



**Learning Link Multi-Academy Trust (LLMAT)**  
**Supporting Pupils with Medical Conditions Policy**  
**(March 2021)**

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*Mission - The Learning Link MAT will improve the life chances of all children and create a family of outstanding academies where world class leaders place children at the heart of everything.*

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*Date approved:*

*Approved by: LLMAT Trustees*

*Date for renewal:*

# Supporting Pupils with Medical Conditions Policy

## Definition

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

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

## School Ethos

Schools have a responsibility for the health and safety of pupils in their care. The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of pupils with special medical needs, the responsibility of the employer is to make sure that safety measures cover the needs of all pupils at the school. This may mean making special arrangements for particular pupils so that they can access their full and equal entitlement to all aspects of the curriculum. In this case, individual procedures may be required. LLMAT schools are responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support that pupils with medical conditions (long or short term) may need. A record of all training should be kept in school. This is the responsibility of the school's Leadership Team.

The Children and Families Act 2014 places a duty on schools to make arrangements for children with medical conditions. **Pupils with medical conditions have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone.** However, teachers and other school staff in charge of pupils have a common law duty to act 'in loco parentis' and must ensure the safety of all pupils in their care. To this end, we reserve the right to refuse admittance to a child with an infectious disease, where there may be a risk posed to others or to the health of the child involved. This duty also extends to teachers leading activities taking place off the school site.

The prime responsibility for a child's health lies with the parent, who is responsible for the child's medication and must supply the school with all relevant information needed in order for proficient care to be given to the child. The school takes advice and guidance from a range of sources, including the School Nurse, Health professionals and the child's GP in addition to the information provided by parents in the first instance. This enables us to ensure we assess and manage risk and minimise disruption to the learning of the child and others who may be affected, for example, other children in the class.

## **Our Aims**

- To support pupils with medical conditions, so that they have full access to education, including physical education and educational visits
- To ensure that school staff involved in the care of children with medical needs are fully informed and adequately trained by a professional in order to administer support or prescribed medication
- To comply fully with the Equality Act 2010 for pupils who may have disabilities or special educational needs.
- To write, in association with healthcare professionals, Individual Healthcare Plans where necessary
- To respond sensitively, discreetly and quickly to situations where a child with a medical condition requires support
- To keep, monitor and review appropriate records

## **Unacceptable Practice**

While school staff will use their professional discretion in supporting individual pupils, it is unacceptable to:

- Prevent children from accessing their medication, whether this be prescribed or non-prescribed medication
- Assume every child with the same condition requires the same treatment
- Ignore the views of the child or their parents / carers; ignore medical advice
- Prevent children with medical conditions accessing the full curriculum, unless specified in their Individual Healthcare plan
- Penalise children for their attendance record where this is related to a medical condition
- Prevent children from eating, drinking or taking toilet breaks where this is part of effective management of their condition
- Require parents to administer medicine where this interrupts their working day
- Require parents to accompany their child with a medical condition on a school trip as a condition of that child taking part

## **Entitlement**

LLMAT schools provides full access to the curriculum for every child wherever possible. We believe that pupils with medical needs have equal entitlement and must receive necessary care and support so that they can take advantage of this.

However, we also recognise that employees have rights in relation to supporting pupils with medical needs, as follows:

Employees may:

- Choose whether or not they wish to be involved
- Receive appropriate training
- Work to clear guidelines
- Bring to the attention of Senior Leadership any concern or matter relating to the support of pupils with medical conditions

## **Expectations**

It is expected that:

- Parents will inform school of any medical condition which affects their child.
- Parents will supply school with appropriately prescribed medication, where the dosage information and regime is clearly printed by a pharmacy on the container
- Parents will ensure that medicines to be given in school are in date and clearly labelled
- Parents will co-operate in training their children to self-administer medicine if this is appropriate, and that staff members will only be involved if this is not possible
- Medical professionals involved in the care of children with medical needs will fully inform staff beforehand of the child's condition, its management and implications for the school life of that individual
- LLMAT schools will ensure that, where appropriate, children are involved in discussing the management and administration of their medicines and are able to access and administer their medicine if this is part of their Individual Healthcare plan (for example, an inhaler)
- School staff will check that medication is in date half termly and let parents know when the medication is running low.
- School staff will liaise as necessary with Healthcare professionals and services in order to access the most up-to-date advice about a pupil's medical needs and will seek support and training in the interests of the pupil
- Transitional arrangements between schools will be completed in such a way that we will ensure full disclosure of relevant medical information, Healthcare

plans and support needed in good time for the child's receiving school to adequately prepare

- Individual Healthcare plans will be written, monitored and reviewed regularly and will include the views and wishes of the child and parent in addition to the advice of relevant medical professionals

## **Procedure**

The Trustees of LLMAT schools are required to ensure that an appropriate level of insurance is in place and reflects the level of risk presented by children with medical conditions.

