



Name of Policy: Supporting Children at School with Medical Conditions
Author/s: Chris Carter and Ben Dale
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Links with other
policies/procedures: Managing medicines
Links to procedures: Health Care Plans and emergency

APPROVED: FULL GOVERNING BODY 19/1/23

Woodlands Meed: Building Unique Futures Together

This includes:

- Providing a safe, secure environment
- Recognising the individual needs and strengths of each child
- Planning and facilitating unique, enjoyable opportunities to maximise learning and potential
- Working with parents/carers and outside agencies to achieve the best for each child
- Ensuring opportunities from the wider community are utilised

Race and Equalities Statement Woodlands Meed pledges itself to be a place where pupils and adults of all races, religions, gender, abilities, sexuality and social circumstances will find security and respect for themselves, their families, other people and their traditions. It is our policy to ensure that each member of the school community respects others and is respected, can take part in the full life of Woodlands Meed, achieves his/her potential, and has the opportunity to exercise choice.

About this Policy

This Policy is governed by the statutory guidance and non-statutory advice set out in the document 'Supporting Pupils at School with Medical Conditions' DFE Dec 2015

The policy also applies to activities taking place off-site as part of normal educational activities.

The Early Year's setting will continue to apply the Statutory Framework for the Early Years Foundation Stage.

The Children and Families Act 2014 places a duty on the Governing Body to make arrangements for supporting pupils in school with medical conditions

Key Points for Woodlands Meed School

Every effort will be made to ensure that

- Pupils at school with medical conditions will be properly supported so that they have full access to education, including school trips and physical education.
- The Governing Body is legally responsible and accountable for ensuring that arrangements are in place in school to support pupils with medical conditions.

- The Governing Body will ensure that school leaders consult health and social care professionals, pupils and parents/carers to ensure that the needs of children with medical conditions are effectively supported.
- The needs of the children include educational impacts, and social and emotional implications associated with medical conditions.
- The Governing Body will ensure that it meets its duty under the Equality Act 2010.
- As our children have statements, or an Education Health and Care Plan (EHC), this policy operates in conjunction with the SEN Code of Practice

The Role of the Governing Body

1. The Governing Body will ensure that arrangements are in place to support pupils with medical conditions. In doing so they will ensure that such children can access and enjoy the same opportunities at school as any other child. In some cases this will require flexibility and involve, for example, programmes of study that rely on part time attendance at school in combination with alternative provision arranged by the local authority. Consideration may also be given to how children will be reintegrated back into school after periods of absence.

2. In making their arrangements the governing body 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. Some will be more obvious than others. The Governing Body will therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life.

3. The Governing Body will ensure that their arrangements give parents/carers and pupils confidence in the school's ability to provide effective support for medical conditions in school. The 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. They will ensure that staff are properly trained to provide the support that pupils need.

4. Children and young people with medical conditions are entitled to a full education and have the same rights of admission to school as other children. This means that no child with a medical condition will be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made. However, in line with their safeguarding duties, the Governing Body will ensure that pupils' health is not put at unnecessary risk from, for example infectious diseases. They therefore do not have to accept a child in school at times where it would be detrimental to the health of that child or others to do so.

5. The Governing Body will ensure that 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. This aligns with their wider safeguarding duties. The Governing Body will ensure that this policy is reviewed regularly and is readily accessible to parents/carers and school staff.

Policy Implementation

The head teacher is responsible for ensuring that:

- Sufficient staff are suitably trained, including in the case of staff absence or staff turnover.
- All relevant staff, including supply staff, are aware of children's conditions.
- Risk assessments for school visits, holidays and other school activities outside of the normal timetable include reference to children's medical needs.
- Individual healthcare plans are kept up to date.
Procedures to be followed when notification is received that a pupil has a medical condition.
Staff work as part of a multidisciplinary team with health professionals within school to ensure medical needs are adequately met.
- A school leader will consult with the relevant health and social care professionals, the pupil and parent/carers as soon as notification is received. This may include occupational

therapist, physiotherapist and nursing services. Where a child is changing schools, the health and social care professionals linked to the previous setting will be consulted.

