Hanging Heaton CE (VC) J&I School

Policy for the Education of Pupils at School with Medical Conditions and the Administration of Medication

Signed – Chair of Governors	**Mrs L Whittaker**
Signed – Head Teacher	**Mrs S Caspell**

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1. Introduction

1.1. This policy is written in line with the requirements of:

- Children and Families Act 2014 – Section 100.
- Supporting Pupils at School with Medical Conditions: Statutory guidance for governing bodies of maintained schools and proprietors of academies in England, Department for Education (DfE) December 2015.
- Special Educational Needs and Disability (SEND) Code of Practice, DfE January 2015.
- Mental Health and Behaviour in Schools: Departmental Advice for School Staff, DfE November 2018.
- Equalities Act 2010
- School Admissions Code, DfE December 2014
- Kirklees Council Policy on Supporting Pupils at School with Medical Conditions.
- Policy guidance: conditions for which over the counter items should not be routinely prescribed in primary care.
- The Human Medicines Regulations 2014 & 2017
- Guidance on the use of adrenaline auto-injectors in schools 2017
- Guidance on the use of emergency salbutamol inhalers in schools March 2015

1.2. This policy should be read in conjunction with the following school policies– e.g. SEND & Inclusion Policy, Safeguarding Policy, Off-Site Visits Policy, Complaints Procedures.

1.3. This policy was developed with parents/carers of pupils with medical conditions, and healthcare professionals and will be reviewed annually.

2. Definitions of Medical Conditions

2.1. Pupils' medical needs may be broadly summarised as being of two types:

- **Short-term:** affecting their participation at school because they are on a course of medication.
- **Long-term:** potentially limiting access to education and requiring on-going support, medicines or care while at school to help them to manage their condition and keep them well, monitoring and intervention in emergency circumstances. It is important that parents/carers feel confident that the school will provide effective support for their child's medical condition and that pupil's feel safe. (Further information on specific medical conditions is available in the Kirklees Council Policy on Supporting Pupils at School with Medical Conditions)

2.2. Some pupils with medical conditions may be considered disabled under the definition set out in the Equalities Act 2010. Where this is the case, the Governing Body complies with their duties under that Act. Some may also have special educational needs (SEN) and may have an Education, Health and Care (EHC) Plan which brings together health and social care needs, as well as their special educational provision. For pupils with SEN, this policy

should be read in conjunction with the SEND Code of Practice which explains the duties of the Local Authority, health bodies and the school to provide for those with SEN. For pupils who have medical conditions that require EHC Plans, compliance with the SEND Code of Practice ensures compliance with this policy in respect to those pupils.

3. The Role of the Governing Body

3.1. The Governing Body remains legally responsible and accountable for fulfilling their statutory duty for supporting pupils at school with medical conditions. The Governing Body of Hanging Heaton C of E (VC) J & I School fulfil this by:

- Ensuring that arrangements are in place to support pupils with medical conditions. In doing so we will ensure that such children can access and enjoy the same opportunities at school as any other child.
- Taking into account that many medical conditions that require support at school will affect quality of life and may be life-threatening. Some will be more obvious than others and therefore the focus is on the needs of each individual child and how their medical condition impacts on their school life.
- Ensuring that the arrangements give parents/carers and pupils confidence in the school's ability to provide effective support for medical conditions. Arrangements will show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care. We will ensure that staff are properly trained to provide the support that pupils need.
- Ensuring that the arrangements put in place are sufficient to meet our statutory duties and ensure that policies, plans, procedures and systems are properly and effectively implemented.
- Developing a policy for supporting pupils with medical conditions that is reviewed regularly and accessible to parents/carers and school staff (this policy).
- Ensuring that the policy includes details on how it will be implemented effectively, including a named person who has overall responsibility for policy implementation (see section below on policy implementation).
- Ensuring that the policy sets out the procedures to be followed whenever the school is notified that a pupil has a medical condition (see section below on procedure to be followed when notification is received that a pupil has a medical condition).
- Ensuring that the policy covers the role of individual healthcare plans, and who is responsible for their development, in supporting pupils at school with medical conditions and that they are reviewed at least annually or earlier if evidence is presented that the pupil's needs have changed (see section below on individual healthcare plans).
- Ensuring that the policy clearly identifies the roles and responsibilities of all those involved in arrangements for supporting pupils at school with medical conditions and how they will be supported, how their training needs will be assessed and how and by whom training will be commissioned and provided (see section below on staff training and support).

