

Supporting Students with Medical Conditions

Date last reviewed	September 2023
Committee Responsible	SBS
Designated member of staff	Director of Inclusion
Date of next review:	September 2024

STATEMENT OF INTENT

Students' medical needs may be broadly summarised as being of two types:

- Short-term (affecting their participation in school activities while they are on a course of medication)
- Long-term (potentially limiting their access to education and requiring extra care and support)

AIMS

- To ensure students with physical or mental health conditions are supported fully so that they can participate in the full life of the school and achieve to the best of their ability
- To ensure the needs of students with medical conditions are effectively supported in consultation with relevant professionals, their parents/carers and the students themselves
- To comply fully with the Equality Act 2010 for pupils who may have disabilities or special educational needs
- To write, in association with Healthcare professionals, Individual Healthcare Plans where necessary
- To respond sensitively, discreetly and quickly to situations where a child with a medical condition requires support
- To keep, monitor and review appropriate records

Individual Health Care Plans (IHPs)

Where a student has both health and educational needs, the EHCP (Education, Health and Care Plan) should incorporate the IHP and there should be reference to both the school and local offer for these students. In such cases, the Medical Officer should attend the annual review.

See Appendix 1 for the IHP Template

The following should be considered when writing an Individual Healthcare Plan:

- The medical condition, its triggers, signs, symptoms and treatments
- The student's resulting needs, including medication and other treatments, times, facilities, equipment, testing, dietary requirements and environmental issues
- Specific support for the student's educational, social and emotional needs
- The level of support needed, including in emergencies
- Who will provide support, their training needs, expectation of their role, confirmation of their proficiency and cover arrangements
- Who in school needs to be aware of the student's condition and the support required
- arrangements for written permission from parents/carers and the Head Teacher for medication to be administered by a member of staff or self-administered (where appropriate)
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the student can participate
- Confidentiality
- What to do if a student refuses to take medicine or carry out a necessary procedure
- What to do in an emergency, who to contact and contingency arrangements. Supporting a student with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with any relevant person or agency to provide effective support for the child.

ROLES AND RESPONSIBILITIES

The Governing Body

- ensure this policy is developed and implemented
- ensure sufficient staff receive suitable training and are competent to support children with medical conditions
- ensure the appropriate level of insurance is in place and appropriately reflects the level of risk

The Head Teacher

- ensure all staff are aware of this policy and understand their role in its implementation
- ensure all staff who need to know are informed of a student's condition
- ensure sufficient numbers of staff are trained to implement the policy and deliver IHPs, including in emergency and contingency situations, and they are appropriately insured
- is responsible for the development of IHPs
- should contact the school nursing service in the case of any student with a medical condition who has not been brought to the attention of the school
- should ensure that, whenever the school is notified that a student has a medical condition, sufficient staff are suitably trained
- all relevant staff are made aware of a student's condition
- supply staff are briefed
- risk assessments for visits and activities out of the normal timetable are carried out
- Individual Healthcare Plans are monitored and updated by the medical room manager working alongside the School Nurse
- transitional arrangements between schools are carried out where applicable

- if a student's needs change, the above measures are adjusted accordingly
- ensure that any student with a medical condition requiring medication or support in school has an Individual Healthcare Plan which details the support required by the student

The Director of Inclusion

- will review, monitor and update the policy as required
- will ensure that those students who have both educational and medical needs have an EHCP that incorporates an IHP
- will work with the Medical Officer and the Student Support Officer to ensure that the student's needs are met
- will ensure that the Medical Officer attends EHCP annual reviews for those students who have medical needs

The Medical Officer

- is responsible for maintaining a list with relevant details of all students who have medical conditions and those who require an individual health care plan.
- will meet with parents, students, the School Nurse, the relevant Student Support Officer, and the Head of Inclusion to draw up individual health care plans as required.
- will review and update IHPs termly or as required
- will advise all staff of IHPs
- will attend annual reviews for those students whose EHCPs incorporate an IHP

Student Support Officer

- will collaborate with the Director of Inclusion, Medical Officer, parents and students to ensure that the IHP meets the needs of the child and is implemented effectively
- will ensure that the child's progress on the IHP is monitored and raise concerns if his/her needs are not being met

School Staff

- must be aware of which students have an IHP and be familiar with these plans
- should know what to do and respond accordingly when they become aware that a student with a medical condition needs help

Students

- should, wherever possible, be fully involved in discussions about their medical support needs and contribute to, and comply with, their IHP

Parents

It is expected that:

- parents will inform the school of any medical condition which affects their child
- parents will supply the school with appropriately prescribed medication, where the dosage information and regime is clearly printed by a pharmacy on the container
- parents will ensure that medicines to be given in school are in date and clearly labelled

