

St Catherine's Catholic Primary School



SUPPORTING PUPILS WITH MEDICAL CONDITIONS POLICY

MISSION STATEMENT

GROWING IN FAITH

*Our vision at St Catherine's Catholic Primary School
and all we do, and aspire to be,
is centred on the love, life and teaching of Jesus,
and rooted in the faith of the Catholic Church.*

AIMING FOR EXCELLENCE

*Our aim is to build a loving, happy, safe and welcoming school where
everyone has the opportunity and support to recognise, celebrate and
develop
their God given gifts and talents, learning in a creative and friendly school
family.*

LEARNING FOR LIFE

*Journeying together with each other,
we work in harmony
to provide outstanding Catholic Education
for all our pupils preparing them to fulfil their mission
to the world in which we live.*

Policy Adopted: March 2026

To be reviewed: March 2028

St Catherine's Catholic Primary School wishes to ensure that pupils with medical conditions receive appropriate care and support at school. All pupils have an entitlement to a full time curriculum or as much as their medical condition allows. This policy has been developed in line with the Department for Education's statutory guidance under a statutory duty form section 100 of the Children and Families Act 2014. The statutory duty came into force on 1st September 2014

The school will have regard to the statutory guidance issued. We take account of it, carefully consider it and we make all efforts to comply.

'Medical condition' for these purposes is either a physical or mental health medical condition as diagnosed by a healthcare professional which results in the child or young person requiring special adjustments for the school day, either ongoing or intermittently. This includes; a chronic or short-term condition, a long-term health need or disability, an illness, injury or recovery from treatment or surgery. Being 'unwell' and common childhood diseases are not covered.

1) Key roles and responsibilities

a) The Local Governing Committee of St Catherine's Catholic Primary School is responsible for:

- 1) Ensuring arrangements are in place to support pupils with medical conditions.
- 2) Ensuring there is a clear policy in place and that it is implemented effectively.
- 3) Ensuring that the Supporting Pupils with Medical Conditions Policy does not discriminate on any grounds.
- 4) Ensuring the policy covers arrangements for pupils who are competent to manage their own health needs.
- 5) Ensuring that all pupils with medical conditions are able to play a full and active role in all aspects of school life, participate in school visits / trips/ sporting activities, remain healthy and achieve their academic potential.
- 6) Ensuring that relevant training is delivered to a sufficient number of staff who will have responsibility to support children with medical conditions and that they are signed off as competent to do so. Staff to have access to information, resources and materials.
- 7) Ensuring written records are kept of, any and all, medicines administered to pupils.

b) The Headteacher is responsible for:

- 1) Ensuring the policy is developed effectively with partner agencies and then making staff aware of this policy.
- 2) The day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and Procedures.
- 3) Liaising with healthcare professionals regarding the training required for staff.
- 4) Identifying staff who need to be aware of a child's medical condition.
- 5) Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHPs in normal, contingency and emergency situations.
- 6) If necessary, facilitating the recruitment of staff for the purpose of delivering the promises made in this policy. Ensuring more than one staff member is identified, to cover holidays / absences and emergencies.
- 7) Continuous two way liaison with school nurses and school in the case of any child who has or develops an identified medical condition.
- 8) Ensuring confidentiality and data protection
- 9) Assigning appropriate accommodation and necessary resources/equipment for medical treatment/care
- 10) Ensuring that existing, newly appointed and supply (as needed) staff are familiar with the policy and procedures.

c) Staff members are responsible for:

- 1) Taking appropriate steps to support children with medical conditions and familiarising themselves with procedures which detail how to respond when they become aware that a pupil with a medical condition needs help.
- 2) Knowing where controlled drugs are stored and where the key is held.
- 3) Taking account of the needs of pupils with medical conditions in lessons.
- 4) Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, with particular specialist training if they have agreed to undertake a medication responsibility.
- 5) Allowing inhalers, adrenalin pens and blood glucose testers to be held in an accessible location, following DfE guidance.

d) School nurses are responsible for:

- 1) Collaborating on developing an IHP in anticipation of a child with a medical condition starting school.
- 2) Notifying the school when a child has been identified as requiring support in school due to a medical condition at any time in their school career.
- 3) Supporting staff to implement an IHP and then participate in regular reviews of the IHP. Giving advice and liaison on training needs.
- 4) Liaising locally with lead clinicians on appropriate support. Assisting the Headteacher in identifying training needs and providers of training.

e) Parents and carers are responsible for:

- 1) Keeping the school informed about any new medical condition or changes to their child/children's health.
- 2) Participating in the development and regular reviews of their child's IHP.
- 3) Completing a parental consent form to administer medicine or treatment before bringing medication into school.
- 4) Providing the school with the medication their child requires and keeping it up to date including collecting leftover medicine.
- 5) Carrying out actions assigned to them in the IHP with particular emphasis on, they or a nominated adult, being contactable at all times.

f) Pupils are responsible for:

- 1) Providing information on how their medical condition affects them.
 - 2) Contributing to their IHP (where age appropriate)
 - 3) Complying with the IHP and self-managing their medication or health needs including carrying medicines or devices, if judged competent to do so by a healthcare professional and agreed by parents.
- 2) Training of staff**
- a) All staff will be made aware of the 'Supporting Pupils with Medical Conditions' Policy.

- b) No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the condition and signed off as competent.
- c) School will keep a record of medical conditions supported, training undertaken and a list of staff qualified to undertake responsibilities under this policy.