- Ensuring that the policy covers arrangements for children who are competent to manage their own health needs and medicines (see section below on the child's role in managing their own medical needs).
- Ensuring that the policy is clear about the procedures to be followed for managing medicines including the completion of written records (see section below on managing medicines on school premises).
- Ensuring that the policy sets out what should happen in an emergency situation (see section below on emergency procedures).
- Ensuring that the arrangements are clear and unambiguous about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so (see section below on day trips, residential trips and sporting activities).
- Ensuring that the policy is explicit about what practice is not acceptable (see section on unacceptable practice).
- Ensuring that the correct level of insurance is in place and appropriate to the level of risk (see section below on liability and indemnity).
- Ensuring that the policy sets out how complaints may be made and will be handled concerning the support of pupils with medical conditions (see section below on complaints).

4. Policy Implementation

4.1. The statutory duty for managing arrangements for supporting pupils at school with medical conditions rests with the Governing Body. The Governing Body have delegated the implementation of this policy to the staff below, however, the Governing Body remains legally responsible and accountable for fulfilling our statutory duty.

4.2. The overall responsibility for the implementation of this policy is given to Sally Caspell (Head Teacher/SENDCo). They will also be responsible for ensuring that sufficient staff are suitably trained and will ensure cover arrangements in cases of staff absences or staff turnover to ensure that someone is always available and on-site with an appropriate level of training.

4.3. Sally Caspell (Head Teacher/SENDCo) will be responsible for briefing supply teachers, preparing risk assessments for offsite visits and other school activities outside of the normal timetable and for the monitoring of individual healthcare plans.

4.4. Sally Caspell (Head Teacher/SENDCo) will be responsible in conjunction with parents/carers, for drawing up, implementing and keeping under review the individual healthcare plan for each pupil and making sure relevant staff are aware of these plans.

4.5. All members of staff are expected to show commitment and awareness of children's medical conditions and the expectations of this policy. All new members of staff will be inducted into the arrangements and guidelines in this policy upon taking up their post.

5. Procedure to be Followed when Notification is Received that a Pupil has a Medical Condition

5.1. This covers notification prior to admission, procedures to cover transitional arrangements between schools or alternative providers, and the process to be followed upon reintegration after a period of absence or when pupils' needs change. For children being admitted to Hanging Heaton C of E (VC) J & I School for the first time with good notification given, the arrangements will be in place for the start of the relevant school term. In other cases, such as a new diagnosis or a child moving Hanging Heaton C of E (VC) J & I School mid-term, we will make every effort to ensure that arrangements are put in place within two weeks.

5.2. In making the arrangements, we will take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. We also acknowledge that some may by more obvious than others. We will therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life. We aim to ensure parents/carers and pupils have the confidence in our ability to provide effective support for medical conditions in school, so that arrangements will show an understanding of how medical conditions impact on the child's ability to learn, as well as increase their confidence and promote self-care.

5.3. We will ensure that staff are properly trained and supervised to support pupil's medical conditions and will be clear and unambiguous about the need to actively support pupils with medical conditions to participate in off-site visits, or in sporting activities, and not prevent them doing so. We will make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician, such as a GP, states that this is not possible. We will make sure that no child with a medical condition is denied admission or prevented from attending the school because arrangements for supporting their medical condition have not been made. However, in line with our safeguarding duties, we will ensure that all pupils' health is not put at unnecessary risk, for example, from infectious disease. We will therefore not accept a child in school at times where it would be detrimental to the health of that child or others.

