

# **Medical Care Policy**

# We walk by faith and not by sight: 2 Corinthians 5:7

#### Introduction

This policy statement underlines the Academy's recognition of the importance of Medical Care. We have adopted Sandwell's Policy which was agreed by the Health and Safety Committee.

The legal framework for dealing with the health and safety of pupils is based in health and safety legislation. The law imposes duties on employers:

These guidelines provide advice for St Paul's on the management of children with medical needs. This is important in order to ensure such children are able to access the curriculum when in school, and are not excluded unnecessarily.

- At times we will have pupils on roll with significant medical needs. With increasing inclusion more pupils with this type of need will attend mainstream education including some with complex medical conditions.
- Know about routine management of a child with a chronic condition or the emergency management of a child with a medical problem. There will be occasions where staff may be asked to administer medication either in an emergency situation or to facilitate a child's attendance. They cannot be directed to do so. The administration of medicines by staff is voluntary and is not a contractual duty.
- For pupils who have serious medical conditions such as diabetes, epilepsy, severe allergies or severe asthma, or who need regular prescribed medication, for example ritalin, an individual health care plan should be drawn up. This should be done in collaboration with the child (if appropriate), the parents, school nurse, paediatrician, and the Academy staff.

# **Legal framework**

# **Key points from the legal framework**

- Local authorities, Academies and governing bodies are responsible for the health and safety of children in their care. The legal framework dealing with the health and safety of all pupils in Academies derives from health and safety legislation
- Children with medical needs do not necessarily have special educational needs (SEN).
- Anyone caring for children including teachers, other Academy staff and day care staff in charge of children have a common law duty of care to act like any reasonably prudent parent. Staff need to make sure that children are healthy and safe. In exceptional circumstances the duty of care could extend to administering medicine and/or taking action in an emergency. This duty also extends to staff leading activities taking place off site, such as visits, outings or field

trips. The Children's Act 1989 describes what is reasonable for promoting or safeguarding children's welfare. This also gives some protection to support staff and teachers acting reasonably in emergency situations.

• There is no legal or contractual duty on staff to administer medicine or supervise a child taking it. **This is a voluntary role.** 

# Responsibilities

# The governing body should:

- Ensure that the Academy has a policy for supporting pupils with medical needs in accordance with LA guidance
- Ensure that the policy is appropriately implemented and monitored within the Academy
- Ensure that staff have appropriate training to support pupils with medical needs
- Liaise with the health services when necessary regarding the policy in general or its application to specific pupils

# The Principal should:

- Implement the Academy's policy for management of medical needs
- Sign the indemnity form with each employee administering medications in Academies Management of children with medical needs in schools Children and Families
- Ensure that all staff who support children with medical needs are appropriately qualified, trained, and supported
- Ensure procedures are followed and Health Care Plans are reviewed as appropriate
- Ensure that all staff are familiar with the policy
- Ensure that accurate records are kept regarding children with medical needs
- Ensure that the Academy health nurse, community children's nurses and Academy staff (in liaison with other health professionals, the parents,) complete together the Health Care Plans for those children who need them
- Annually review, with the Academy health nurse or community children's nurse's specific medical needs of children in the Academy including the need for Health Care Plans and training for staff
- Be responsible for making decisions about administering medication, guided by the Academy's policy
- Share information with parents to ensure the best care for a pupil
- Seek parents' agreement before passing on information about their child's health to other Academy/health service staff in line with data protection requirements
- Ensure that parents' cultural and religious views are respected
- Make sure that all parents are aware of the Academy's policy and procedures for dealing with medical needs.

# Teachers and other Academy staff responsible for the welfare of pupils should:

- Take part in training regarding a child's medical needs if they have volunteered to support the child or administer medication. (This includes supervising pupils who self-administer medication if the school has consented to do this within the guidelines.)
- Understand the nature of the condition, where they have pupils with medical needs in their class and be aware of when and where the pupil may need extra attention.
- Be aware of the likelihood of an emergency arising and what action to take if one occurs
- Be aware of the staff who have volunteered and are trained to support the child and the backup arrangements if responsible staff are absent or unavailable
- Be aware of the times in the school day where other staff may be responsible for pupils e.g. in the playground.
- Inform parents when the medication is due to be out of date or to run out. The parents will need at least a weeks' notice.

# The Health Service Health services have a statutory duty to:

- Purchase services to meet local needs
- Cooperate with LAs and school governing bodies to identify need, plan and coordinate effective local health provision within available resources
- Designate a medical officer with specific responsibility for children with SEN, some of whom will have medical needs.

