Brettenham School
Medical Needs Policy

The review date is a guide and the policy remains in place until such time as it has been reviewed or superseded by updated relevant statutory guidance.

Last Reviewed:	**July 2025**
Date Reviewed:	**May2026**
Reviewed by:	**Executive Team**
Next Review:	**January 2029**

MANAGING MEDICINES AND SUPPORTING CHILDREN WITH MEDICAL NEEDS

This policy is in line with DFE 'supporting pupils at school with medical conditions' September 2014 (updated August 2017).
Section 100 of the Children and Families Act 2014 places a duty on governing boards of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions.

1 Introduction

At Brettenham School our aim is to ensure that all children with medical conditions, in terms of both physical and mental health are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

1.1 We recognise that some children may require on-going support, medicines or care while at school to help them manage their condition and keep themselves well.

1.2 At Brettenham School we receive and fully consider advice from healthcare professionals and listen to and value the views of parents and pupils. We recognise the social and emotional implications associated with medical conditions and will support children and families to achieve the best outcomes possible.

1.3 Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Some may have special educational needs (SEN) and may have an Education, Health and care Plan (EHCP) which brings together health and social care needs, as well as their special educational provision.

1.4 The Head teacher, trustees, governors and staff of Children First schools wish to ensure that children with medication needs receive appropriate care and support in order to play and full and active part in their school life.

2. Roles and Responsibilities

2.1 The Head Teacher - ensures that the school's medical policy is developed and effectively implemented with partners. They ensure that school staff are aware of the policy and understand their role in its implementation.

2.2 The Head teacher retains overall responsibility for the development of health care plans. However, the day to day management of healthcare plans has been delegated to the school SENCo working in partnership with parents, school welfare assistant, healthcare professionals and where appropriate social care professionals.

2.3 The Head teacher makes sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way.

2.4 The Head teacher will liaise with the Welfare Officer and SENCo to monitor the effectiveness of medical provision. This will help identify any further training/advice needed for staff supporting children with medical conditions. It will ensure sufficient trained numbers of staff are available to implement the policy and will adapt to any new situations to promote best outcomes for children.

3. School Staff

3.1 Any member of school staff may be asked to provide support for pupils with medical conditions, including the administering of medicines, although they cannot be required to do so.

3.2 School staff undertaking medical duties will receive sufficient training to undertake medical tasks and will achieve the necessary level of competency before they take on responsibility to support children with medical needs.

3.3 Staff should not give prescription medicines or undertake healthcare procedures without appropriate training.

3.4 The School Welfare Team, Deputy Heads, Assistant Head Teachers and SENCo are responsible for arranging staff training and ensuring that all relevant staff are made aware of the child's medical condition. Risk assessments will be carried out for school trips and other school activities by Assistant Head Teachers and class teachers.

3.5 Where a child is returning to school following a period of hospital education or alternative provision school staff will work closely with parents and other partners to ensure a successful and smooth reintegration.

3.6 A referral will be made to The School Nurse Team for support in writing more complex healthcare plans and to quality assure plans written by School. During complex cases and where necessary The School Nurse Team will meet with parents and staff to devise and review care plans, provide training and advice.

3.7 Specialist health care professionals may provide advice on developing health care plans and support in schools for children with particular conditions (e.g. asthma, diabetes, epilepsy).

4. Pupils

4.1 Pupils are often best placed to provide information about how their condition affects them and should be fully involved in discussions as much as possible about their medical support needs. This will include encouraging children who are competent managing their own medicines and procedures as reflected in their health care plans

5 Parents

5.1 Parents should provide the Welfare Officer with the most up to date information about their child's medical needs.

5.2 Parents should work in partnership with the school and health care professionals to develop and review the health care plan.

5.3 Parents should carry out any actions identified on their child's health care plan and/or medical requirements e.g. provide medicines and equipment and ensure they or another nominated adult are always contactable.

5.4 Parents should ensure they adhere to the following school guidelines:

- Provide complete written and signed instructions for any prescribed or over the counter medications as without this the school cannot administer them. The school has an agreed form to complete.

- Keep their children at home if acutely unwell or infectious for the recommended period of time

- Provide reasonable quantities of medication at a time (for example, a maximum of four weeks supply at any one time)

- Where the pupil travels on school transport with passenger assistants, parents should ensure they have written instructions relating to any medication sent with the pupil, including medication for administration during respite care.

- Renew any medication when supplies are running low and ensure that the medication supplied is within its expiry date.