5.4. Hanging Heaton C of E (VC) J & I School does not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on available evidence. This would normally involve some form of medical evidence and consultation with parents/carers. Where evidence conflicts, some degree of challenge may be necessary to ensure the right support can be put in place, these discussions will be led by Sally Caspell (Head Teacher/SENDCo) and then an individual healthcare plan will be written in conjunction with the parents/carers and put in place.

6. Individual Healthcare Plans

6.1. Individual healthcare plans will help ensure that we effectively support pupils with medical conditions. They will provide clarity about what needs to be done, when and by whom (parents/carers will be encouraged to administer medication, undertake any medical procedures outside of the school day where this is possible). 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. They are likely to be helpful in the majority of other cases too, especially where medical conditions are long-term and complex. However, not all pupils will require one. The school, healthcare professional and parent/carer should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached the Head Teacher, Sally Caspell, is best placed to take a final view.

Attached as **Appendix 1** is the process the school follows for developing individual healthcare plans.

6.2. Individual healthcare plans will be easily accessible to all who need to refer to them, while preserving confidentiality. Plans will capture the key information and actions that are required to support the pupil effectively. The level of detail within the plan will depend on the complexity of the pupil's condition and the degree of support needed. This is important because different pupils with the same health condition may require very different support. Where a pupil has SEN but does not have an Education Health Care (EHC) plan, their special educational needs should be mentioned in their individual healthcare plan.

6.3. Individual healthcare plans (and their review) should be drawn up in partnership between the school, parents/carers and a relevant healthcare professional e.g. school, specialist or children's community nurse, who can best advise on the particular needs of the pupil. Attached as **Appendix 2** is the model letter inviting parents/carers to contribute to the individual healthcare plan development. Pupils should also be involved whenever appropriate. The aim should be to capture the steps which Hanging Heaton C of E (VC) J & I School should take to help manage their condition and overcome any potential barriers to getting the most from their education. Partners should agree who will take the lead in writing the plan, but responsibility for ensuring it is finalised and implemented rests with the school.

6.4. We will ensure that individual health care plans are reviewed at least annually or earlier if evidence is presented that the pupil's needs have changed. They will be developed and reviewed with the pupil's best interests in mind and will ensure that we assess and manage the risks to the pupil's education, health and social wellbeing, and minimise disruption. Where a pupil is returning to school following a period of hospital education or alternative provision, we will work with the local authority and education provider to ensure that the individual healthcare plan identifies the support the pupil will need to reintegrate effectively.

6.5. Where home to school transport is being provided by Kirklees Council, we will support the development of any risk assessments and share the individual healthcare plan with the local authority and driver/escort. Where pupils have a life-threatening condition or a medical

need that requires an emergency response, individual healthcare plans should be carried on the vehicle detailing the procedure to be followed in the event of an emergency.

6.6. Individual healthcare plans (see **Appendix 3** for a plan template) will suit the specific needs of each pupil, but will include all of the following information:

- The medical condition, its triggers, signs, symptoms and treatments.
- The pupil'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 the condition, dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons.
- Specific support for the pupil's educational, social and emotional needs e.g. 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 (some pupils will be able to take responsibility for their own health needs) including in emergencies. If a pupil 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 pupil'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 pupil's condition and the support required.
- Arrangements for written permission from parents/carers and the Head Teacher, Sally Caspell for medication to be administered by a member of staff or self-administered by the pupil during school hours (see **Appendix 4**).
- Separate arrangements or procedures required for off-site visits or other school activities outside of the normal school timetable that will ensure the pupil can participate e.g. risk assessments.
- Where confidentiality issues are raised by the parent/carer/pupil, the designated individual is to be entrusted with information about the pupil's condition; and What to do in an emergency, including whom to contact, and contingency arrangements. Some pupils may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.
- Copies of specific healthcare/action plans produced by professional (e.g. allergy action plan, diabetes healthcare plan, etc.).