#### The health service should:

- Provide information and communicating effectively with parents and schools, to help them understand the child's medical condition
- Provide additional assistance to parents and schools
- Provide advice and appropriate training to school staff who are willing to support pupils with medical needs
- Confirm competence of school staff to carry out specific procedures/treatments
- Provide guidance on medical conditions and specialist support for children with medical needs
- Advise on the circumstances in which pupils with infectious diseases should not be in school, and the action to be taken following an outbreak of an infectious disease (The Infection Control Team in Sandwell PCT provide this advice)

#### The school health nurse

Each Academy has a designated school health nurse/nursing team. There is also a designated health visitor for each nursery who undertakes the roles shown below for children up to the point they enter the reception year.

#### The Academy health nurse should:

- Be accessible as the Academy's first point of call for information about medical needs
- Liaise with other health professionals if necessary to gather information about a child's medical needs
- Advise the Academy on the need for Health Care Plans for particular children
- Draw up individual health care plans for pupils with medical needs in collaboration with the parents, Academy and if necessary other health professionals

- Advise on training and support for Academy staff, who volunteer to support children with medical needs. (The Academy health nurse may provide this training and support herself, or may enlist the help of other nurses/doctors to do this)
- Review certain children with medical needs in St Paul's regularly where indicated by their condition/progress,
- Give advice to parents and staff about health issues.
- Work with regard to data protection regulations.

#### **Pupils**

Pupils 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 pupils will often be sensitive to the needs of those with medical conditions and should be given the information required (bearing in mind issues of confidentiality) to enable them to be supportive to a child with medical conditions. The child's role in managing their own medical needs.

After discussion with parents, children should be encouraged to develop the competence to take responsibility for managing their own medicines and procedures. This should be reflected within individual healthcare plans.

Wherever possible, children will be allowed to carry their own medicines and relevant devices or should 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 and/or support. Where this is not appropriate, then relevant staff should help to administer medicines and manage procedures for them.

If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents should be informed so that alternative options can be considered.

#### **Parents should:**

Provide the Academy with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the Academy that their child has a medical condition. Parents 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.

**Local authorities** are commissioners of school nurses for maintained schools and academies. Under Section 10 of the Children Act 2004, they have a duty to promote cooperation between relevant partners such as governing bodies of maintained schools, proprietors of academies, clinical commissioning groups and NHS England, with a view to improving the well-being of children so far as relating to their physical and mental health, and their education, training and recreation.

Local authorities should provide support, advice and guidance, including suitable training for school staff, to ensure that the support specified within individual healthcare plans can be delivered effectively. Local authorities should work with academies to support pupils with medical conditions to attend full time. Where pupils would not receive a suitable education in

a mainstream school because of their health needs, the local authority has a duty to make other arrangements. Statutory guidance for local authorities sets out that they should be ready to make arrangements under this duty when it is clear that a child will be away from schools for 15 days or more because of health needs (whether consecutive or cumulative across the school year)

#### Providers of health services should:

Co-operate with Academies that are supporting children with a medical condition, including appropriate communication, liaison with Academy nurses and other healthcare professionals such as specialist and children's community nurses, as well as participation in locally developed outreach and training. Health services can provide valuable support, information, advice and guidance to schools, and their staff, to support children with medical conditions at Academies.

# Clinical commissioning groups (CCGs) and other healthcare professionals such as specialist nurses should:

Ensure that commissioning is responsive to children's needs, and that health services are able to co-operate with Academies supporting children with medical conditions. They have a reciprocal duty to cooperate under Section 10 of the Children Act 2004 (as described above for local authorities). Clinical commissioning groups should be responsive to local authorities and Academies seeking to strengthen links between health services and Academies and consider how to encourage health services in providing support and advice, (and can help with any potential issues or obstacles in relation to this). The local Health and Wellbeing Board will also provide a forum for local authorities and CCGs to consider with other partners, including locally elected representatives, how to strengthen links between education, health and care settings.

# **OFSTED**

The OFSTED inspection framework places a clear emphasis on meeting the needs of disabled children and pupils with SEN, and considering the quality of teaching and the progress made by these pupils. Inspectors are already briefed to consider the needs of pupils with chronic or long-term medical conditions alongside these groups and to report on how well their needs are being met. Academies are expected to have a policy dealing with medical needs and to be able to demonstrate that this is implemented effectively.

**Staff training and support Staff** will be supported by the Principal and SENCO, in conjunction with health professionals if needed, in carrying out their role to support pupils with medical conditions. Staff should have adequate training for this role, training needs being identified during the compilation of healthcare plans. This training should comprise as a minimum of:

- A discussion about the child's condition
- What support treatment is needed?
- What medicines/treatment is needed and how/when/by whom this will be administered
- Signs and symptoms to be aware of
- Implications for the child's participation in classroom, offsite or out of hours activities.
- The sharing of any healthcare plan or administration of medicines form.