- Relevant Health & Social Care professionals, the pupil, parent/carers will contribute guidance as appropriate where a pupil is being re-integrated or where their needs have changed. This may include decisions about the rate of integration, timetable adaptations and changes, and arrangements for any staff training and support. For children new to school, arrangements should be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or children moving to Woodlands Meed mid-term, every effort will be made to ensure that arrangements are put in place within 2 weeks.
- In some cases Woodlands Meed may not 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 the available medical evidence and in consultation with parent/carers. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place, in the best interests of the child.

Individual Healthcare Plans

Class teams are responsible for ensuring the compiling of Individual Health Care Plans in collaboration with nursing staff. Woodlands Meed School, healthcare professionals and parent/carers should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached, the head teacher will take a final view. Individual Healthcare Plans will be easily accessible to all who need to refer to them, while preserving confidentiality. The level of detail within plans will depend on the complexity of the child's condition and the degree of support needed.

Individual Healthcare Plans, (and their review), may be initiated, in consultation with the parent/carer, by a member of school staff or a healthcare professional involved in providing care to the child. Plans will be drawn up in partnership between the school, parents/carers, and a relevant healthcare professional, who can best advise on the particular needs of the child. Plans for children with complex health needs including anaphylaxis, asthma and epilepsy will be overseen by the school nurses. Pupils will also be involved whenever appropriate. The aim will be to capture the steps which Woodlands Meed will take to help the child manage their condition and overcome any potential barriers to getting the most from their education.

Plans will be reviewed annually, or earlier if evidence is presented that the child's needs have changed. The plans will be developed with the child's best interests in mind and ensure that Woodlands Meed School assesses and manages risks to the child's education, health and social well-being and minimises disruption. Staff will work within their competencies. The Individual Healthcare Plan will be linked to or become part of each child's Statement or Education/Healthcare Plan.

Where a child is returning to school following a period of hospital education or alternative provision (including home tuition), Woodlands Meed School will work with the local authority and education provider to ensure that the Individual Healthcare Plan identifies the support the child will need to reintegrate effectively.

Contents of Individual Health Care Plans

These will include, as appropriate:

- 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 their condition, dietary requirements and environmental issues e.g., crowded corridors, travel time between lessons or appropriate space to manage needs.
- Specific support for the pupil'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, (some children will be able to take responsibility for their own health needs), including in emergencies. If a child 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 child'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 child's condition and the support required.
- Arrangements for written permission from parent/carers and the head teacher for medication to be administered by a member of staff, or self-administered by the pupil 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 child can participate, e.g. risk assessments.
- Where confidentiality issues are raised by the parent/child, only designated individuals should be entrusted with information about the child's condition.
- What to do in an emergency, including whom to contact, and contingency arrangements. Where children have an emergency healthcare plan prepared by their lead clinician, this will be used to inform development of their Individual Healthcare Plan.

At Woodlands Meed, school nurses will liaise with pupils, parents and relevant staff in establishing safe working practice for managing emergency medical situations.

Roles and Responsibilities

Partnership working between school staff, healthcare professionals (and where appropriate, social care professionals), local authorities, parent/carers and pupils is critical in providing effective support to ensure that the needs of pupils with medical conditions are met effectively. Supporting a child with a medical condition during school hours is not the sole responsibility of one person.

Collaborative working arrangements between all those involved, showing how they will work in partnership is set out below.

- The Governing Body - will make arrangements to support pupils with medical conditions in school, including making sure that this policy for supporting pupils with medical conditions in school is developed and implemented. They will ensure that a pupil with medical conditions is supported to enable the fullest participation possible in all aspects of school life. The Governing Body will ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. They will also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.
- The Headteacher – will ensure that this policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. The Headteacher will ensure that all staff who need to know are aware of the child's condition. They should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. This may involve recruiting a member of staff for this purpose. The Headteacher has overall responsibility for the development of Individual Healthcare Plans. The Headteacher will also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way. The Headteacher will be responsible for ensuring the school's nursing service are aware of and involved in supporting any child who has a medical condition that may require support at school, but who has not yet been brought to their attention.
- School staff - any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach. School staff will receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know

