

## **Policy on supporting students with medical conditions**

### ***Preamble***

On 1 September 2014, a new duty came into force for governing bodies to make arrangements to support students with medical conditions. The aim is to ensure all students with medical conditions, in terms of both physical and mental health, are properly supported in school so they can play a full and active role in school life, remain healthy and achieve their academic potential. This is consistent with our Equal opportunities policy.

### ***Procedure to be followed when notification is received that a student has a medical condition***

For students starting at Gillotts, arrangements should be in place in time for the start of the relevant school term. For those starting at the beginning of Year 7, the Oxford Health Nursing Team will liaise with primary schools towards the end of Year 6 so they can obtain all necessary details from the school and parents for transferring medical records to Gillotts. In other cases, such as a new diagnosis or students moving to Gillotts mid-term, it is the responsibility of parents to notify Gillotts of any medical condition. Every effort will be made to ensure arrangements are put in place to support the condition within two weeks of a student starting at Gillotts. Similar procedures will be followed if a student is being reintegrated after an absence or when the student's needs change.

Depending on the complexity, severity and risk to health, the school will ensure it holds at least one of the following:

- *Allergy Action plans*

The Oxford Health Nursing Team complete an Allergy Action Plan for conditions such as (but not limited to) asthma and food allergies that may require medicines to manage the condition.

- *Individual healthcare plans (IHPs)*

For more complex conditions or where an allergy action plan is not considered sufficient to manage this sort of condition, an IHP will be produced. Individual healthcare plans are used as required to ensure the School effectively supports students with medical conditions. They provide clarity about what needs to be done, when and by whom. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed, and are helpful where medical conditions are long-term and complex.

Responsibility for the development of individual healthcare plans rests with the Facilities Manager (- the lead coordinator for First Aid), in liaison with the School Nurse, parent and relevant healthcare professional eg doctor or consultant, who can best advise on the particular needs of the student. Students are also involved whenever appropriate. Support may also be required from the student's Head of House or the Family Support Key Worker.

The aim is to capture the steps the school will take to help the student manage their condition and overcome any potential barriers to getting the most from their education. Plans are reviewed at least annually (initiated by the Facilities Manager) or earlier if evidence is presented that the student's needs have changed. They are developed with the student's best interests in mind and ensure the school assesses and manages risks to the student's education, health and social well-being and minimises disruption. Where the student has a special educational need identified in a statement or EHC plan, the individual healthcare plan is linked to or becomes part of that statement or EHC plan.

In producing an individual healthcare plan, the following will be considered:

- the medical condition, its triggers, signs, symptoms and treatments;

- actions to be taken to deal with the student'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 eg crowded corridors, travel time between lessons;
- specific support for the student's educational, social and emotional needs – for example, 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;
- the level of support needed, including in emergencies. If a student is self-managing their medication, this should 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 student's medical condition from a healthcare professional; and cover arrangements for when they are unavailable;
- who in the school needs to be aware of the student'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 student during school hours;
- 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, eg risk assessments;
- where confidentiality issues are raised by the parent/student, the designated individuals to be entrusted with information about the student's condition; and
- what to do in an emergency, including whom to contact, and contingency arrangements.

Some students may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of but not be used instead of their individual healthcare plan.

Information on medical conditions and individual healthcare plans is recorded on SIMS as follows:

**Student Details**

**Quick note:** Name of medical condition, IHP *(if there is one)*

**7 Medical**

**Medical notes** - IHP if there is one uploaded here

**Medical conditions** – named

All students with medical needs are listed in the 'Important Student Medical Information' spreadsheet which is accessible to all staff from the Freedom Homepage. This is a live document and is updated as necessary. It includes photographs of students who have auto injectors, a list of First Aid qualified staff and a link to any Allergy Action Plan or Individual Healthcare Plan that is in place.