3) **Medical conditions register/list**

- a) Schools admissions forms should request information on pre-existing medical conditions. Parents must have easy pathway to inform school at any point in the school year if a condition develops or is diagnosed. Consideration could be given to seeking consent from GPs to have input into the IHP and also to share information for recording attendance.
- b) A medical conditions list or register should be kept, updated and reviewed regularly by the nominated member of staff. Each class teacher should have an overview of the list for the pupils in their care, within easy access.
- c) Supply staff and support staff should similarly have access on a need to know basis. Parents should be assured data sharing principles are adhered to.
- d) For pupils on the medical conditions list key stage transition points meetings should take place in advance of transferring to enable parents, school and health professionals to prepare IHP and train staff if appropriate.

4) **Individual Healthcare Plans (IHPs)**

- a) Where necessary an Individual Healthcare Plan (IHP) will be developed in collaboration with the pupil, parents/carers, Headteacher, SENDCo and medical professionals as appropriate.
- b) IHPs will be easily accessible to all relevant staff, including supply/agency staff, whilst preserving confidentiality. Staffrooms are inappropriate locations under Information Commissioner's Office (ICO) advice for displaying IHP as visitors /parent helpers etc. may enter. If consent is sought from parents a photo and instructions may be displayed.. ***However, in the case of conditions with potential life-threatening implications the information should be available clearly and accessible to everyone.***
- c) IHPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.
- d) Where a pupil has an Education, Health and Care plan, the IHP will be linked to it or become part of it.

- e) Where a child is returning from a period of hospital education or alternative provision or home tuition, collaboration between the LA /AP provider and school is needed to ensure that the IHP identifies the support the child needs to reintegrate.

5) Transport arrangements

- a) Where a pupil with an IHP is allocated school transport the school should invite a member of DCC Transport team who will arrange for the driver or escort to participate in the IHP meeting. A copy of the IHP will be copied to the Transport team and kept on the pupil record. The IHP must be passed to the current operator for use by the driver /escort and the Transport team will ensure that the information is supplied when a change of operator takes place.
- b) For some medical conditions the driver/ escort will require adequate training. For pupils who receive specialised support in school with their medical condition this must equally be planned for in travel arrangements to school and included in the specification to tender for that pupil's transport.
- c) When prescribed controlled drugs need to be sent in to school, parents will be responsible for handing them over to the adult in the transport in a suitable bag or container. They must be clearly labelled with name and dose etc.
- d) Controlled drugs will be kept under the supervision of the adult in the car throughout the journey and handed to a school staff member on arrival. Any change in this arrangement will be reported to the Transport team for approval or appropriate action.

6) Education Health Needs (EHN) referrals

- a) All pupils of compulsory school age who because of illness, lasting 15 days or more, would not otherwise receive a suitable full-time education are provided for under the local authority's duty to arrange educational provision for such pupils.
- b) In order to provide the most appropriate provision for the condition the EHN team accepts referrals where there is a medical diagnosis from a medical consultant.

7) Medicines

- a) Where possible, unless advised it would be detrimental to health, medicines should be prescribed in frequencies that allow the pupil to take them outside of school hours.
- b) If this is not possible, prior to staff members administering any medication, the parents/carers of the child must complete and sign a parental consent to administration of medicine form.

- c) No child will be given any prescription or non-prescription medicines without written parental consent except in exceptional circumstances, i.e., where verbal consent has been given over the phone and written consent is provided after the event.
- d) Where a pupil is prescribed medication by a healthcare professional without their parents'/carers' knowledge, every effort will be made to encourage the pupil to involve their parents while respecting their right to confidentiality.
- e) No child under 16 years of age will be given medication containing aspirin without a doctor's prescription.
- f) Medicines **MUST** be in date, labelled, and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered.
- g) A maximum of **four** weeks' supply of the medication may be provided to the school at one time.
- h) A child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. Monitoring arrangements may be necessary. Schools should otherwise keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency.
- i) Medications will be stored in the School Office.
- j) Any medications left over at the end of the course will be returned to the child's parents.
- k) Written records will be kept of any medication administered to children.
- l) Pupils will never be prevented from accessing their medication as long as it has been correctly presented to the school, i.e., original box, labelled, etc.
- m) St Catherine's Catholic Primary School cannot be held responsible for side effects that occur when medication is taken correctly.
- n) Staff will not force a pupil, if the pupil refuses to comply with their health procedure, and the resulting actions will be clearly written into the IHP which will include informing parents.

8) Emergencies

- a) Medical emergencies will be dealt with under the school's emergency procedures which will be communicated to all relevant staff so they are aware of signs and symptoms.

- b) Pupils will be informed in general terms of what to do in an emergency such as telling a teacher.
- c) If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents arrive.

9) Day trips, residential visits and sporting activities

- a) Unambiguous arrangements should be made and be flexible enough to ensure pupils with medical conditions can participate in school trips, residential stays, sports activities and not prevent them from doing so unless a clinician states it is not possible.
- b) To comply with best practice risk assessments should be undertaken, in line with H&S executive guidance on school trips, in order to plan for including pupils with medical conditions. Consultation with parents, healthcare professionals etc. on trips and visits will be separate to the normal day to day IHP requirements for the school day.
- c) Pupils who require controlled medication (Asthma Inhaler/Auto Injector) must have access to their medication at all times including when attending school trips or sporting events. It is the responsibility of the lead member of staff for the trip to ensure that any medication held in the School Office is collected on the day of the trip and returned back to the School Office on return to school.

10) Definitions

- a) 'Parent(s)' is a wide reference not only to a pupil's birth parents but to adoptive, step and foster parents, or other persons who have parental responsibility for, or who have care of, a pupil.
- b) 'Medication' is defined as any prescribed or over the counter treatment.
- c) 'Prescription medication' is defined as any drug or device prescribed by a doctor, prescribing nurse or dentist and dispensed by a pharmacist with instructions for administration, dose and storage.
- d) A 'staff member' is defined as any member of staff employed at St Catherine's Catholic Primary School.

Appendix 1: Being notified a child has a medical condition