what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

- School nurses - are responsible for notifying the school when a child has been identified as having a medical condition which will require support in Woodlands Meed. Wherever possible, they will do this before the child starts at the school. They may support staff on implementing a child's Individual Healthcare Plan and provide advice and liaison, for example on training. School nurses may liaise with lead clinicians locally on appropriate support for the child and associated staff training needs. This may include the use of local specialist nursing teams.
- Other healthcare professionals, including GPs and paediatricians - should notify the school nurses when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans. Specialist local health teams may be asked to provide support for children with particular conditions (e.g. asthma, diabetes and epilepsy).
- Pupils – with medical conditions may be best placed to provide information about how their condition affects them. They will be as involved as possible in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other pupils will be encouraged to be sensitive to the needs of those with medical conditions.
- Parent/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 will 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, eg provide medicines and equipment and ensure they or another nominated adult are contactable at all times.
- Local authorities – are commissioners of school nurses for maintained schools and academies. Under Section 10 of the Children Act 2004, they have a duty to promote cooperation between relevant partners such as governing bodies of maintained schools, proprietors of academies, clinical commissioning groups and NHS England, with a view to improving the well-being of children so far as relating to their physical and mental health, and their education, training and recreation. Local authorities and clinical commissioning groups (CCGs) must make a joint commissioning arrangement for education, health and care provision for children and young people with SEN and disabilities (Section 26, Children and families Act, 2014). Local authorities should provide support, advice and guidance including suitable training for school staff to ensure that the support specified within individual healthcare plans can be developed effectively. Local authorities should work with schools to support pupils with medical conditions to attend full time. Where pupils would not receive a suitable education at Woodlands Meed School because of their health needs, the local authority will be contacted to fulfil its duty to make other arrangements. Statutory guidance for local authorities sets out that they should be ready to make arrangements under this duty when it is clear that a child will be away from schools for 15 days or more because of health needs (whether consecutive or cumulative across the school year).
- Providers of health services - should co-operate with Woodlands Meed School in the support of children with a medical condition, including appropriate communication, liaison with school nurses and other healthcare professionals such as specialist and children's community nurses, as well as participation in locally developed outreach and training. Good relationships with health services will be fostered and developed as they can provide valuable support, information, advice and guidance to school, to support children with medical conditions.

Woodlands Meed School will work with:

- Clinical commissioning groups (CCGs) – these commission other healthcare professionals such as specialist nurses. They should ensure that commissioning is responsive to children's needs, and that health services are able to co-operate with schools supporting children with medical conditions. They have a reciprocal duty to cooperate under Section 10 of the Children Act 2004 and

must make joint commissioning arrangements for education, health and care provision for children and young people with SEN or disabilities (as described above for local authorities). Clinical commissioning groups should be responsive to local authorities and schools seeking to strengthen links between health services and schools, and consider how to encourage health services in providing support and advice (and can help with any potential issues or obstacles in relation to this). The local Health and Wellbeing Board will also provide a forum for local authorities and CCGs to consider with other partners, including locally elected representatives, how to strengthen links between education, health and care settings. Since 2013 local authorities have been responsible for commissioning public health services for school-aged children including school nursing. CCGs should be aware that this does not include clinical support for children in schools who have long term conditions and disabilities, which remains a CCG commissioning responsibility. Children in special schools in particular may need care which falls outside the remit of commissioned school nurses, such as gastroscopy, and tracheostomy or postural support.

Woodlands Mead and Sussex Community NHS trust jointly fund special school nurses as part of a community children's nursing team to provide ongoing support essential to the safety of those vulnerable children whilst in school.

- Ofsted - Ofsted places a clear emphasis on meeting the needs of disabled children and pupils with SEN, and considering the quality of teaching and the progress made by these pupils. Ofsted's common inspection framework 2015 is aimed at promoting greater consistency across inspection remits. Inspectors are briefed to consider the needs of pupils with chronic or long-term medical conditions alongside disabled children and pupils with SEN, and to report on how well their needs are being met and their spiritual, moral, social and cultural development. Woodlands Mead will make this policy available and be able to demonstrate that this is implemented effectively.

Staff Training and Support

- How will staff be supported in carrying out their role to support pupils with medical conditions?
- How will this be reviewed?
- How are training needs assessed?
- How and by whom is training commissioned and provided?

Any member of school staff providing support to a pupil with medical needs will have received suitable training. This will have been identified during the development or review of Individual Healthcare Plans. Where staff already have some knowledge of the specific support needed by a child with a medical condition, extensive training may not be required. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professional will normally lead on identifying and agreeing with Woodlands Mead, the type and level of training required, and how this can be obtained. This will typically be led by the Special School Nursing Team. When outside of their remit they will facilitate the use of suitable external trainers. Woodlands Mead School may choose to arrange specific training themselves and will ensure this remains up-to-date.