7. Roles and Responsibilities

7.1. Please refer to the section on policy implementation for the functions document that have been delegated to different, named members of staff at Hanging Heaton C of E (VC) J & I School.

7.2. In addition, we can refer to the **School Nursing Team** for support with drawing up individual healthcare plans, provide or commission specialist medical training, liaison with lead clinicians and advice or support in relation to pupils with medical conditions.

7.3. Other **healthcare professionals, including GPs and paediatricians** should notify the School Nursing Team when a child has been identified as having a medical condition that will require support at school. Specialist local health teams may be able to provide support, and training to staff, for children with particular conditions (e.g. asthma, diabetes, epilepsy, etc.).

7.4. **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.

7.5. **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.

7.6. **Kirklees Council** will work with us 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.

7.7. **Providers of health services** co-operate with the school as it supports children with medical conditions. They provide valuable support, information, advice and guidance to the school, and their staff, to support children with medical conditions at school.

7.8. The **Ofsted** common inspection framework came into effect on 1st September 2015, aimed at promoting greater consistency across inspection remits. Inspectors must consider how well a school meets the needs of the full range of pupils, including those with medical conditions. Key judgements will be informed by the progress and achievement of these children, alongside those of pupils with special educational needs and disabilities, and also by pupils' spiritual, moral, social and cultural development. Schools are expected to have a policy dealing with medical needs and to be able to demonstrate that it is being implemented effectively.

8. Staff Support and Training

8.1. Whole school awareness training will be arranged so that staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing that policy, as and when children with Health Care needs entering school, for new staff as part of their induction and on an ongoing refresher basis as required.

The following staff have received training for administrating medicines:

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Carol Haigh April 2023

The following staff have received specific/specialist training:

All staff – Asthma Awareness April 2023
Emma Ryder Paediatric First Aider October 2024
Bethan Tomlinson Paediatric First Aider October 2023
Jackie Staves Paediatric First Aider October 2024
Esther Firth Paediatric First Aider October 2024

Emma Ryder and Esther Firth – catheterisation training, September 2023.

All training completed more than 3 years ago has been excluded from this list and it was deemed not up to date.

8.2. We will record staff training for the administration of medicines and/or clinical procedures (see **Appendix 5** for the template).

8.3. All staff who are required to provide support to pupils for medical conditions will be trained by healthcare professionals qualified to do so. The training need will be identified by the healthcare professional during the development or review of the individual healthcare plan. We may choose to arrange training ourselves and will ensure it remains up to date.

8.4. 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 set out in the individual healthcare plan. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

8.5. For the protection of both staff and pupil a second member of staff will be present while more intimate procedures are being followed. All children who need personal support will have an Intimate Care Plan in place and all changes will be logged.

8.6. Staff must not give prescription medicines or undertake healthcare 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, can provide confirmation of proficiency of staff in a medical procedure, or in providing medication.

8.7. All staff will receive induction training and regular whole school awareness training so that all staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing the policy. Sally Caspell, Head Teacher, will seek advice from relevant healthcare professionals about training needs, including preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.

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

8.9 We will assess whether or not there are benefits to educating all pupils on different allergies, medical conditions, etc. and the consequences of exposure to allergens, etc. We will ensure any education is delivered in the most appropriate manner for the age of the pupils via our PSHCE curriculum.

9. The Child's Role in Managing their own Medical Needs

9.1. If, after discussion with the parent/carer, it is agreed that the pupil is competent to manage their own medication and procedures, they will be encouraged to do so. This will be reflected in the individual healthcare plan.

9.2. Wherever possible pupils will be allowed to carry their own medicines and relevant devices or should be able to access their medication for self-medication quickly and easily; these will be stored in the cupboard in the staff kitchen to ensure that the safeguarding of other pupils is not compromised. Hanging Heaton C of E (VC) J & I School also recognises that pupils who take their own medicines themselves and/or manage may require an appropriate level of supervision. If it is not appropriate for a pupil to self-manage, then relevant staff will help to administer medicines and manage procedures for them.

