

# Supporting Students at School with Medical Conditions Policy

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**Approved By** Col Andy Thorne

**Role** Chairman of Trustees

Signed

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### 1. POLICY AIMS

This policy aims to ensure that:

- Students, staff, and parents understand how our School will support students with medical conditions.
- Students with medical conditions are properly supported to allow them to access the same education as other students, including school trips, sporting, social and educational activities, and emotional and wellbeing support.
- The School will ensure all staff understand their duty of care in the event of an emergency.
- The School will ensure appropriate staff understand student medication requirements and administer according to student needs, alongside training and legislative requirements.
- Making sure sufficient staff are suitably trained and students have fair access to these staff.
- Making staff aware of students' conditions, where appropriate.
- Making sure there are cover arrangements to ensure someone is always available to support students with medical conditions.
- Providing supply teachers, medical cover staff and relevant House staff with appropriate information about the policy and relevant students.
- Developing and monitoring individual healthcare plans (IHCPs).

The named persons with responsibility for implementing this policy is the Medical Centre Lead, Kate Stone.

# 2. LEGISLATION AND STATUTORY RESPONSIBILITIES

This policy meets the requirements under <u>Section 100 of the Children and Families Act 2014</u>, which places a duty on governing boards to make arrangements for supporting students at their school with medical conditions.

It is also based on the Department for Education (DfE)'s statutory guidance (December 2015) on supporting students with medical conditions at school.

This policy also complies with our funding agreement and articles of association.

This School has consulted on the development of this policy with a wide range of key stakeholders within both the School and health settings. The policy and supporting documents are based on Department of Education statutory guidance (Dec 2015) Supporting Students at School with Medical Conditions.

These key stakeholders include:

- The School Medical Centre
- St James' Surgery
- Houseparent
- Pastoral Leaders
- Parents/carers of students with medical conditions

• School Wellbeing Therapist

This policy is reviewed annually by the Vice Principal and Medical Centre staff.

Department of Education/Department of Health legislation will inform any changes to this policy.

# 3. ROLES AND RESPONSIBILITIES

### 3.1 The Board of Trustees

The Board of Trustees has ultimate responsibility to make arrangements to support students with medical conditions. The Board of Trustees will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

The Board of Trustees should ensure the School's leaders liaise with health and social care professionals, students, and parents to ensure the needs of students with medical conditions are effectively supported. The needs of each individual student must be considered and how their medical condition impacts on their school life.

The Board of Trustees must ensure the arrangements they put in place are sufficient to meet their statutory responsibilities and should ensure that policies, plans, procedures, and systems are properly and effectively implemented.

# 3.2 The Principal

The Principal will:

- Make sure all staff are aware of this policy and understand their role in its implementation.
- Ensure there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHCPs), including in contingency and emergency situations.
- Ensure all staff who need to know are aware of a child's condition.
- Take overall responsibility for the development of IHCPs.
- Make sure School staff are appropriately insured and aware they are insured to support students in this way.
- Contact the School medical team in the case of any student who has a medical condition that may require support at school, but who has not yet been brought to the attention of the medical team.
- Ensure that systems are in place for obtaining information about a child's medical needs and this information is kept up to date.

### 3.3 Staff

Supporting students with medical conditions is not the sole responsibility of one person. All members of staff *may* be asked to provide support to students with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support students with medical conditions will receive sufficient and suitable training and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of students with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a student with a medical condition needs help.

### 3.4 Parents

Parents will:

- Provide the school with sufficient, ongoing, and up-to-date information about their child's medical needs. This starts with the provision of information on application and continues all the time whilst their child remains a student at the School. This is a requirement of attendance at the School.
- Be involved in the development and review of their child's IHCP and may be involved in its drafting.
- Carry out any action they have agreed to as part of the implementation of the IHCP, e.g., provide medicines and equipment, and ensure they or another nominated adult are contactable at all times.
- Understand the School and medical team's responsibilities with medication, including controlled medication (CDs), and comply accordingly. This includes, but is not exhaustive, to giving information of all prescription only medication (POMs), handing in all contained and labelled CDs, POMs, homely and supplementary medication to the House staff or Medical Centre staff (see section 7).

### 3.5 Students

Students with medical conditions will often be best placed to provide information about how their condition affects them. Students should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHCPs. They are also expected to comply with their IHCPs.