Training will 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 as set out in individual healthcare plans. This will include an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures. Competency will involve sessions on underpinning theory, and practical teaching and assessments- often over several weeks. Training is bespoke for individual learners and applies only for the specific child for whom the training is undertaken. Following the RCN delegation policy, safe minimum staff numbers will be trained to ensure safe practice whilst maintaining dignity and continuity for learners. Whole school awareness sessions are also scheduled to ensure staff are aware of the policy and their responsibilities in its implementation.

Staff must not give prescription medicines or undertake health care 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 special school nurses, will provide confirmation of the competency of staff in a medical procedure. The medicines management team will provide medication training for appropriate staff and will ensure adequate competency via completion of the statutory workbook from WSCC for providing non-emergency medication. Special school nurses will be responsible for the training and competency assessments for emergency medication procedures.

All staff will be made aware of the school's policy for supporting pupils with medical conditions and their role in implementing that policy. The policy will be available for reference and induction arrangements for new staff will include reference to this policy. The advice of the relevant healthcare professionals will be taken regarding training that will help ensure that all medical conditions affecting pupils in the school are understood fully. This will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.

Reassessment of staff will be undertaken on an annual basis by the professionals involved in initial training. This will typically be conducted by the special school nurses. Staff with skills and experience in a specific area will require an annual reassessment for pupils the procedures in which they are trained competent, however comprehensive training and reassessment will be required for working with additional children with similar conditions as training is pupil-specific.

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

The details of continuing professional development opportunities will be provided to staff as appropriate.

The Child's Role in Managing Their Own Medical Needs

After discussion with parent/carers, children who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be reflected within individual healthcare plans. Wherever possible, guided by safety considerations, children will be able to access their medicines or relevant devices for self-medication quickly and easily. Children who can take their medicines themselves or manage procedures will have an appropriate level of supervision. If it is not appropriate for a child to self-manage, then relevant staff will help to administer medicines and manage procedures for them.

If a child refuses to take medicine or carry out a necessary procedure, staff will not force them to do so, but follow the procedure agreed in the Individual Healthcare Plan. Parent/carers should be informed so that alternative options can be considered.

Managing Medicines on School Premises

In conjunction with Woodlands Mead's Policy on the Administration of Medication in School:

- Medicines will 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 parent's/carer's written consent - except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parent/carer. In such cases, every effort should be made to encourage the child or young person to involve their parent/carer, while respecting their right to confidentiality. Non-prescription medicines may only be administered with written parent/carer permission.
- A child under 16 will never be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. for pain relief, will never be administered without first checking maximum dosages and when the previous dose was taken.

For children under 10 years old: Paracetamol may be used as pain relief, if a GP/Consultant/Dentist has recommended its use and parental consent is gained using the "Paracetamol Consent for the

Under 10's Form". The times that a child under 10 might require paracetamol include: A fracture, pre/post-operative toothache and post-operatively general surgery (this is not an exhaustive list).

Details of the pupil's condition and the requirement for on demand pain relief must be documented on the pupils Individual Health Care Plan (IHP). In addition, Woodlands Meed will: only administer paracetamol for a maximum of 1 week, the parent or guardian will supply daily a single dose of paracetamol for administration. This can be in the form of a tablet or liquid sachet. The requirement for pain relief will be regularly reviewed during the week; pain relief should not be given routinely each day. The review will be detailed on the pupils IHCP.

Paracetamol may not be administered to the under 10's for ad-hoc unknown pain/fever etc. If the school is in any doubt if symptoms warrant pain relief the school nurse will be contacted for further advice. At present, this does not mean the school nurse can give permission for a cause that has not been identified by parents or medical professionals.

For children over 10 years old:

Only 1 standard dose (appropriate to age and weight of the pupil) can be administered in school per day unless otherwise stated for a less amount.

Verbal parental consent must be gained during the day to administer paracetamol between the start of school day and 12pm and again from 2pm and until the end of school day. If parents cannot be contacted then paracetamol cannot be administered.

