




THE BISHOP'S STORTFORD HIGH SCHOOL
SUPPORTING STUDENTS WITH MEDICAL CONDITIONS POLICY

Date of last review:	September 2023	Review period:	1 year
Date of next review:	September 2024	Owner:	Student Welfare Committee
		Approval:	



TBSHS: A truly all-round education



Purpose

This policy describes the essential criteria for how TBSHS can meet the needs of children and young people with long-term conditions. It is in line with DfE statutory guidance on Supporting Students with Medical Conditions (2014) for governing bodies of maintained schools and proprietors of academies in England

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3#history>

The named member of school staff responsible for these medical conditions policy and its implementation is:

NAME: Miss Wendy Butler

ROLE: Assistant Headteacher (DSL/SMHL)

Responsibility Roles

- Sufficient staff available/suitably trained: TBSHS CPD Co-ordinator
- Cover arrangements in case of staff absence or staff turnover to ensure someone is always available – Cover Co-ordinator/Health & Safety Officer
- Briefing for supply teachers – Cover Coordinator
- Risk assessments for school visits, holidays, and other school activities outside the normal timetable – Trip Leader, organising the activity
- Monitoring of Individual Healthcare Plans (IHPs) – Assistant Headteacher (DSL/SMHL)
- Monitoring of Educational Healthcare Plans (EHCPs) – SENCo

TBSHS is an inclusive community that supports and welcomes students with medical conditions.

- TBSHS is welcoming and supportive of students with medical conditions. It provides children with medical conditions with the same opportunities and access to activities (both school-based and out-of-school) as other students. No child will be denied admission or prevented from taking up a place in this school because arrangements for their medical condition have not been made.
- At TBSHS we will listen to the views of students and parents/carers.
- Students and parents/carers feel confident in the care they receive from this school and the level of that care meets their needs.
- Staff understand the medical conditions of students at this school and that they may be serious, adversely affect a child's quality of life and impact on their ability and confidence.
- All staff understand their duty of care to children and young people and know what to do in the event of an emergency.
- The whole school & local health community understand and support the medical conditions policy.
- At TBSHS we understand that all children with the same medical condition will not have the same needs; our school will focus on the needs of each individual child.
- At TBSHS we recognise our duties as detailed in Section 100 of the Children and Families Act 2014 (and other relevant legislation, see DfE guidance p27). Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case, this school complies with their duties under that Act. Some may also have special educational needs (SEN) and may have a Statement or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For children with SEN this policy should be read in conjunction with the Special educational needs and disability (SEND) code of practice.

TBSHS's medical conditions policy is drawn up in consultation with a wide range of local key stakeholders within both the school and health settings.

- Stakeholders include students, parents/carers, school staff, governors and relevant local health specialist services.

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

- Students, parents/carers, relevant local healthcare staff and other external stakeholders are informed of and reminded about the medical conditions policy through clear communication channels.

All staff understand and are trained in what to do in an emergency for children with medical conditions at this school.

- All school staff, including temporary or supply staff, are aware of the medical conditions at this school and understand their duty of care to students in an emergency.
- Dependent upon the medical condition, relevant staff receive training on what to do in an emergency and this is refreshed at least once a year.
- All children with medical conditions that are complex, long-term or where there is a high risk that emergency intervention will be required at this school have an individual healthcare plan (IHP), which explains what help they need in an emergency. The IHP will accompany a student should they need to attend hospital. Parental permission will be sought and recorded in the IHP for sharing the IHP within emergency care settings.

At TBSHS we make sure that all staff providing support for a student have received suitable training and ongoing assistance to ensure that they have confidence to fulfil the requirements set out in the student's IHP. This should be provided by a suitably qualified healthcare professional and/or parent/carer. A suitably qualified healthcare professional will confirm their competence and this school keeps an up to date record of all training undertaken and by whom.

This school has chosen:

- **not** to hold an emergency salbutamol inhaler for use by students.
- to hold a 'spare' emergency adrenaline auto-injector (AAI) for use on children who are at risk of anaphylaxis but whose own device is not available or not working and for whom parental consent for its use has been obtained. (see Appendix 3 for further information)]

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

- All staff, including temporary or supply staff should be aware of the content of this policy, know what action to take in an emergency and receive updates at least yearly. A suitably qualified healthcare professional will provide biannual training for common conditions such as asthma, allergies, diabetes and epilepsy.
- If a student needs to attend hospital, a member of staff (preferably known to the student) will stay with them until a parent/carer arrives, or accompany a child taken to hospital by ambulance. Staff will not take students to hospital in their own car.

This school has clear guidance on providing care and support and administering medication at school.