Students should inform staff, especially the medical team, should anything change with their medical condition; especially if new and different symptoms occur.

# 3.6 Medical Centre Team, healthcare, and other professionals

Our Medical Centre will notify the School when a student has been identified as having a medical condition that will require support in School. This will be before the student starts school, wherever possible. They may also support staff to implement a child's IHCP.

Healthcare professionals, such as GPs and paediatricians, may liaise with the School's medical team and notify them of any students identified as having a medical condition. They may also provide advice on developing IHCPs.

The School, Local Authority, health professionals and other support services should work together to ensure that children with medical conditions receive a full education.

# 4. **EQUAL OPPORTUNITIES**

Our School is clear about the need to actively support students with medical conditions to participate in school trips, sporting, social and educational activities, and emotional and wellbeing support, and not prevent them from doing so.

The School will consider what reasonable adjustments need to be made to enable these students to participate fully and safely on school trips, visits, and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that students with medical conditions are included. In doing so, students, their parents and any relevant healthcare professionals will be consulted. The School will ensure the students safety is at the heart of every decision.

### 5. BEING NOTIFIED THAT A CHILD HAS A MEDICAL CONDITION

All medical information of new students is screened by the Medical Centre team prior to arriving at school. Contact is only made with parents and/or students if a health need is identified from the documentation.

When the School is notified that a student has a medical condition, the process outlined in Appendix 1 (see Appendix 1) will be followed to decide whether the student requires an IHCP.

The School will make every effort to ensure arrangements are put into place prior to arrival, or by the beginning of the relevant term for students who are new to our School. If this is not possible, contact will be made with parents and appropriate staff to understand why.

# 6. INDIVIDUAL HEALTHCARE PLANS (IHCPs)

The Principal has overall responsibility for the development of IHCPs for students with medical conditions. This has been delegated to the post holder of Medical Centre Lead.

Plans will be reviewed at least annually, or earlier if there is evidence that the student's needs have changed.

This School uses IHCPs to record important details about individual students' medical needs. Further documentation can be attached to the Individual Healthcare Plan if required.

Students' medical records are reviewed on entry to the School by the Medical Centre. If a student is already in receipt of an IHCP this will be reviewed and amended as appropriate. If a student is considered in need of an IHCP this will be written and reviewed with the student. A copy will be e-mailed to the parent for information. It is the responsibility of parents to contact the Medical Centre as soon as possible if they would like any changes to be made to the Health Care Plan.

Plans will be developed with the student's best interests in mind and will set out:

- What needs to be done.
- When.
- By whom.

Not all students with a medical condition will require an IHCP. It will be agreed with a healthcare professional and the parents when an IHCP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the Medical Centre Lead will make the final decision.

Plans will be drawn up in partnership with the school, parents, and a relevant healthcare professional, such as a school clinician, specialist, or paediatrician, who can best advice on the student's specific needs. The student will be involved wherever appropriate.

IHCPs will be linked to, or become part of, any education, health, and care (EHC) plan and will work alongside the post holder of Special Educational Needs Co-ordinator (SENCo) for effective implementation should it be required. If a student has SEND but does not have an EHC plan, the SEND will be mentioned in the IHCP.

The SENCo will know which students have SEN due to their medical condition and will ensure teachers make arrangements if students need special consideration.

The level of detail in the plan will depend on the complexity of the student's condition and how much support is needed. The Board of Trustees and the Medical Centre Lead will consider the following when deciding what information to record on IHCPs:

- The medical condition, its triggers, signs, symptoms, and treatments.
- 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, e.g., 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 will be clearly stated with appropriate arrangements for monitoring, and a self-medication form be completed and signed by the student and medical staff member if required.
- If emergency medication is required, to ensure the student understands the needs to carry this with them at all times and ensure the boarding Houses understand this requirement and support accordingly.
- 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 Principal 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, e.g., risk assessments.
- Where confidentiality issues are raised by the parent/student, the designated individuals to be entrusted with information about the student's condition are aware.
- What to do in an emergency, including who to contact, and contingency arrangements.

Once completed, IHCPs are kept in the Medical Centre in a locked cupboard, on the Medical Centre secure one drive and a paper copy sent to the relevant House to be locked away with the student file.

