does not have a statement or education, health and care (EHC) plan, their SEN needs will be mentioned in their IHP.

- Plans will be reviewed at least annually or earlier if evidence is presented that the child’s needs have changed.

A flow chart for identifying and agreeing the support a child needs and developing an IHP is provided at appendix A. A template for a pupil’s healthcare plan is provided at appendix B. A letter inviting a parent/carer to an IHC development meeting is at Appendix C.

Confidentiality
In compliance with the general data protection regulation (GDPR), Bingley Grammar School provides a privacy notice which explains to parents and students how the school may use and share confidential medical and other information which is held concerning the student. For students over the age of 13 there is a similar privacy notice available.

Staff training
Periodical training is undertaken so that all staff are aware of the school’s policy for supporting pupils with medical conditions and their role in implementing that policy and to keep them up-to-date with procedures to be followed. New staff will receive training through their induction process. The named relevant healthcare professional advises the school on training that will help ensure that all medical conditions affecting pupils in the school are understood fully. This includes preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.

During the development or review of IHPs suitable training requirements for staff who will be involved with the individual pupil will be discussed. The relevant healthcare professional will normally lead on identifying, and agreeing with the school, the type and level of training required, and how this can be obtained. Once trained, the healthcare professional will provide confirmation of the proficiency of
staff in a medical procedure, or in providing medication. On reviewing the IHP any further training requirements for staff will be discussed.

The family of a child will be able to provide relevant information to school staff about how their child’s needs can be met, and parents will be asked for their views. However, they will not be the sole trainer.

**Managing medicines in the school**

Details of how the school manages medicines in school can be found in the school’s policy on administration of medicines. Medicines are carefully labelled and stored. Access is readily available when the need arises. The school ensures that written records are kept of all medicines administered to children, and parents are informed if their child has been unwell at school.

**School trips and sports activities**

At Bingley Grammar School pupils with medical conditions are encouraged to participate in school trips and visits, or in sporting activities, and will not be prevented from doing so wherever possible. Teachers will be aware of how a child’s medical condition will impact on their participation. A risk assessment will be undertaken so that planning arrangements, with any reasonable adjustments, take account of any steps needed to allow all children to participate according to their own abilities. Parents and pupils will be consulted and advice taken from the relevant healthcare professional to ensure that pupils can participate safely, if at all.

**Emergency situations**

Pupils in the school will know to inform a teacher immediately if they think help is needed.

Where a child has an IHP, it will clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures.

If a child needs to be taken to hospital, staff will stay with the child until the parent arrives, or, if an ambulance needs to be called, will accompany the child to hospital and stay until a parent arrives there.

The school holds spare salbutamol inhalers for use only in emergencies. Other than in a life threatening situation, the inhalers may only be used by children whose parents have agreed the use of the emergency inhaler and who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication. The inhaler will be used if the pupil’s prescribed inhaler is not available (eg because it is broken, or empty).

Bingley Grammar School possesses an automatic external defibrillator (AED) for emergency use and appropriate staff are trained to operate this equipment.

**Unacceptable practice**

It is considered as unacceptable to:
- Prevent children from easily accessing their inhalers and medication and from administering their medication when and where necessary.

- Assume that every child with the same condition requires the same treatment.

- Ignore the views of the child or their parents; or ignore medical evidence or opinion, (although this may be challenged).

- Send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHP.

- Send a child with a medical condition to the school office or medical room without being accompanied, or with someone unsuitable.

- Penalise children for their attendance record if their absences are related to their medical condition e.g. hospital appointments.

- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively.

- Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. (No parent should have to give up working because the school is failing to support their child’s medical needs).

- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

Staff may face disciplinary action if any such instances are brought to the attention of the Headteacher.

Complaints

If parents or pupils are dissatisfied with the support provided they should discuss their concerns informally with the appropriate member of staff. If, however, this does not resolve the situation then they should make a formal complaint using the school’s complaints procedure.

Monitoring and evaluation

The efficacy of this policy will be reviewed at least annually, or sooner in the light of any incidents that may occur or any changes to legislation.