The school can administer paracetamol without parental consent on the day between 12pm and 2pm, but the school must hold the parental written consent. If paracetamol is administered at any time during the school day, parents must be informed of the time of administration and dosage.

- Where clinically possible, Woodlands Meed will request that medicines be prescribed in dose frequencies which enable them to be taken outside school hours (ie medications that are once, twice or three times a day). There may be exceptional circumstances when medication could be given in school when prescribed three times a day (pupils returning home late due to clubs or living a significant distance from the school).
- Woodlands Meed will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date, but will generally be available to school inside an insulin pen or a pump, rather than in its original container.
- All medicines must be stored safely. Children should know where their medicines are at all times. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will be always readily available to children but will be locked away securely for reasons of safety in a standard accessible space. This is particularly important to consider when outside of school premises e.g. on school trips.
- Woodlands Meed will keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff will have access. Controlled drugs will be easily accessible in an emergency. A record will be kept of any doses used and the amount of the controlled drug held in school.
- The Governing Body is responsible for ensuring that written records are kept of all medicines administered to children. Staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines will do so in accordance with the prescriber's instructions. Woodlands Meed School will keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school will be noted.
- When no longer required, medicines will be returned to the parent/carer to arrange for safe disposal via the bus escort hand to hand. Sharps boxes will always be used for the disposal of needles and other sharps.

Record Keeping

On a day-to-day basis, staff administering medication will keep written records of all medicines given, and sign to confirm the details. Parent/carers will be informed if their child has been unwell at school, either by home-school book, phone call or in person as appropriate. Records offer protection to staff and children and provide evidence that agreed procedures have been followed.

Emergency Procedures

DFE Good Practice Guide to First Aid in Schools sets out what should happen in an emergency. Where a child 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. Where appropriate, other pupils in school will be briefed on what to do in general terms, such as informing a member of staff immediately if they think help is needed.

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

In an emergency, Special School Nurses will be available for support and advice.

Day Trips, Residential Visits and Sporting Activities

Pupils with medical conditions will be actively supported to participate in school trips and visits, or in sporting activities, so that their condition does not prevent them from doing so. Teachers will be aware of how a child's medical condition will impact on their participation, but be flexible enough to enable all children to participate according to their own abilities and with any reasonable adjustments. Woodlands Meed 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.

Woodlands Meed staff will consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits. The lead member of staff will carry out a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. This may require consultation with parents/carers and pupils and advice from the relevant healthcare professional to ensure that pupils can participate safely. Please also see Health and Safety Executive (HSE) guidance on school trips.

Other Issues

- Home - School Transport – In some circumstances it may be helpful for the LA to be aware of a pupil's IHC plan in developing a transport care plan. These are a separate document from school IHC Plans and are not maintained by Woodlands Meed, though our staff liaise with transport regularly regarding monitoring of pupils with medical conditions to ensure safe transitions between school and home.
- Defibrillators – in the event of sudden cardiac arrest, which can happen to people at any age and without warning, quick action (in the form of early CPR and defibrillation) can help save lives. Woodlands Meed college and school have defibrillators located in the reception areas and the local NHS ambulance service have been notified of the locations. Staff members appointed as first aiders are already trained in the use of CPR and may wish to promote these techniques more widely in the school, amongst both teachers and pupils alike.
- Asthma Tool kit – Woodlands Meed has adopted the West Sussex Asthma Tool Kit and emergency inhaler use policy. Both school and college hold a spare inhaler (and spacers) within an emergency asthma pack; this can be utilised by any child with Asthma in an emergency whose parents have consent for its use.

Unacceptable Practice

School staff will use their discretion and judge each case on its merits with reference to each child's Individual Healthcare Plan. It is not generally acceptable practice to:

- Prevent children from easily accessing their inhalers and medication.
- Where a child is able, prevent them administering their medication; themselves under adult supervision and in line with safety;
- Assume that every child with the same condition requires the same treatment;
- Ignore the views of the child or their parents; or ignore medical evidence or opinion, (although this may be challenged);
- Send children 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;
- Where a child becomes ill, send them to the office or medical room unaccompanied or with someone unsuitable;
- Penalise children 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 or other 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 should have to give up working because a school is failing to support their child's medical needs; or
- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, eg by requiring parents/carers to accompany the child.