### 7. MANAGING MEDICINES

Prescription only medicines and homely medicines will only be administered at School:

- When it would be detrimental to the student's health or school attendance not to do so and
- Where we have parents' written consent

The only exception to this is where the medicine has been prescribed to the student without the knowledge of the parents.

Students under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a student any homely medication will first check maximum dosages and when the previous dosage was taken. This information is kept on SIMS. If in doubt, please contact the Medical Centre. Compliance with the individual staff member's medicines training must be upheld and staff must not administer medications outside of their scope of practice.

The school will only accept prescribed medicines that are:

- In-date.
- Labelled.
- For the named student.
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage, and storage.
- Of United Kingdom origin. Medicines brought from overseas will **not** be accepted as these medicines may be different to UK licensing.

All staff who have a responsibility to issue medication to students are required to be familiar with related policy. All boarding staff and tutors must complete and pass the OPUS training package covering administration of medicines. Additional one to one support is offered by the Medical Centre team where appropriate or requested.

Pastoral Leaders in the Houses are annually audited by Medical Centre Staff, more frequently if a need is identified either through medication auditing or medication incidents. Internal medication audits of the storage, administration and recording of medication are undertaken by the Medical Centre team with pastoral leaders from each boarding house biannually. The Boots pharmacist carries out audits on a rotational basis.

For off-site activities, such as school-trips, visits, holidays, and other school activities outside of normal timetable hours, a risk assessment is undertaken to ensure students have access to their medication. A staff member is named as the responsible lead. The risk assessment also helps to identify any reasonable adjustments that need to be made.

### 7.1 Storage of medicines

All medicines will be stored safely. Students will be informed about where their medicines are at all times and be able to access them immediately. 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. Ideally, the student should carry these at all times.

Medicines will be returned to parents if not required or not authorised by the pharmacist. If medicines are not collected after one whole term, the medicines will be disposed of by the Medical Centre following correct procedures.

Spare supplies of emergency medication are kept in the Medical Centre.

For school trips and activities outside of school premises, provision will be made in a timely manner to ensure medicines are safely and appropriately stored. The student must have an understanding and know where their medicines and appropriate devices are at all times when off school premises.

# 7.2 Controlled drugs

<u>Controlled drugs</u> are prescription medicines that are controlled under the <u>Misuse of Drugs</u> Regulations 2001 and subsequent amendments, such as morphine or methadone.

A student who has been prescribed a controlled drug may **not** have it in their possession *unless* it has been authorised by the parent for the student to have it on their persons to travel due to holiday requirements. It is not an offence for a child to have a controlled drug on their person, but it *is* an offence for a child to pass it to another child for use.

All controlled drugs must be kept in a secure cupboard where is appropriate for the administration to the student; this will mainly be in the boarding house office and/or the Medical Centre. Staff may administer controlled drugs **only** to the student it has been prescribed. Staff **must** complete appropriate paperwork and record keeping at all times stating what, when, how much was administered, and by whom.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

All staff must have an understanding of the importance of compliance with legislative requirements for controlled drugs.

# 7.3 Students Managing Their Own Needs

Students who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents, and it will be reflected in their IHCPs and documented accordingly.

Students will be allowed to carry their own medicines and relevant devices wherever possible. Staff will not force a student to take a medicine or carry out a necessary procedure if they refuse but will follow the procedure agreed in the IHCP and document accordingly. This may include informing the Medical Centre and parents so that an alternative option can be considered.

### 8. UNACCEPTABLE PRACTICES

School staff should use their discretion and judge each case individually with reference to the student's IHCP, but it is generally *not* acceptable 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.
- Ignore medical evidence or opinion (although this may be challenged).
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from participating in normal school activities unless this is specified in their IHCPs.
- If the student becomes ill, send them to the boarding house or Medical Centre unaccompanied or with someone unsuitable.
- Penalise students for their attendance record if their absences are related to their medical condition, e.g., hospital appointments.
- Prevent students from participating or create unnecessary barriers to students participating in any aspect of school life, including school trips.
- Administer, or ask students to administer, medicine in school toilets.

# 9. EMERGENCY PROCEDURES

Staff will follow the school's normal emergency procedures (calling the Medical Centre in opening hours, SLT and 999).

The School has public accessible defibrillators (PAD) on site. Sudden cardiac arrest is when the heart stops beating and can happen to people of any age and without warning. If this does happen, quick action in the form of early CPR and defibrillation can help save lives. A defibrillator attempts to restart the heart when they are in cardiac arrest. It is best practice for one person to start CPR and another person to fetch the defibrillator.