***Staff training and support***

Staff must not give prescription medicines or undertake health care procedures without appropriate training. A first-aid certificate does not constitute appropriate training. Training needs will be identified in light of the individual healthcare plans in place, and any necessary training will be commissioned by the Facilities Manager, in coordination with the CPD Leader so that any member of staff providing support to a student with medical needs will have received suitable training. The school nurse can provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

The support of students with medical conditions is included in staff induction. All staff are provided with an annual update on the policy and on their role in its implementation. Qualified First Aiders receive specific training on administering auto injectors at the beginning of each school year and as necessary to support new students.

### ***The parents' role in managing their child's medical needs***

Parents 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 are key partners and should be involved in the development and review of their child's Individual Healthcare Plan. They should carry out any action they have agreed as part of the implementation eg provide in date medicines and equipment and ensure they or another nominated adult are contactable at all times.

### ***The student's role in managing their own medical needs***

Students are often 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, the individual healthcare plan. After discussion with parents, students who are competent are encouraged to take responsibility for managing their own medicines and procedures. This is reflected within individual healthcare plans. Wherever possible, students should carry their own medicines and relevant devices or be able to access their medicines for self-medication quickly and easily. If it is not appropriate for a student to self-manage, then relevant staff will help to administer medicines and manage procedures for them.

### ***Managing medicines on school premises***

The School will conform to the following:

- Medicines will only be administered at school when it would be detrimental to a student's health or school attendance not to do so
- No student under 16 will 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 student without the knowledge of the parents. In such cases, every effort will be made to encourage the student or young person to involve their parents while respecting their right to confidentiality.
- A student under 16 will never be given medicine containing aspirin unless prescribed by a doctor. Medication, eg for pain relief, will never be administered without first checking maximum dosages and when the previous dose was taken. Parents will be informed
- Where clinically possible, parents should request that medicines be prescribed in dose frequencies which enable them to be taken outside school hours
- Gillotts will 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 inside an insulin pen or a pump, rather than in its original container
- All medicines will be stored safely in the First Aid room by Students Services. Students will know where their medicines are at all times and be able to access them immediately during the school day (First Aid room locked outside school hours). Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to students and not locked away during school hours. Any medicines held by the school for a named student will be taken on school trips and managed by a designated member of staff who is appropriately trained.
- A student 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 student for use is an offence. Monitoring arrangements may be necessary. Gillotts will otherwise keep controlled drugs that have been prescribed for a student securely stored in a non-portable container in the First Aid room and only named staff will have access. Controlled drugs will be easily accessible in an emergency. A record will be kept of any doses used and the amount of the controlled drug held in school
- School staff may administer a controlled drug to the student for whom it has been prescribed. Staff administering medicines will do so in accordance with the prescriber's instructions. The school will keep a record of all medicines administered to individual students, stating what, how and how much was

administered, when and by whom. Any side effects of the medication to be administered at school will be noted

- When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes will always be used for the disposal of needles and other sharps
- A defibrillator is located on the wall of the Gym, by the PE office. The number to access the unit is written underneath the container. The instructions are inside for any adult to use in an emergency
- There are two emergency asthma inhalers kept in the First Aid room near Student Services. They may be used for diagnosed asthmatics (- check spreadsheet on Freedom Homepage), whose inhaler may have run out, under the guidance of the School nurse or staff first aider. These inhalers will stay on site, therefore, please ensure that when going out on school trips that your child has an in-date inhaler and that it has enough medication to be dispensed.
- There are two emergency auto injectors kept in the First Aid room near Student Services. Under the guidance of the Emergency Services, they may be used for students diagnosed at risk of anaphylaxis (-check spreadsheet on Freedom Homepage), whose auto injector may have run out or jammed. The school would prefer that students at risk of anaphylaxis not only carry their two auto injectors on their person but also provide two spare to be kept at the school. We appreciate that many doctors will not prescribe this many so the priority is that the student carries their own as these will most likely always be in proximity to the student if required. It is parents' responsibility to ensure the medicines carried by their child are in date. The school will send one reminder to parents when any medicines held by the school are going out of date but it is parents' responsibility to ensure medicines kept at school are in date. The school will not send repeated reminders. Due to national ongoing shortages, schools are still only permitted to hold two auto-injectors, therefore, the two emergency auto-injectors will stay on site. If your child is going on a trip you must ensure that they are carrying all of their anaphylaxis medication.