## **Information**

Children with serious medical conditions will have their photo and brief description of condition, along with any other necessary information in the staffroom, and other areas where they can be viewed confidentially by staff and appropriate information is to be made available to supply staff.

Children with medical conditions which may require emergency attention, e.g. epilepsy or diabetes, will have their names and an Individual Healthcare Plan / Medication Plan clearly accessible in their classroom, staff room and office, ensuring that all adults dealing with the child will have their attention drawn to this information. Including where required supply staff.

Individual Healthcare Plans / Medication Plans are accessible for kitchen staff for children with allergies to any types of food so that school meals are prepared accurately. Some different school meals could be provided for children who are coeliac to ensure that the dinner will meet their tolerance levels.

The Individual Healthcare Plan / Medication Plan is developed with the pupil (where appropriate), parent, school staff, specialist nurse (where appropriate) and relevant healthcare services. Individual Health Care plans will be put into place and the arrangements made with two weeks of the school being informed or a new child joining the school. If a child is starting at the start of a school term and the school knows about the medical needs prior to the term starting the plan and arrangements should be in place before the child starts at school. These will be monitored and reviewed by *{insert}* annually or sooner if medical information changes.

All other medical conditions will be noted from children's electronic records and this information will be provided to class teachers annually unless there is a change to a child in their class and then it will be updated promptly.

Where a child is returning to LLMAT schools following a period of hospital education or other provision (including home tuition), we will work with other professionals to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

New members of staff and supply staff will be informed about children who have medical needs and made aware of how to find out which staff have first aid training and who are able to administer medicine.

### **In an emergency**

In a medical emergency, the school's First Aiders or senior staff, will be asked to attend.

If an ambulance needs to be called, staff will:

- Outline the full condition and how it occurred
- Give details regarding the child's date of birth, address, parents' names and any known medical conditions.

Children will be accompanied to hospital by a member of staff if this is deemed appropriate. Staff cars should not be used for this purpose. Parents must always be called in a medical emergency, but do not need to be present for a child to be taken to hospital.

### **Administration of medicines**

Only essential medicines will be administered during the school day. Parents must request for the school to administer medication using the appropriate school form before any medicine is administered. Medicines to be given during the school day must be in their original container, within the use by date, labelled and include instructions for administration, dosage and storage. Controlled drugs can also be administered, subject to all other conditions as described in the Policy.

Essential medicines will be administered on Educational Visits, subject to the conditions above. A risk assessment may be needed before the visit takes place. Staff supervising the visit will be responsible for safe storage and administration of the medicine during the visit.

Trained and named staff members will give medicines Before administering any medicine, staff must check that the medicine belongs to the child, must check that the dosage they are giving is correct, and that written permission has been given. Any child refusing to take medicine in school will not be made to do so, and parents will be informed about the dose being missed. All doses administered will be recorded on the appropriate form(s)

All medicines will be stored safely. Medicines needing refrigeration will be stored in the identified fridge.

Controlled drugs or prescribed medicines will be kept in the medicine cupboard **in the office**. Access to these medicines is restricted to the named persons.

Epi-pens are kept in the medicine cupboard **in the office**. In the case of Epi-Pens all staff have access to the box which is clearly labelled and accessible.

Children self-administering asthma inhalers do not need to be recorded. Inhalers are kept **in the office**. Children have access to these inhalers at all times, though must inform a member of staff that they are taking a dose. All inhalers are marked with the child's name. All children with an inhaler must take them on educational visits, however short in duration.

Epi-pen – Any member of staff, who has received epi-pen training, can administer an epi-pen in an emergency

The pen (cap off) should be pushed against the child's thigh, through clothing if necessary. The pen should be held for a count of 10 seconds before being withdrawn. Ambulances must be called for a child who may require an epi-pen. If prescribed, Cetirizine may be given if slight tingling of the lips occurs following ingestion of possible irritants for nut allergy sufferers. This is a liquid medicine stored with the epi-pen. If symptoms are more severe, the epi-pen should be given immediately. An ambulance must be called immediately. Parents should be contacted after this call has been made.

When no longer required, medicines should be returned to the parents to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps.

### **Trained Staff**

LLMAT schools ensure that it has a suitable number of first aiders in school at all times. There are a number of staff who have completed the full certificate and others who have completed the Paediatric First Aid (one day course). An updated list detailing the names of staff and qualifications held are displayed in the office. All first aiders can be responsible for administering medication when needed.

### **Complaints**

Should parents be unhappy with any aspect of their child's care they must discuss their concerns with the school. This will be with the child's class teacher in the first instance, with whom any issues should be managed. If this does not resolve the problem or allay concern, the problem should be brought to a member of the inclusion team, who will, where necessary, bring concerns to the attention of the Senior Leadership Team. In the unlikely event of this not resolving the issue, the parents must make a formal complaint using our Complaints Procedure.