9.3. If a pupil 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/carers will be informed so that alternative options can be considered.

10. Managing Medicines on School Premises and Record Keeping

10.1. At Hanging Heaton C of E (VC) J & I School the following procedures are to be followed:

- 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 parents/carers written consent (see **Appendix 4**) – expect in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents/carers. In such cases, every effort should be made to encourage the child or young person to involve their parents/carers while respecting their right to confidentiality.
- We will not administer non prescription medication but will encourage and allow carers to visit during the day to do so.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- We will only accept prescribed medicines, with written permission from parent/carer 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 be in-date, but will generally be available to the school inside an insulin pen or a pump, rather than its original container.

- We have systems in place to check that medication held in school is in line with the pupil's individual healthcare plan and is within date.
- It is recommended that a primary school pupil should never carry medicine to and from school. Medicine must be handed to Sally Caspell, Headteacher or Carol Haigh, Bursar as soon as the pupil arrives at school.
- All medicines will be stored safely in the staff kitchen. All non-emergency medication will be kept in a locked cupboard used only for that purpose. Some medicines need to be refrigerated. These may only be kept in a refrigerator containing food if they are in an airtight container and clearly labelled. There will be restricted access to a refrigerator holding medicines.
- Pupils will know where their medicines are at all times and be able to access them immediately. Where relevant, they will know who holds the key to the storage facility, Carol Haigh, Bursar.
- Medicines and devices, such as asthma inhalers, blood glucose meters, hypoglycaemia treatment and adrenaline pens, should be always readily available (in class storage box and clearly visible to pupils and staff) and not locked away. Asthma inhalers should be marked with the child's name. Each child diagnosed with Asthma should have an Asthma Card completed and reviewed annually or on receipt of new medication (**Appendix 6)**. This should be completed by their parent/carer with emergency contact details and details of treatment to be given.
- A pupil who had been prescribed a controlled drug may legally have it in their possession if they are competent to do so but passing it to another pupil for use is an offence. Monitoring arrangements may be necessary. Otherwise, we will keep all controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff will have access. The name of the person(s) responsible for the cabinet or administering medication should be stated on the cabinet. Controlled drugs should be easily accessible in an emergency. In cases of emergency the key must be readily available to all members of staff to ensure access. A record should be kept of any doses used and the amount of the controlled drug held in the school.
- Staff administering medicines should do so in accordance with the prescriber's instructions. Hanging Heaton C of E (VC) J & I School will keep a record of all medicines administered to individual pupils (see **Appendices 7 and 8**), stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted. Written records are kept of all medicines administered to pupils. Those records offer protection to staff and pupils and provide evidence that agreed procedures have been followed.
- Only one member of staff **at any one time** should administer medicines (to avoid the risk of double dosing). Arrangements should be made to relieve this member of staff from other duties while preparing or administering doses (to avoid the risk of interruption before the procedure is completed). If more than one person administers medicines a system will be arranged to avoid the risk of double dosing, e.g. a rota, routine consultation of the individual pupil's medicine record before any doses are given, etc.

- When no longer required, medicines are returned to parents/carers to arrange safe disposal. Sharp boxes should always be used for the disposal of needles and other sharps.
- Asthma (salbutamol) inhalers and disposable spacers are available on site for emergency use in the paper store.
- At this point in time the Governing Body are not considering whether to hold Adrenaline auto-injector devices on site for emergency use.

11. Emergency Procedures

11.1. Sally Caspell, Head Teacher will ensure that arrangements are in place for dealing with emergencies for all school activities wherever they take place, including school trips within and outside the UK, as part of the general risk management process.

11.2. Where a pupil 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 school should know what to do in general terms, such as informing a teacher immediately if they think help is needed.