- This school understands the importance of medication being taken and care received as detailed in the student's IHP.
- Medication will only be administered when it would be detrimental to a child's health or school attendance not to do so.

- At TBSHS we will make sure that there are sufficient members of staff who have been trained to administer the medication and meet the care needs of an individual child. This school will ensure that there are sufficient numbers of staff trained to cover any absences, staff turnover and other contingencies. This school's governing body has made sure that there is the appropriate level of insurance and liability cover in place.
- TBSHS staff will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent except in exceptional circumstances, and every effort will be made to encourage the student to involve their parent/carer, while respecting their confidentiality.
- When administering medication, for example pain relief, this school will check the maximum dosage and when the previous dose was given. Parents/carers will be informed.
- This school will make sure that a trained member of staff is available to accompany a pupil with a medical condition on an off-site visit, including overnight stays.
- Parents/carers at this school understand that they should let the school know immediately if their child's needs change.
- If a student misuses their medication, or anyone else's, their parent/carer is informed as soon as possible and the school's disciplinary procedures are followed.

The TBSHS Parental Agreement to Administer Medication is outlined in Appendix 4.

TBSHS has clear guidance on the storage of medication and equipment at school.

- At TBSHS we make sure that all staff understand what constitutes an emergency for an individual child and makes sure that emergency medication/equipment, e.g. asthma inhalers, epi-pens etc. are readily available wherever the child is in the school and on off-site activities, and are not locked away.
- Students may carry their own medication/equipment, or they should know exactly where to access it. Those students deemed competent to carry their own medication/equipment with them will be identified and recorded through the student's IHP in agreement with parents/carers.
- Staff at this school can administer a controlled drug to a student once they have had specialist training.
- At TBSHS we will make sure that all medication is stored safely, and that students with medical conditions know where they are at all times and have access to them immediately. Under no circumstances will medication be stored in first aid boxes.
- At TBSHS we will only accept medication that is in date, labelled and in its original container including prescribing instructions for administration. The exception to this is insulin, which although it must still be in date, will generally be supplied in an insulin injector pen or a pump.
- Parents/carers are asked to collect all medications/equipment at the end of the school term and to provide new and in-date medication at the start of each term.
- At TBSHS, we dispose of needles and other sharps in line with local policies. Sharps boxes are kept securely at school and will accompany a child on off-site visits. They are collected and disposed of in line with local authority procedures.

This school has clear guidance about record keeping.

- As part of the school's admissions process and annual data collection exercise parents/carers are asked if their child has any medical conditions. These procedures also cover transitional arrangements between schools.
- At TBSHS we use an IHP to record to support an individual student's needs around their medical condition. The IHP is developed with the student (where appropriate), parent/carer, designated named member of school staff, specialist nurse (where appropriate) and relevant healthcare services. Where a child has SEN but does not have an EHC plan, their special educational needs are mentioned in their IHCP. Appendix 1 is used to identify and agree the support a child needs and the development of an IHCP.
- At TBSHS, we have a centralised register of IHPs, and an identified member of staff has the responsibility for this register.
- IHPs are regularly reviewed, at least every year or whenever the student's needs change.

- The student's (where appropriate) parents/carers, specialist nurse (where appropriate) and relevant healthcare services hold a copy of the IHP. Other school staff are made aware of and have access to the IHP for the students in their care.
- At TBSHS we make sure that the student's confidentiality is protected.
- At TBSHS we seek permission from parents/carers before sharing any medical information with any other party.
- At TBSHS we keep an accurate record of all medication administered, including the dose, time, date and supervising staff.

The TBSHS Record of Medicine Administered to an Individual Child is outlined in Appendix 5 and the TBSHS Record of Medicine Administered to All Children is outlined in Appendix 6.

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.

- TBSHS is committed to providing a physical environment accessible to students with medical conditions and students are consulted to ensure this accessibility. At TBSHS we are also committed to an accessible physical environment for out-of-school activities.
- At TBSHS we make sure the needs of students with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities, extended school activities and residential visits.
- All staff are aware of the potential social problems that students with medical conditions may experience and use this knowledge, alongside the school's anti bullying policy, to help prevent and deal with any problems. They use opportunities such as PSHE and science lessons to raise awareness of medical conditions to help promote a positive environment.
- This school understands the importance of all students taking part in off- site visits and physical activity and that all relevant staff make reasonable and appropriate adjustments to such activities in order to make them accessible to all students. This includes out-of-school clubs and team sports. Risk assessments will be conducted as part of the planning process to take account of any additional controls required for individual student needs.
- At TBSHS we ensure that all relevant staff are aware that students should not be forced to take part in activities if they are unwell. They should also be aware of students who have been advised to avoid/take special precautions during activity, and the potential triggers for a student's medical condition when exercising and how to minimise these.