- Deliver each item of medication to the Welfare Officer in a secure and labelled container as originally dispensed. Each item of medication must be clearly labelled with the following information:

Pupil's Name
Name of medication
Dosage
Frequency of administration
Date of dispensing
Storage requirements (if important)
Expiry date

- Notify the school/ in writing if the pupil's need for medication has ceased.

6 Local Authority

6.1 Local authorities have a duty to commission school nurses and to promote cooperation between relevant partners with the view to improving the wellbeing of children.

6.2 Local authorities provide advice, support and training to ensure that support specified within healthcare plans is delivered effectively.

6.3 Local authorities have a duty to make arrangements when it is clear that a child will be away from school for 15 days or more (whether consecutive or cumulative across the school year) because of health needs.

7 The Governing Body

7.1 Trustees will ensure that policies and systems are in place for so that children with medical needs are included and supported.

7.2 The Governing body will ensure that this policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support pupils at school with medical conditions.

7.3 The Governing body will ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. This includes ensuring staff have adequate training.

8 <u>Training</u>

8.1 Whole staff awareness training regarding supporting children's medical needs will be carried out at the beginning of each term.

8.2 New members of staff and volunteers will have this training as part of their induction package. Arrangements for this have been set out in the induction policy.

8.3 The school undertakes annual Auto-injector training and diabetes training matched to the individual child's health care plan.

9 Procedures for managing medicines

9.1 Medicines should **only** be administered in school when it would be detrimental to a child's health or school attendance not to do so.

9.2 A child under the age of 16 should never be given medicine containing aspirin unless prescribed by a doctor.

9.3 Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside of school hours.

9.4 All medicines must be in their original container and any prescribed medicines must be prescribed by an **NHS** Doctor or pharmacist. All medication must be in date, labelled with the child's name, instructions for administration, dosage and storage. The exception being insulin which still must be in date but will generally be available to schools inside an insulin pump or pen, rather than in the original container.

9.5 All medicines will be stored safely. Children and staff will know where their medicines are kept and must be able to access them immediately. Healthcare plans, medicines and equipment will accompany children on all trips.

9.6 Staff may administer a controlled drug to the child whom it has been prescribed by a **NHS** Doctor or pharmacist. A record will be kept, and instructions will be followed.

9.7 Medicines no longer required will be returned to parents. Parents should arrange for safe disposal. Sharps boxes are available in the medical room for the safe disposal of needles.

9.8 If children refuse to take medicines, staff will not force them to do so, and will inform the parents of the refusal, as a matter of urgency, on the same day. If a refusal to take medicines results in an emergency, the school's emergency procedures will be followed.

10 Unacceptable practice

10.1 Brettenham School follows the Department for Education guidelines which state, Schools must make explicit the following *unacceptable practices*:

- Preventing children from accessing their medication
- Assuming every child with the same condition requires the same treatment
- Ignoring views of the child and parent (although this may be challenged)

- Sending children with medical conditions home frequently or preventing them from staying for normal school activities, unless this is specified in the health care plans

- If the child becomes ill, sending them to the school office or medical room unaccompanied or with someone unsuitable

- Penalising children for their attendance record if absences are related to their medical condition e.g. hospital appointments

- Preventing children from drinking, eating or taking toilet breaks whenever they need in order to manage their medical condition effectively

- Requiring parents to attend school to administer medication or to provide medical support to their child, including with toileting issues

- Preventing children from participating in any aspect of school life.

11 Complaints Procedure

11.1 Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school

11.2 If for any reason this does not resolve the issue a complaint should be made via the school's complaint procedure. Please request a copy of this from the school office.

12 Healthcare Plans

12.1 Healthcare plans ensure that the focus remains on the individual child's needs and consider how their medical condition impacts on their school life.

12.2 Healthcare plans provide clarity on what actions need to be taken, when they need to be carried out by and whose responsibility these actions are.

12.3 When the school is notified that a pupil has a medical condition, the Welfare Officer will meet with parents and healthcare professionals. Decisions will be made as quickly as possible regarding transition arrangements, staff training or support and these actions will be kept under review according to the needs of the individual child. All healthcare plans are reviewed annually.

12.4 If a situation occurs that is a medical emergency an ambulance will be called and parents informed. This may occur for children with or without a medical care plan. Senior leaders will always be informed if an ambulance is called.

This Policy should be read in conjunction with:

- The Health and safety policy
- The Policy for managing pupils with Asthma
- Educational Visits Policy