### ***Record keeping***

A written record will be kept of all medicines administered to students.

### ***Emergency procedures***

Where a student has an individual healthcare plan, this will clearly define what constitutes an emergency and explain what to do, including ensuring all relevant staff are aware of emergency symptoms and procedures. Other students in the school will know what to do in general terms, such as informing a teacher immediately if they think help is needed.

If a student needs to be taken to hospital, staff will stay with the student until the parent arrives, or accompany a student taken to hospital by ambulance.

### ***Day trips, residential visits and sporting activities***

Students with medical conditions will be actively supported to participate in school trips or visits and sporting activities. Teachers will be aware of how a student's medical condition will impact on their participation, but there should be enough flexibility for all students to participate according to their own abilities and with any reasonable adjustments. The School will make arrangements for the inclusion of students in such activities with any adjustments as required unless evidence from a clinician such as a GP states this is not possible.

Any spare medicines held by the school for a student should be taken on off-site visits. Trip leaders/PE staff (for fixtures) should check that students have their medicines with them. It may not be possible for a student to take part in any event off site if they neither have their own medicine nor does the school hold any spare for them to take in lieu.

The School will consider what reasonable adjustments it might make to enable students with medical needs to participate fully and safely on visits. Best practice is to carry out a risk assessment so that planning arrangements take account of any steps needed to ensure students with medical conditions are included. This will require consultation with parents and students and advice from the relevant healthcare professional to ensure students can participate safely. Please also see Health and Safety Executive (HSE) guidance on school trips.

### ***Short term restricted mobility***

If a medical practitioner agrees to a student's attendance at school when the student is relatively immobile, the case must be assessed on an individual basis. The Head of House will lead the planning, taking into account recommendations from the medical practitioner and the views of the parents and student. A written record of the plan must be kept. Adjustments that may be considered, where possible, include:

- Relocating first floor lessons to the ground floor
- Allowing the student to leave lessons five minutes early, accompanied by another student
- Providing a designated area for seated rest at break and lunchtime

If there is an evacuation risk due to restricted mobility, with the support of the Facilities Manager, the Head of House will put in place a short term Personal Emergency Evacuation Plan (PEEP) that is signed as understood by all parties.

### ***Unacceptable practice***

It is not generally acceptable practice to:

- prevent students from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every student with the same condition requires the same treatment;
- ignore the views of the student or their parents; or ignore medical evidence or opinion, (although this may be challenged);
- send students with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- if the student becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable (- anyone other than an adult member of staff);
- penalise students for their attendance record if their absences are related to their medical condition eg hospital appointments;
- prevent students 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 student, including with toileting issues. No parent should have to give up working because the school is failing to support their student's medical needs; or
- prevent students from participating, or create unnecessary barriers to students participating in any aspect of school life, including school trips, eg by requiring parents to accompany the student.

### ***Liability and indemnity***

The Governing Body will ensure the appropriate level of insurance is in place that appropriately reflects the level of risk.

### ***Complaints***

Complaints will be managed by following the School's Complaints Procedure.

### ***Implementation***

Implementation of this policy is the responsibility of the Facilities Manager. They have responsibility for ensuring sufficient staff are suitably trained and making sure all relevant staff are made aware of a student's condition. If the

Facilities Manager is absent, cover is provided by the Business Manager. Briefing of supply teachers is the responsibility of the Cover Officer supported by the Facilities Manager. Risk assessments for school trips and visits are the responsibility of the Trip Leader to originate and are overseen by the Business Manager. Individual healthcare plans are monitored by the Facilities Manager, the Family Support Key Worker, and the relevant Head of House.

Adopted: 8 July 2014  
Reviewed: 5 July 2022  
Next review: July 2025

## **Appendix A: Medicine request form**

### **Parental agreement for Gillotts to administer medicine**

Gillotts will not give your child medicine unless you complete and sign this form.