This school makes sure that students have the appropriate medication/equipment/food with them during physical activity and offsite visits.

- At TBSHS, we make sure that students with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at school as any other child, and that appropriate adjustments and extra support are provided.
- All school staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a student's medical condition.
- At TBSHS, we will not penalise students for their attendance if their absences relate to their medical condition.
- At TBSHS, we will refer students with medical conditions who are finding it difficult to keep up educationally to the SENCo or Inclusion Manager who will liaise with the students (where appropriate), parent/carer and the student's healthcare professional.
- Students at TBSHS learn what to do in an emergency.
- At TBSHS, we make sure that a risk assessment is carried out before any out-of-school visit, including work experience and educational placements. The needs of students with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required.

The TBSHS Request for School to Administer Medication is outlined in Appendix 7.

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

- At TBSHS, we are committed to identifying and reducing triggers both at school and on out-of-school visits.
- School staff have been provided with guidance and written information on medical conditions which includes avoiding/reducing exposure to common triggers. In more severe cases key staff will be provided with further guidance as discussed with parents/carers and the nursing service.
- The IHP details an individual student's triggers and details how to make sure the student remains safe throughout the whole school day and on out-of-school activities. Risk assessments are carried out on all out-of-school activities, taking into account the needs of students with medical needs.
- TBSHS reviews all medical emergencies and incidents to see how they could have been avoided, and changes school policy according to these reviews.

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

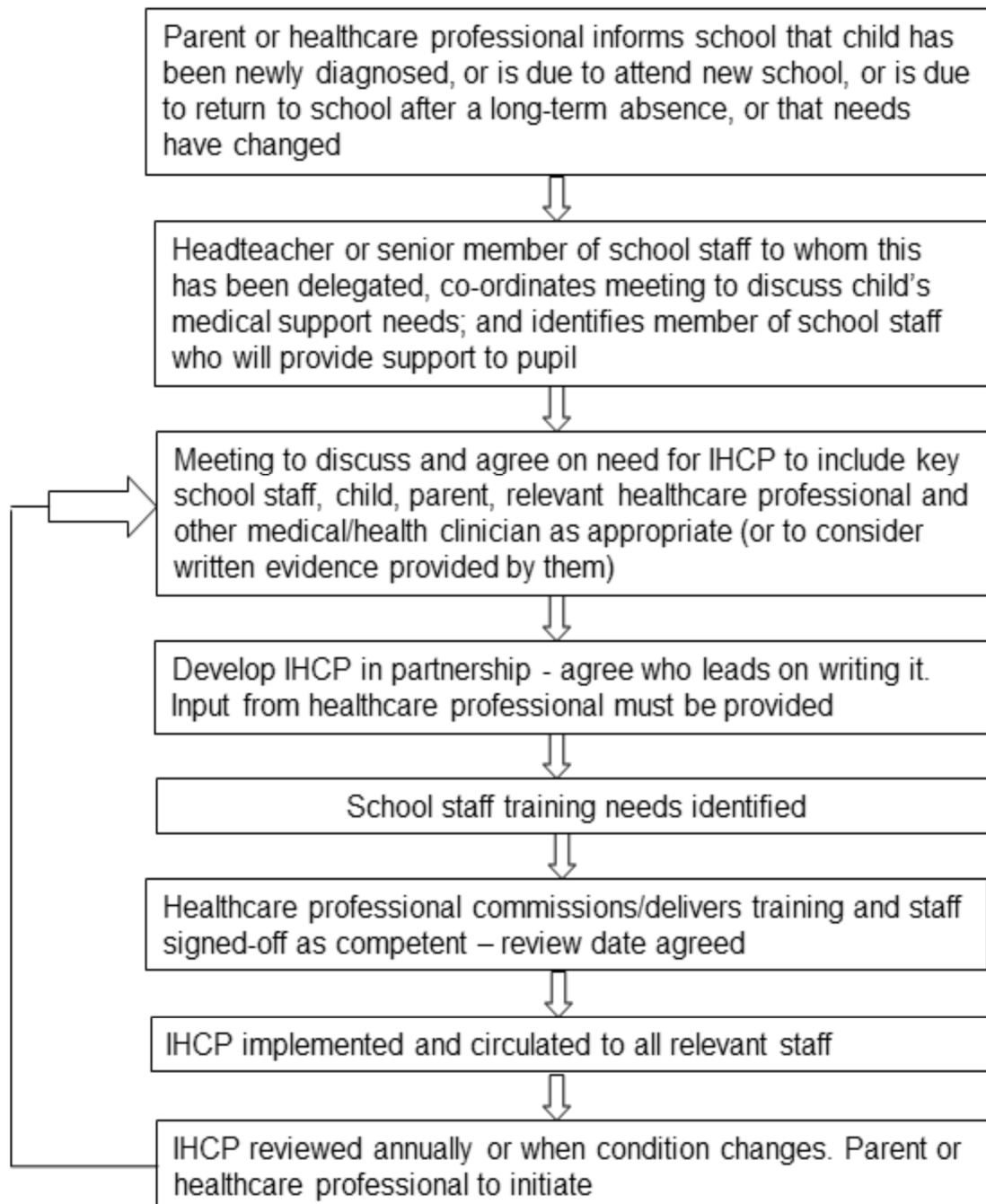
- TBSHS works in partnership with all relevant parties including the student (where appropriate), parent/carers, school's governing body, all school staff, employers and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.
- Key roles and responsibilities are outlined in Appendix 2.