Policy Review
Originator: JES
Partner Governor: GS
Ratified by: Full Governing Body
Date of Review: November 2020
Next review: November 2021
Appendix A

Model process for developing individual healthcare plans

1. Parent or healthcare professional informs school that child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed.

2. Headteacher or member of staff to whom this has been delegated (normally the Medical Needs Co-ordinator) co-ordinates meeting to discuss child’s medical support needs and identifies member(s) of staff who will provide support to pupil.

3. Meeting to discuss and agree on need for IHP to include key school staff, child, parent, relevant healthcare professional, and other clinicians as appropriate (or to consider written evidence provided by them).

4. Develop IHP in partnership – agree who leads on writing it. Input from healthcare professional must be provided.

5. School staff training needs identified.

6. Healthcare professional commissions/delivers training or guidance in relevant medical support needs

7. IHP implemented and circulated to all relevant staff.

8. IHP reviewed annually or when condition changes. Parent or healthcare professional to initiate if changes required.
### Appendix B

**Individual Healthcare Plan**

1. **CHILD/ YOUNG PERSON'S INFORMATION**
   1.1 **CHILD/ YOUNG PERSON DETAILS**

<table>
<thead>
<tr>
<th>Child’s name:</th>
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<tbody>
<tr>
<td>Date of birth:</td>
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<tr>
<td>Year group:</td>
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<td>Address:</td>
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<tr>
<td>Town:</td>
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<tr>
<td>Postcode:</td>
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<tr>
<td><strong>Medical condition(s):</strong></td>
<td>Give a brief description of the medical condition(s) including description of signs, symptoms, triggers, behaviours, treatments, equipment or devices required etc.</td>
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<tr>
<td><strong>Allergies:</strong></td>
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<td><strong>Date:</strong></td>
<td></td>
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<tr>
<td><strong>Review Date:</strong></td>
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</table>
1.2 FAMILY CONTACT INFORMATION

<table>
<thead>
<tr>
<th>Name:</th>
<th>Relationship:</th>
<th>Home phone number:</th>
<th>Mobile phone number:</th>
<th>Work phone number:</th>
<th>Email:</th>
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</table>

1.3 ESSENTIAL INFORMATION CONCERNING THIS CHILD / YOUNG PERSON’S HEALTH NEEDS

<table>
<thead>
<tr>
<th>Name:</th>
<th>Contact Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specialist nurse (if applicable):</td>
<td></td>
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<tr>
<td>Consultant paediatrician (if applicable):</td>
<td></td>
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<tr>
<td>GP:</td>
<td></td>
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<tr>
<td>Health visitor/ school nurse:</td>
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<tr>
<td>Person with overall responsibility for implementing plan:</td>
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<tr>
<td>Any provider of alternate provision:</td>
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</tr>
<tr>
<td>Medical Condition</td>
<td>Drug</td>
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Does treatment of the medical condition affect behaviour or concentration?

Are there any side effects of the medication?

Is there any ongoing treatment that is not being administered in school? What are the side effects?

Any medication will be stored

________________________________________________
________________________________________________
________________________________________________

2. ROUTINE MONITORING (IF APPLICABLE)

Some medical conditions will require monitoring to help manage the child/ young person’s condition.

What monitoring is required?

________________________________________________
________________________________________________
________________________________________________
________________________________________________
3. EMERGENCY SITUATIONS

An emergency situation occurs whenever a child/young person needs urgent treatment to deal with their condition.

<table>
<thead>
<tr>
<th>What is considered an emergency situation?</th>
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<tbody>
<tr>
<td>What are the symptoms?</td>
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<tr>
<td>What are the triggers?</td>
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<tr>
<td>What action must be taken?</td>
</tr>
<tr>
<td>Are there any follow up actions (eg tests or rest) that are required?</td>
</tr>
</tbody>
</table>

4. IMPACT ON CHILD’S LEARNING

How does the child’s medical condition affect learning? i.e. memory, processing speed, coordination etc

| Does the child require any further assessment of their learning? |

5. PHYSICAL ACTIVITY

Are there any physical restrictions caused by the medical condition(s)?