All students' IHCPs will clearly set out what constitutes an emergency and will explain what to do.

If a student needs to be taken to hospital and it is **not** an emergency, this will be arranged by the Medical Centre. A member of staff/medical escort will remain with the student until the parent and/or guardian arrives at hospital. This applies to both emergency and non-emergency situations.

A comprehensive information and feedback form completed by the Medical Centre is sent with the student's escort to the Hospital. This includes current medication, allergies, and medical conditions.

### 10. TRAINING

Staff who are responsible for supporting students with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHCPs. Staff who provide support to students with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Medical Centre Lead. Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and confident in their ability to support the students.
- Fulfil the requirements in the IHCPs.
- Help staff to understand the specific medical conditions they are being asked to deal with, their implications and preventative measures.

The Medical Centre team will support the relevant staff with appropriate knowledge and skills as necessary. They will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication to be able to support the student.

All staff will receive training so they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

### 11. RECORD KEEPING

The Board of Trustees will ensure that written records are kept of all medicine administered to students for as long as these students are at the School and are kept up until the child reaches their  $25^{th}$  birthday.

Medicine Administration Record (MAR) charts are used for recording all prescribed and authorised medication.

If a student has a short-term medical condition that requires medication during school hours, a MAR chart is issued to the boarding house for the purpose of recording medication issued to the student. Parents are informed at the time of issue.

IHCPs are stored as documented above (see section 7, IHCPs)

### 12. LIABILITY AND INDEMNITY

The Board of Trustees will ensure that the appropriate level of insurance is in place and appropriately reflects the School's level of risk.

The details of the School's insurance policy are the Department for Education's risk protection arrangement. This is a voluntary arrangement for academies, free schools, and local authority-maintained schools. It is an alternative to insurance through which the cost of risks that materialise will be covered by government funds.

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We will ensure that we remain a member of the Department for Education's risk protection arrangement (RPA).

# 13. COMPLAINTS

Parents with a complaint about their child's medical condition should discuss these directly with the Medical Centre Lead in the first instance. If the Medical Centre Lead cannot resolve the matter, it will be passed to the Designated Safeguarding Lead, who may then direct parents to the School's Complaints Procedure.

### 14. MONITORING ARRANGEMENTS

Policies should be reviewed regularly and be readily accessible to parents and School staff. The Medical Centre team will be involved in any updates required for medical policies.

This policy will be reviewed yearly and approved by the Board of Trustees.

### 15. FURTHER GUIDANCE AND CONCERNS

For further guidance refer to Supporting Students at School with Medical Conditions (DfE Dec 2015) and the School's Medical Care Policy

If parents or students have any questions or wish to raise a concern about how students with medical conditions are supported by the School, they should do so by contacting the lead Nurse. If the matter cannot be rectified, School's Complaints Procedure should be followed.

- The Human Medicines Regulations (2012)
- Managing Medicines in Schools and Early Years Settings (DfES 2005) <u>Managing Medicines in Schools Health Education Trust</u>
- Statutory guidance <u>Supporting students with medical conditions at school GOV.UK</u> (www.gov.uk)

# APPENDIX 1. Flowchart for being notified a child has a medical condition.

Medical Centre staff will collate all details of students with medical conditions from admission data paperwork and update on SIMS as necessary.



Healthcare professional or parent informs School of medical needs on admission, or if newly diagnosed, or that needs have changed.





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Students with Individual Healthcare Plans added to SIMS on Quick Note and Medical Note sections Risk assessments for School visits and activities off site include relevant medical information. All consent forms to include a request for medical information from Medical Centre. Medical Centre identify those students needing an Individual Healthcare Plan (IHCP) with a high level of medical need e.g., diabetes, severe allergic reaction (Adrenaline Auto-Injector users), and epilepsy.





Medical Centre Staff liaise with parents, students, healthcare professionals, key staff (SENCo, Housemaster/Mistress), as appropriate. Agreement reached what support is needed, and who leads on writing the IHCP (guidance p10 DfE document).

All administration of medication to follow procedures in the Administration of Medication policy (found within the Medical Care Policy).



IHCP implemented and circulated to all relevant staff.



IHCP reviewed annually or when condition changes.