Further training and support will be offered from the school health nurses if needed or requested. The relevant healthcare professional should normally lead on identifying and agreeing with the Academy, the type and level of training required, and how this can be obtained. However, some staff may have pre-existing knowledge of certain conditions or specific support that is required so may not need further or extensive training.

Training should be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual healthcare plans. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

Staff will be asked to confirm this is the case before implementing any support for pupils with medical conditions. Where possible, the classteacher as a minimum and anyone involved in implementing a healthcare plan should be involved in discussions about the child's needs.

The Office Manager will liaise with school health for advice on training that may be needed to help ensure that all medical conditions affecting pupils in the Academy are understood fully. This includes preventative and emergency measures so that staff can recognise and act quickly when a problem occurs. School health will be requested to provide specialist training where needed e.g. on epipens/diabetes management, continence care.

Staff must not give prescription medicines or undertake health care procedures without appropriate training (updated to reflect any individual healthcare plans). A first-aid certificate does not constitute appropriate training in supporting children with medical conditions. Healthcare professionals, including the school nurse, should provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

Whole Academy awareness training will be held annually so that all staff are aware of the Academies' policy for supporting pupils with medical conditions and their role in implementing that policy.

The family of a child will often be key in providing relevant information to Academy staff about how their child's needs can be met, and parents should be asked for their views. They should provide specific advice, but should not be the sole trainer.

The governing body will monitor as to whether external training is required for this policy to be implemented effectively and commission training if required.

# Managing medicines on Academy premises

## The governors' policy is that:

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- No child under 16 should be given prescription or non-prescription medicines without their parent's written consent except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, every effort should be made to encourage the child or young person to involve their parents while respecting their right to confidentiality.

- Non-prescription medicines will not normally be given other than in exceptional circumstances and with the prior consent of the Principal. In this case, the same procedures will be followed as for prescribed medicines.
- Children at St Paul's C of E Academy are under 16 and therefore should never be given medicine containing aspirin unless prescribed by a doctor.
- Medication, e.g. for pain relief, will only be given for long standing conditions and following discussion with parents and healthcare professionals to establish whether it is needed and being used appropriately in which case a form will be completed with instructions for administration. It should never be administered without first checking maximum dosages and when the previous dose was taken.
- Parents should be informed that, where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside Academy hours.
- Academy staff are instructed to only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container.
- All medicines will be stored safely in lockable medicine cabinets out of the reach of children and with supervision/secure arrangements whereby pupils could not accidentally or deliberately access medication not intended for their use.
- Where a medicine is needed to be readily accessible and this would not pose a risk to other pupils, e.g. asthma inhalers, they should be stored in the classroom or in a place whereby children know where their medicines are at all times and can access them immediately.
- Where relevant, staff and pupils should know who holds the key to the storage facility.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to children and not locked away. This is particularly important to consider when outside of Academy premises e.g. on Academy trips
- The Academy will 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. A record should be kept of any doses used and the amount of the controlled drug held in the Academy. Staff may administer a controlled drug to the child for whom it has been prescribed.
- Staff administering medicines should do so in accordance with the prescriber's instructions.
- St Paul's will keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at the Academy should be noted.
- When no longer required, medicines should be returned to the parent to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps.
- Parents should be informed if their child has been unwell at school and when medication has been required if it is not normally used on a daily basis.

**Spare asthma inhaler** In line with new legal guidelines effective from 1/10/14, the Academy will have sufficient spare inhalers to be used in an emergency situation. Spare inhalers should be carried on offsite trips and when outside the school building including for PE.

# Impaired Mobility/Conditions requiring adaptations to be made.

Providing the approval of the GP or Consultant has been given there is no reason why children wearing plaster casts or using crutches should not attend St Paul's with appropriate risk assessments and control procedures.

Restrictions will be necessary on games or practical work to protect the child or others. Similarly, some relaxation of normal routine in relation to times of attendance or movement around the school may need to be made in the interest of safety.

If a child is being taken on an Academy journey where medical treatment may be needed and the parent is not prepared to give written instruction and an indemnity on the subject of medical treatment, the Academy might decide that the pupil should not go on the journey.

Where a child's medical condition prevents them in participating in an Academies activity and this is certified by a doctor e.g. swimming, alternative arrangements will be made at St Paul's for the duration of that activity. However, unless certification is received exempting the child from the activity, it is assumed that, if they are in school, they are well enough for all activities planned. Therefore, parents will be requested to arrange supervision for the child during any activity from which they choose to withdraw them.

## **Emergency procedures**

As part of general risk management processes, the school has arrangements in place for dealing with emergencies. Where a child has an individual healthcare plan, this 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. Other pupils in the Academy should know what to do in general terms, such as informing a teacher immediately if they think help is needed.