Is any extra care needed for physical activity?
### Actions before exercise

### Actions during exercise

### Actions after exercise

#### 6. TRIPS AND ACTIVITIES AWAY FROM SCHOOL

<table>
<thead>
<tr>
<th>What care needs to take place?</th>
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<tbody>
<tr>
<td>When does it need to take place?</td>
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<tr>
<td>If needed, is there somewhere for care to take place?</td>
<td></td>
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<tr>
<td>Who will look after medicine and equipment?</td>
<td></td>
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<tr>
<td>Who outside of the school needs to be informed?</td>
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<tr>
<td>Who will take overall responsibility for the child/young person on the trip?</td>
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</table>

#### 7. SCHOOL ENVIRONMENT

| Can the school environment affect the child’s medical condition? |  |
| How does the school environment affect the child’s medical condition? |  |
| What practical changes can the school make to deal with these issues? |  |
| Location of school medical room |  |
8. EDUCATIONAL, SOCIAL & EMOTIONAL NEEDS

Pupils with medical conditions may have to attend clinic appointments to review their condition. These appointments may require a full day’s absence and should not count towards a child’s attendance record.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
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<tbody>
<tr>
<td>Is the child/young person likely to need time off because of their condition?</td>
<td></td>
</tr>
<tr>
<td>What is the process for catching up on missed work caused by absences?</td>
<td></td>
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<tr>
<td>Does this child require extra time for keeping up with work?</td>
<td></td>
</tr>
<tr>
<td>Does this child require any additional support in lessons? if so what?</td>
<td></td>
</tr>
<tr>
<td>Is there a situation where the child/young person will need to leave the classroom?</td>
<td></td>
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<tr>
<td>Does this child require rest periods?</td>
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<tr>
<td>Does this child require any emotional support?</td>
<td></td>
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<tr>
<td>Does this child have a ‘buddy’ e.g. help carrying bags to and from lessons?</td>
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</tbody>
</table>

11. STAFF TRAINING

Governing bodies are responsible for making sure staff have received appropriate training to look after a child/young person. School staff should be released to attend any necessary training sessions if it is agreed they need.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>What training is required?</td>
<td></td>
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<tr>
<td>Who needs to be trained?</td>
<td></td>
</tr>
<tr>
<td>Has the training been completed?</td>
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</tbody>
</table>

Please sign and date.
Please use this section for any additional information for this child or young person.

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<table>
<thead>
<tr>
<th>Name</th>
<th>Signatures</th>
<th>Date</th>
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</thead>
<tbody>
<tr>
<td>Young person</td>
<td></td>
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<tr>
<td>Parents/Carer</td>
<td></td>
<td></td>
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<tr>
<td>Healthcare Professional (if applicable)</td>
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<tr>
<td>School Representative (if applicable)</td>
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<tr>
<td>School Nurse (if applicable)</td>
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For School Internal Purposes Only

<table>
<thead>
<tr>
<th>Information recorded in/copied to</th>
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<tbody>
<tr>
<td>Supporting documents attached eg. Risk assessment</td>
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Appendix C

LETTER INVITING PARENT/CARER TO CONTRIBUTE TO INDIVIDUAL HEALTHCARE PLAN DEVELOPMENT

Dear Parent/Carer

Developing an individual healthcare plan for [child’s name]
Thank you for informing us of [child’s name]’s medical condition. For your information I enclose a copy of the school’s policy for supporting pupils with medical conditions.

An individual healthcare plan (IHC) may need to be prepared, setting out what support [child’s name] needs and how this will be provided. IHCs are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on [child’s name]’s case. The aim is to ensure that we know how to support [child’s name] effectively and to provide clarity about what needs to be done, when and by whom. Although IHCs are likely to be helpful in the majority of cases, it is possible that [child’s name] will not require one. We will need to consider how [child’s name]’s medical condition impacts on his/her ability to participate fully in school life, and the level of detail within the plan will depend on the complexity of [child’s name]’s condition and the degree of support needed.

A meeting to start the process of developing [child’s name]’s IHC has been scheduled for [date]. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist. Please provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached IHC template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you to contact me [them] by email or telephone if this would be helpful.

Yours sincerely

Miss E Parker
Medical Needs Coordinator