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

- In evaluating the policy, TBSHS seeks feedback from key stakeholders including students, parents/carers, specialist nurses and other relevant healthcare professionals, school staff, local emergency care services and governors. The views of students with medical conditions are central to the evaluation process.
- Should parents and students be dissatisfied with the support provided they should discuss these concerns to the Headteacher.

Appendix 1

TBSHS process for developing Individual Healthcare Plans (IHCPs)



Appendix 2

Roles and responsibilities

Governing bodies – must make arrangements to support students with medical conditions in school, including making sure that a policy for supporting students with medical conditions in school is developed and implemented. They should ensure that students with medical conditions are supported to enable the fullest participation possible in all aspects of school life. Governing bodies should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. They should also ensure that any members of school staff who provide support to students with medical conditions are able to access information and other teaching support materials as needed.

Headteacher – should ensure that their school’s policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting students with medical conditions and understand their role in its implementation. Headteachers should ensure that all staff who need to know are aware of the child’s condition. They should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. Headteachers have overall responsibility for the development of individual healthcare plans (IHPs). They should also make sure that school staff are appropriately insured and are aware that they are insured to support students in this way. They should contact the school nursing service in the case of any child who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse.

School staff – any member of school staff may be asked to provide support to students with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers’ professional duties, they should take into account the needs of students with medical conditions that they teach. School staff should 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 and respond accordingly when they become aware that a student with a medical condition needs help.

School nursing services – every school has access to school nursing services. They are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they will do this before the child starts at the school. They would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with medical conditions, but may support staff on implementing a child’s individual healthcare plan and provide advice and liaison, for example on training. The school nursing service can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs - for example, there are good models of local specialist nursing teams offering training to local school staff, hosted by a local school. Community nursing teams will also be a valuable potential resource for a school seeking advice and support in relation to children with a medical condition.

Other healthcare professionals - including GPs, paediatricians, nurse specialists/community paediatric nurses – should notify the school nurse and work jointly when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans. Anyone dealing with the medical care of a student in school should contact the school nursing service to ensure a coordinated approach.

Students – with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other students will often be sensitive to the needs of those with medical conditions.

Parents/carers – should provide the school with sufficient and up-to-date information about their child’s medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents/carers are key partners and should be involved in the development and review of their child’s individual healthcare plan, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Appendix 3

Emergency Adrenaline Auto-injector (AAI)

The school has chosen to hold a “spare” AAI device for emergency use on children who are at risk of anaphylaxis but whose own device is not available or not working.

These AAI(s) held by the school are not a replacement for a student’s own AAI(s).

The protocol for the use of this is detailed below, following the Department of Health and Social Care AAI’s in schools (September 2017).

<https://www.gov.uk/government/publications/using-emergency-adrenaline-auto-injectors-in-schools>

The use, storage, care and disposal of spare AAI(s) will follow the school’s policy on supporting pupils with medical conditions. Specific guidance on storage and care is provided on page 12/13 of the Department of Health and Social Care Guidance on the use of AAIs in schools.

The school hold a register of children prescribed an AAI or where a doctor has provided a written plan recommending AAI(s) to be used in the event of anaphylaxis).

Written parental consent is sought for the use of the spare AAI as part of the student’s IHP.

The spare AAI will only be used on students where both parental consent and medical authorisation has been provided.

A record of use of any AAI(s) will be kept and Parents/carers will be informed if their child has been administered an AAI and whether this was the school’s spare or the student’s own device.