If a child needs to be taken to hospital, staff should stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance. The Academy will ensure they understand the local emergency services cover arrangements and that the correct information is provided for navigation systems.

If in any doubt about a child's condition or there is any likelihood that a rapid deterioration could take place, the Academy should call an ambulance without delay and then notify parents.

#### **Unacceptable practice**

In line with new legislation from September 2014, the following practice is unacceptable and should not generally be tolerated at St Paul's C of E Academy:

- Preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- Assuming that every child with the same condition requires the same treatment;
- Ignoring the views of the child or their parents; or ignoring medical evidence or opinion, (although this may be challenged);

- Sending children with medical conditions home frequently or preventing them from staying for normal Academy activities, including lunch, unless this is specified in their individual healthcare plans;
- If the child becomes ill, sending them to the school office or medical room unaccompanied or with someone unsuitable;
- Penalising children for their attendance record if their absences are related to their medical condition e.g. hospital appointments;
- Preventing pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- Requiring parents, or otherwise making them feel obliged, to attend school to administer prescribed 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;
- Preventing 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.

However, staff should use their discretion and judge each case on its merits with reference to the child's individual healthcare plan and with regard to implications for the health and safety and supervision of other pupils.

## **Liability and indemnity**

The governing body should ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk for staff providing support to pupils with medical conditions and administration of medicines.

In the event of a claim alleging negligence by a member of staff, civil actions are likely to be brought against the employer which is the governing body.

#### **Complaints**

Complaints concerning the support provided to pupils with medical conditions should be dealt with via the Academy's complaints procedure which can be found on the Academy website. Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the Academy. If for whatever reason this does not resolve the issue, they may make a formal complaint via the Academy's complaints procedure. Making a formal complaint to the Department for Education should only occur if it comes within scope of section 496/497 of the Education Act 1996 and after other attempts at resolution have been exhausted.

Ultimately, parents (and pupils) will be able to take independent legal advice and bring formal proceedings if they consider they have legitimate grounds to do so.

#### **Further sources of information**

#### Other safeguarding legislation

Paragraph 7 of Schedule 1 to the Independent School Standards (England) Regulations 2010 set this out in relation to academy schools and alternative provision academies.

Section 3 of the Children Act 1989 provides a duty on a person with the care of a child (who does not have parental responsibility for the child) to do all that is reasonable in all the circumstances for the purposes of safeguarding or promoting the welfare of the child. Section 17 of the Children Act 1989 gives local authorities a general duty to safeguard and promote the welfare of children in need in their area.

Section 10 of the Children Act 2004 provides that the local authority must make arrangements to promote co-operation between the authority and relevant partners (including the governing body of a maintained school, the proprietor of an academy, clinical commissioning groups and the NHS Commissioning Board) with a view to improving the well-being of children, including their physical and mental health, protection from harm and neglect, and education. Relevant partners are under a duty to cooperate in the making of these arrangements.

The NHS Act 2006: Section 3 gives Clinical Commissioning Groups a duty to arrange for the provision of health services to the extent the CCG considers it necessary to meet the reasonable needs of the persons for whom it's responsible. Section 3A provides for a CCG to arrange such services as it considers appropriate to secure improvements in physical and mental health of, and in the prevention, diagnosis and treatment of illness, in the persons for whom it's responsible. Section 2A provides for local authorities to secure improvements to public health, and in doing so, to commission school nurses.

Governing Bodies' duties towards disabled children and adults are included in the Equality Act 2010, and the key elements are as follows:

- They must not discriminate against, harass or victimise disabled children and young people
- They must make reasonable adjustments to ensure that disabled children and young people are not at a substantial disadvantage compared with their peers. This duty is anticipatory: adjustments must be planned and put in place in advance, to prevent that disadvantage.

#### Other relevant legislation

Section 2 of the Health and Safety at Work Act 1974, and the associated regulations, provides that it is the duty of the employer (the local authority, governing body or academy trust) to take reasonable steps to ensure that staff and pupils are not exposed to risks to their health and safety.

Under the Misuse of Drugs Act 1971 and associated Regulations the supply, administration, possession and storage of certain drugs are controlled. Academies may have a child that has been prescribed a controlled drug. The Medicines Act 1968 specifies the way that medicines are prescribed, supplied and administered within the UK and places restrictions on dealings with medicinal products, including their administration.

Paragraph 23B of Schedule 1 to the Independent School Standards (England) Regulations 2010 replicates this provision for independent schools (including academy schools and alternative provision academies).

## **Associated resources**

Links to other information and associated advice, guidance and resources e.g. templates and to organisations providing advice and support on specific medical conditions will be provided on the relevant web-pages at GOV.UK.

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