- parents will co-operate in training their children to self-administer medicine if this is appropriate, and that staff members will only be involved if this is not possible
- medical professionals involved in the care of children with medical needs will fully inform staff beforehand of the child's condition, its management and implications for the school life of that individual
- Chessington School will ensure that, where appropriate, children are involved in discussing the management and administration of their medicines and are able to access and administer their medicine if this is part of their Individual Healthcare Plan (for example, an inhaler)
- school staff will liaise as necessary with Healthcare professionals and services in order to access the most up-to-date advice about a pupil's medical needs and will seek support and training in the interests of the pupil

NOTE

- The school does not have to accept a child identified as having a medical condition at times when it would be detrimental to the health of that child or others to do so
- The school should not require parents to attend school to administer medication or provide medical support to their child, including toileting issues (no parent should have to give up working because the school is failing to support their child's medical needs)
- The school should not prevent students from participating, or create unnecessary barriers to students participating in any aspect of school life, including school trips (such as requiring parents to accompany the child)

This policy adheres to the principles of the United Nations Convention of the Rights of the Child (UNCRC) specifically articles: 1, 2, 3, 12, 16 and 24.

LINKED POLICIES AND DOCUMENTS

- Child Protection Policy
- Equality Policy
- Medical Room Policy
- Inclusion (SEN) Policy
- Special Education Needs and Disability Policy

APPENDICES

- Appendix 1: IHP template
- Appendix 2: IHP Letter to parents
- Appendix 3: Consent Form - Child Medication request
- Appendix 4: Record of Medication

The policy will be reviewed every 3 years and is led by the Director of Inclusion. The Medical Officer and Student Support Officer should be involved in the review of the Individual Health Plan.

If you need any of these documents in large print or alternative format please contact rgonyora@chessington.kingston.sch.uk

**Appendix 1
The Grey Court Healthcare Plan**

Student name		
Year/Tutor group		
DOB		
Student address		
Diagnosis/Condition	Date of Diagnosis	Review Date
1)		
2)		
3)		

Family Contact Information (require a minimum of 2 contact details)

Name	
Phone (work)	
Phone (home)	
Phone (mobile)	
Name	
Phone (work)	
Phone (home)	
Phone (mobile)	

Clinic/Hospital Contact

Name	
Phone	

G.P.

Name	
Phone	

Describe medical needs and give details of symptoms

Medical Needs	Symptoms

Daily care requirements

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Describe what constitutes an emergency for this student and the action to take if this occurs

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Follow up care

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Who is responsible in an emergency?

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Form copied to

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Signed:

Parent/carer

Date

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Head teacher

Date

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Director of Inclusion

Date

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Appendix 2

Dear Parent/Carer

Re: The Healthcare Plan

Thank you for informing us of your child's medical condition.

As part of accepted good practice and with advice from the Department for Children, Schools and Families, relevant voluntary organisations and the School's Governing Bodies, our School has recently established a new Medical Conditions Policy for use by all staff.

In accordance with this policy, we are asking all parents of children with a medical condition to help us by completing a school Healthcare Plan for their child/children. Please complete the plan, with the assistance of your child's Healthcare professional if appropriate, and return it to the school for the attention of Mrs N Dowell (ndowell@chessington.kingston.sch.uk) the school's medical room manager.

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

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

I look forward to receiving your child's Healthcare Plan.

Thank you for your help.

Yours faithfully

Mrs R Gonyora
Director of Inclusion

Appendix 3

Consent Form
Child Medication Request

**PLEASE PRINT & USE BLACK OR BLUE PEN
PRIVATE AND CONFIDENTIAL**

Child's Name:		Child's Class:	
Parent's surname if different:			
Home Address:			
Emergency contact names and telephone numbers:	1.	2.	3.
Doctor's name:			
Doctor's address and phone number:			
Nature and condition of illness:			

I agree to members of staff administering medicines that have been supplied/or providing treatment or care to my child as directed below.	Name in Print : Parent/Legal guardian with parental responsibilities.
I agree to update information about my child's medical needs, held by the school, on a regular basis.	Sign: Date:
I will ensure that the medicine held by the school has not exceeded its expiry date.	Sign: Date:

APPENDIX 4

Medical Officer
Chessington School

Record of Medication provided by Parent/Carer

Student Name: _____

Tutor Group: _____

Date: _____

Please hold the following medication/s for my son/daughter

Medication name	Mg/Tablets etc numbers provided	Expiry date	Other information e.g. keep in fridge

Parent signature: _____

Date: _____

Checked by Medical Officer

Name: _____

Date: _____



To Parent/Carer

I confirm receipt of medication supplied for your son/daughter

Medical Officer: _____

Date: _____