Liability and Indemnity

The Governing Body will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk. The school's insurance arrangements cover staff providing support to pupils with medical conditions. These insurance policies are available to staff providing such support. Insurance policies will provide liability cover relating to the administration of medication and medical procedures. Any requirements of the insurance, such as the need for staff to be trained, will be made clear and complied with.

It is noted that in the event of a claim alleging negligence by a member of staff, civil actions are likely to be brought against the employer.

Complaints

The procedure for making a complaint is set out in the Woodlands Meed Complaints Policy available to parent/carers/pupils on the school website. Woodlands Meed hopes that should parents/carers or pupils be dissatisfied with the support provided, they will discuss their concerns directly with school first. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure. Making a formal complaint to the Department for Education should only occur if it comes within scope of section 496/497 of the Education Act 1996 and after other attempts at resolution have been exhausted. Ultimately, parent/carers (and pupils) will be able to take independent legal advice and bring formal proceedings if they consider they have legitimate grounds to do so.

Further Sources of Information

Other Safeguarding Legislation

Section 21 of the Education Act 2002 provides that governing bodies of maintained schools must, in discharging their functions in relation to the conduct of the school, promote the well-being of pupils at the school.

Section 175 of the Education Act 2002 provides that governing bodies of maintained schools must make arrangements for ensuring that their functions relating to the conduct of the school are exercised with a view to safeguarding and promoting the welfare of children who are pupils at the school.

Section 3 of the Children Act 1989 provides a duty on a person with the care of a child (who does not have parental responsibility for the child) to do all that is reasonable in all the circumstances for the purposes of safeguarding or promoting the welfare of the child.

Section 17 of the Children Act 1989 gives local authorities a general duty to safeguard and promote the welfare of children in need in their area.

Section 10 of the Children Act 2004 provides that the local authority must make arrangements to promote co-operation between the authority and relevant partners (including the governing body of a maintained school, the proprietor of an academy, clinical commissioning groups and the NHS Commissioning Board) with a view to improving the well-being of children, including their physical and mental health, protection from harm and neglect, and education. Relevant partners are under a duty to cooperate in the making of these arrangements.

The NHS Act 2006: Section 3 gives Clinical Commissioning Groups a duty to arrange for the provision of health services to the extent the CCG considers it necessary to meet the reasonable needs of the persons for whom it's responsible. Section 3A provides for a CCG to arrange such services as it considers appropriate to secure improvements in physical and mental health of, and in the prevention, diagnosis and treatment of illness, in the persons for whom it's responsible. Section 2A provides for local authorities to secure improvements to public health, and in doing so, to commission school nurses.

Governing Bodies' duties towards disabled children and adults are included in the Equality Act 2010, and the key elements are as follows:

- They must not discriminate against, harass or victimise disabled children and young people.
- They must make reasonable adjustments to ensure that disabled children and young people are not at a substantial disadvantage compared with their peers. This duty is anticipatory: adjustments must be planned and put in place in advance, to prevent that disadvantage

Other Relevant Legislation

Section 2 of the Health and Safety at Work Act 1974, and the associated regulations, provides that it is the duty of the employer (the local authority, governing body or academy trust) to take reasonable steps to ensure that staff and pupils are not exposed to risks to their health and safety.

Under the Misuse of Drugs Act 1971 and associated Regulations the supply, administration, possession and storage of certain drugs are controlled. Schools may have a child that has been prescribed a controlled drug.

The Medicines Act 1968 specifies the way that medicines are prescribed, supplied and administered within the UK and places restrictions on dealings with medicinal products, including their administration.

Regulation 5 of the School Premises (England) Regulations 2012 (as amended) provide that maintained schools must have accommodation appropriate and readily available for use for medical examination and treatment and for the caring of sick or injured pupils. It must contain a washing facility and be reasonably near to a toilet. It must not be teaching accommodation.

The Special Educational Needs Code of Practice

Section 19 of the Education Act 1996 (as amended by Section 3 of the Children Schools and Families Act 2010) provides a duty on local authorities of maintained schools to arrange suitable education for those who would not receive such education unless such arrangements are made for them. This education must be full time, or such part time education as is in a child's best interests because of their health needs.

Associated Resources

Links to other information and associated advice, guidance and resources eg templates and to organisations providing advice and support on specific medical conditions will be provided on the relevant web-pages at GOV.UK.