11.3. If a pupil needs to be taken to hospital, staff will stay with them until a parent/carer arrives, or accompany the child taken to hospital by ambulance (see **Appendix 9)**. The school is aware of the local emergency services cover arrangements and the correct information will be provided for navigation systems.

12. Off-site Visits and Sporting Activities

12.1. We will actively support pupils with medical conditions to participate in off-site visits and sporting activities by being flexible and making reasonable adjustments unless there is evidence from a clinician, such as a GP, that this is not possible.

12.2. We will always conduct a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions can be included safely. The individual healthcare plan will be updated with specific information required for the visit/activity and a copy will be taken on the visit. All staff supervising off-site visits will be made aware of any medical needs and relevant emergency procedures. This will involve consultation with parents/carers and relevant healthcare professions and will be informed by our Off-Site Visits Policy.

12.3. Staff with the role of administering medicines must have relevant and current training to do so. A first aid qualification does not cover the skills and knowledge for the administration of medicines.

13. Hygiene and Infection Control

13.1. All staff will be familiar with normal precautions for avoiding infection and must follow basic hygiene procedures. Staff will have access to protective disposable vinyl gloves and take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment. Further information is contained in the First Aid Policy and Guidance for Schools on First Aid.

14. Equipment

14.1. Some pupils will require specialist equipment to support them whilst attending school. Staff will check the equipment, in line with any training given, and report concerns to Carol Haigh, Bursar.

14.2. The maintenance contract/safety checks for all equipment and the procedure to be followed in the event of equipment failure will be detailed within the individual healthcare plan.

14.3. Staff will be made aware of the use, storage and maintenance of any equipment.

14.4. School has a defibrillator, kept in the paper store, Emma Ryder has completed training to use it.

15. Unacceptable Practice

15.1. Although staff at Hanging Heaton C of E (VC) J & I School should use their discretion and judge each case on its merits with reference to the pupil's individual healthcare plan, it is not generally acceptable practice to:

- Prevent pupils from easily accessing their inhalers and medication and administering their medication when and where necessary.
- Assume that every pupil with the same condition requires the same treatment.
- Ignore the views of the pupil or their parents/carers; or ignore medical evidence or opinion (although this may be challenged).
- Send pupils 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.
- Send a pupil who becomes ill to the school office or medical room unaccompanied, or with someone unsuitable.
- Penalise pupils for their attendance record if their absences are related to their medical condition e.g. hospital appointments.
- Prevent pupils from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively.
- Require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent/carer should have to give up working because the school is failing to support their child's medical needs; or

- Prevent pupils from participating or creating unnecessary barriers to pupils participating in any aspect of school life, including school trips e.g. by requiring parents/carers to accompany the child.