Appropriate support and training has been provided to staff in the use of AAI(s) in line with the school’s policy on supporting students with medical conditions.

All AAI devices including the spare AAI(s) are kept in a suitable location (**Front Office**). AAIs are not locked away and remain accessible and available for use and not more than 5 minutes from where they may be needed.

The spare AAI is clearly labelled to avoid confusion with that prescribed to a named student.

The school’s two volunteers for ensuring this protocol is followed are **Mrs. Pat Mulholland and Miss Rachel Engel**. They are to check on a monthly basis the AAI(s) are present and in date and that replacement AAI(s) are obtained when expiry dates approach.

Appendix 4**The Bishop's Stortford High School Parental Agreement to Administer Medicine**

The school will not give your child medicine unless you complete and sign this form, and the school has a policy that the staff can administer medicine. TBSHS will not administer medicines unless they have been prescribed by a GP and given in the original container by the pharmacist. Any forms must be completed annually, if this is a long-term condition. Please only pass on any medication that needs to be administered in school (no excess) and any unused medication will be disposed of if not collected by a parent/guardian.

Date for review to be initiated by	
Name of school/setting	
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

Medicine

Name/type of medicine (<i>as described on the container</i>)	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy, otherwise they cannot be administered.

Students cannot be given medication in school because they have forgotten to take it prior to arrival at school. Written consent or phone call permission will not be permitted.

Contact details

Name of child	
Daytime telephone number	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	Mrs. P. Mulholland

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 immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped and collect the remainder.

Signature: **Date:**

Appendix 5

TBSHS Record of Medicine Administered to an Individual Child

Name of school/setting	
Name of child	
Date medication provided by parent	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medication	

Staff signature:

Parent/Carer Signature:

Date:			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date:			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date:			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date:			
Time given			
Dose given			
Name of member of staff			
Staff initials			


Appendix 6

TBSHS Record of Medicine Administered to All Children

Name of school/setting:

Date	Child's name	Time	Name of medication	Dose given	Any reactions	Signature of staff	Print name

Appendix 7: TBSHS Request for School (Trips and Visits) to Administer Medication

	<p>THE BISHOP'S STORTFORD HIGH SCHOOL London Road, Bishop's Stortford, Hertfordshire, CM23 3LU, UK. +44 1279 868686</p>	<p>MED1 - Request For School To Administer Medication</p>
---	--	--

- The staff (Office and Teaching) at The Bishop's Stortford High School are unable to administer medication to your son/daughter except where careful guidance is given and the medication is essential. Should it be essential that your son/daughter has prescribed medicines administered by the School, form MED1 needs to be completed in such circumstances.
- The School must be notified by parents if their child is prescribed RITALIN and the medication must be left in the School Office. The child concerned must go to the Office to take their medication there.
- The administration in these circumstances will be carried out by the School Office staff by arrangement.
- Non prescribed medicines, (eg:) painkillers cannot be administered by the School.
- For complex medical regimes please consult with your son's/daughter's Head of year who will liaise with the school nursing service to produce a specific care plan.
- The school will not give your child medicine unless you complete and sign this form, and the Headteacher has agreed that school staff can administer the medication

STUDENT INFORMATION (To be completed by the parent/adult responsible for a child/young person)

Legal Surname:		Gender:	
Legal Forename:		Date Of Birth:	
Legal Middle Name(s):		Year/Reg Group:	
Home Address (Including Postcode):			

Condition and/or illness, give details below:

MEDICATION DETAILS (To be completed by the parent/adult responsible for a child/young person)

Name/type of medication (as described on the container):	
For how long will your child take this medication:	
Date Dispensed:	
Quantity received (In original packaging please)	
Full Directions For Use - Dosage and method:	
Full Directions For Use - Timing:	
Full Directions For Use - Special instructions:	
Full Directions For Use - Side effects:	
Full Directions For Use - Self-Administration:	
Procedures to take in an emergency:	

CONTACT DETAILS (To be completed by the parent/adult responsible for a child/young person)

I understand that I must deliver the medicine personally to (agreed member of staff) and accept that this is a service which the school is not obliged to undertake.

Relationship To Student:	
Name Of Parent/Carer:	
Signature Of Parent/Carer:	
Date:	
Home Address (Including Postcode):	
Telephone Number(s):	

NOTES

Data Processing/Storage Statement - Please note that the information collected on this form will be primarily used for the purpose of dealing with administering medication. If medical treatment is sought, then information on this form may be shared with the medical staff with the purpose of providing the most appropriate care. Information provided on this form may also be used to update the main student database where newer information is provided on this form and the main student database is out of date.