Name of child

Date of birth

Tutor group

Medical condition or illness

### **Medicine**

Name/type of medicine *(as described on the container)*

Date dispensed

Expiry date

Dosage and method

Timing

Special precautions

Are there any side effects that we need to know about?

Self administration Yes/No *(delete as appropriate)*

Procedures to take in an emergency

### **Contact Details**

Name

Daytime telephone no.

Relationship to child

Address

I understand that I must deliver the medicine personally to *[agreed member of staff]*

I accept that this is a service that the school/setting is not obliged to undertake.

I understand that I must notify the school/setting of any changes in writing.

Signature(s)

Date





## **Appendix B - Request for child to carry his/her own medicine**

This form must be completed by parents/guardian

**If staff have any concerns discuss this request with healthcare professionals**

Child's name

Tutor group

Medical condition for which medicine is required

Name of medicine

Procedures to be taken in an emergency

### **Contact Information**

Name

Daytime phone no.

Relationship to child

I would like my son/daughter to keep his/her medicine on him/her for use as necessary.

Signed

Date

If more than one medicine is to be given a separate form should be completed for each one.

**Appendix C:**

**Individual Healthcare Plan (IHP)**

**Child's name**

**Tutor group (year/house/staff initials)**

**Medical diagnosis or condition**

Date of this IHP

Date when this IHP should be reviewed


Describe how an **Emergency Situation** presents itself

Detail the **actions** we should take in an emergency situation (what to do and any medication that should be administered)

Describe how a **Non-Emergency Situation** presents itself

Detail the **actions** we should take in a non-emergency situation (what to do and any medication that should be administered)


**Family Contact Information**

1.Name

Relationship to Child

Mobile number

Home telephone number

Work telephone number

2. Name

Relationship to Child

Mobile number

Home telephone number

Work telephone number

**Clinic/Hospital/Consultant**

Name

Contact details

**G.P.**

Name

Contact details

Aside from medication that might be required in an emergency or non-emergency, is any other medication taken regularly? If yes, please provide details.

What other support is in place/required on a daily basis?

Specific support to mitigate risk of condition occurring

Arrangements for school visits/trips etc

Other information

Staff training needed/undertaken – who, what, when

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Form copied to (record date)

Medical Conditions Spreadsheet on Freedom Homepage, SIMS, Parents DATE

**Communication/updates log for school use only**

Date	Details of communication/update	Action	Staff responsible

Is school holding medicine(s) for the student? If so, has parent completed Appendix A from the Policy on supporting students with medical needs?

Date sent to parent to complete	Date completed form received
---------------------------------	------------------------------

Does the student carry their medicines to self-manage? If so, has parent completed Appendix B from the Policy on supporting students with medical needs?

Date sent to parent to complete	Date completed form received
---------------------------------	------------------------------

## **Appendix D: Model letter inviting parents to contribute to individual healthcare plan development**

Dear Parent

### **Developing an Individual Healthcare Plan for your child**

[Thank you for informing us of your child's medical condition] [We have been informed of your child's medical condition]. For your information, I enclose a copy of the school's policy for supporting students with medical conditions.

You will see from our policy that all students with a medical condition will have one or more of an Allergy Action Plan or an Individual Healthcare Plan (IHP). Based on the information we have, we believe we should compile an IHP for your child to help us manage their condition. Individual healthcare plans are developed in partnership between the school, parents, student and the relevant healthcare professional who can best advise on your child's condition. The aim of this is to ensure we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom.

Although individual healthcare plans are likely to be helpful in many cases, it is possible not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

It would be most helpful if we could meet to start the process. It is far easier and actually quicker if we can do this face to face although I do appreciate, everyone is busy and this may not be practical. The important thing is to get this in place as soon as we can.

Please could you contact me either through the main switch board or by email ([awindsor@gillotts.org.uk](mailto:awindsor@gillotts.org.uk)) so we can arrange the best way to start the process.