16. Liability and Indemnity

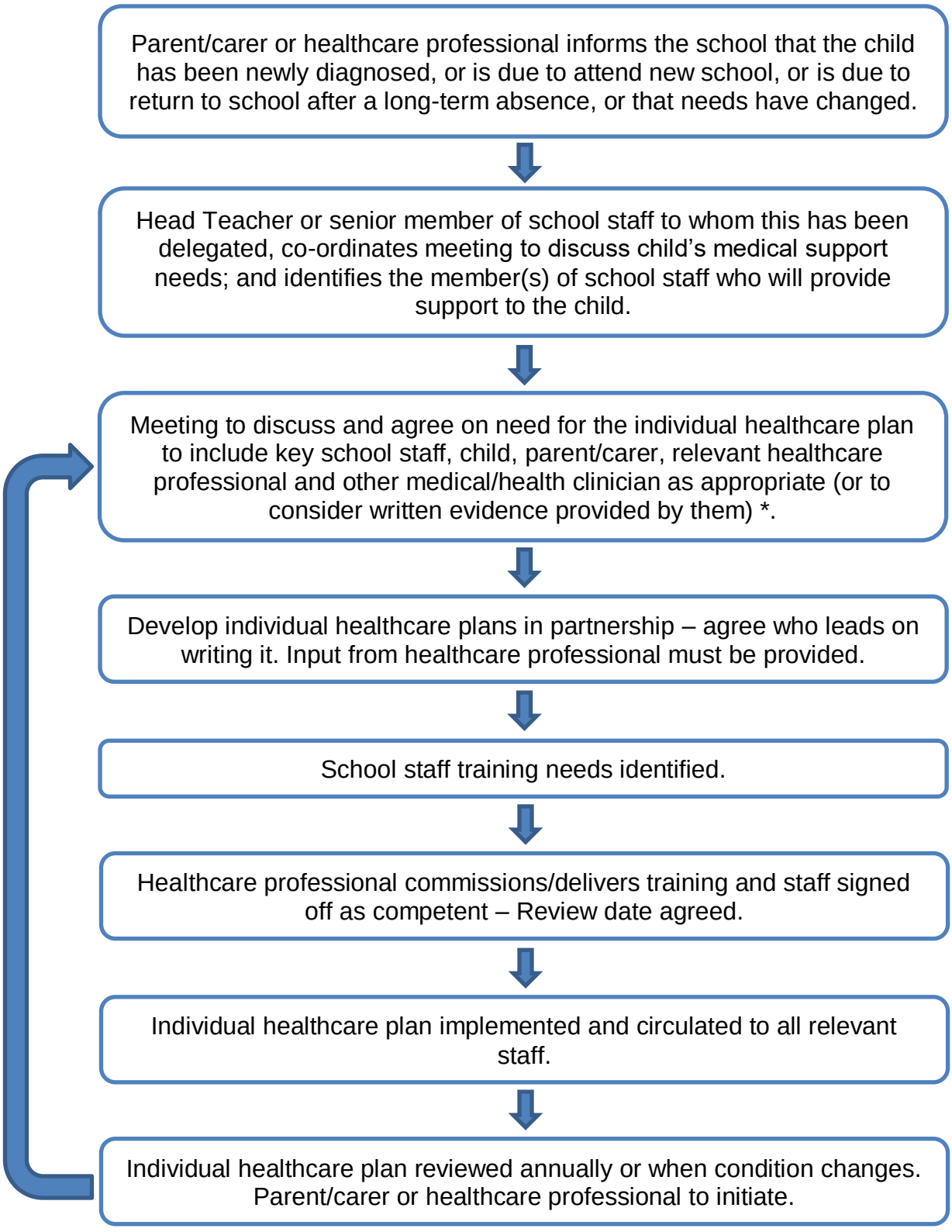
Maintained Schools
Individual cover may need to be arranged for any healthcare procedures, in particular those which would be considered invasive or normally undertaken by a medical professional. Hanging Heaton C of E (VC) J & I School does not carry out any procedures at present which may fit into this category. If in any doubt please contact the Insurance and Risk Management Team who will check with external insurers. Any requirements of the insurance, such as the need for staff to be trained, should be made clear in the healthcare plan and complied with. In the event of a claim alleging negligence by a member of staff, civil actions are likely to be brought against the employer rather than the employee.

16.1. Staff who assist with administering medication to a child in accordance with the procedure detailed within this policy are explicitly reassured that they will be acting within the scope of their employment and that they will be indemnified. Indemnity requires that these procedures are followed as described here. The indemnity though will not be given in cases of fraud, dishonesty, or criminal offence. In the most unlikely event of any civil action for damages being taken against you, please contact the Insurance and Risk Management Team. Any member of staff will be fully supported throughout the process should an allegation be made.

17. Complaints

17.1. Should parents/carers be dissatisfied with the support provided, they must discuss their concerns directly with the school. This will be with the child's teacher/form tutor in the first instance, with whom any issues should be addressed. If this does not resolve the problem or allay the concern, the problem should be brought to a member of the school leadership team, who will, where necessary, bring concerns to the attention of the Head Teacher. In the unlikely event of this not resolving the issue, the parents/carers must make a formal complaint using the Hanging Heaton C of E (VC) J & I School Complaints Procedure.

Appendix 1: Process for Developing Individual Healthcare Plans



* This includes key stakeholders, for example if Home to School Transport (Passenger Travel Team) is required then the school need to consult with this team.

Appendix 2: Model Letter Inviting Parents/Carers to Contribute to Individual Healthcare Plan Development

Dear Parent/Carer

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents/carers, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that 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 the majority of cases, it is possible that 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.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely

Appendix 3: Individual Healthcare Plan

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

Family Contact Information

Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

Clinic/Hospital Contact

Name	
Phone no.	

G.P.

Name	
Phone no.	

Who is responsible for providing support in school	

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues, etc.

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips, etc.

Other information (insert any specialist healthcare plans here)

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

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

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

Appendix 4: Parental/Carer Agreement for Setting to Administer Medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

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

NB: Medicines must be in the original container as dispensed/purchased

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff]

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/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____ Date _____

Appendix 5 - Staff Training Record – Administration of Medicines

Name of school/setting	Hanging Heaton C of E (VC) J & I School
Name	
Name	
Name	Carol Haigh 4/25
Name	Esther Firth 6/25
Name	Emma Ryder 6/25
Name	Jackie Staves 6/25
Type of training received	Certificate in Administering Medication for Education Providers (2024-25)
Date of training completed	April 2025 & June 2025
Training provided by	National College
Profession and title	Samantha Kendall National College

I confirm that members of staff as identified above have received the training detailed above and is competent to carry out any necessary treatment. Training is to be updated every 2 years.

Trainer's signature see certificates in file

Date April 2025 & June 2025

Suggested review date April 2027

Hanging Heaton C of E (VC) J & I School Asthma Card – Appendix 6

Review this card at least once a year and remember to update it or exchange it for a new one if your child's treatment changes during the year and when new medication is needed.
Medicines/spacers should be clearly labelled with your child's name and kept in line with the school's policy.

Child's Name

Date of Birth _____
Address: _____
_____
_____

Parent/carer's name. _____

Telephone home _____
Telephone mobile _____

Email: _____
Name of doctors _____
Doctors telephone _____

What signs can indicate that your child is having an asthma attack?

Does your child tell you when he/she needs medicine?

☐ **Yes** **No** ☐

Does your child need help taking his/her medicine?

☐ **Yes** **No** ☐

What are your child's triggers (things that make their asthma worse)?

☐ **Pollen** ☐ **Stress**

☐ **Exercise** ☐ **Weather**

☐ **Cold/flu** ☐ **Air pollution**

If other please list:

Reliever treatment when needed.
For shortness of breath, sudden tightness in the chest, wheeze or cough, help or allow my child to take the medicines below. After treatment and as soon as they feel better, they can return to normal activity.

Date dispensed	Medicine	Expiry Date	Date Checked	Parent/Carer Signature

Does your child need to take any other asthma medicines while in the school's care?

☐ **Yes** **No** ☐

If yes, please describe below

Medicine	How much and when taken?

I understand that I must deliver the medicine personally to Mrs Haigh or Mrs Potter and give authority for my child to be administered with this medication. I also authorise that my child may be given the school inhaler as described above should their inhaler be out of date or medication.

Date: _____ Signature: _____ Relationship to pupil: _____

Appendix 7: Record of Medicine Administered to an Individual Child

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

Staff signature _____

Signature of parent/carer_____

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

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

C: Record of medicine administered to an individual child (Continued)

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 8: Record of Medicine Administered to all Children

Name of school/setting

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

Appendix 9: Contacting Emergency Services

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

1. your telephone number 01924 463035
2. your name
3. your location as follows [insert school/setting address] Hanging Heaton C of E (VC) J & I School, High St, Hanging Heaton, Batley, WF17 6DW.
4. state what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code
5. provide the exact location of the patient within the school setting
6. provide the name of the child and a brief description of their symptoms
7. inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
8. put a completed copy of this form by the phone