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School Lane
Blackboys
Uckfield
East Sussex
TN22 5LL



Framfield C.E. School
The Street
Framfield
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East Sussex
TN22 5NR

ADOPTED MARCH 2024

REVIEW MARCH 2025

Supporting Pupils with Medical Conditions Policy

Our Vision is

Be the Best You Can Be;
Living 'life in all its fullness' (John 10:10)

In our Church of England Federation, we take strength in collaboration, yet celebrate uniqueness. As schools, we may be small but together we encourage children to be the best they can be so they are ready to make their mark on the world. We welcome the child yet embrace the whole family. We celebrate our rural environment yet aspire to look beyond our boundaries. We strive for knowledge and gratefully accept opportunities that come our way to enable us to live life in all its fullness. We all take a pride in our Federation as we follow in Jesus' example.

Perseverance, Fellowship, Courage, Respect, Understanding, Thankfulness

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We believe that if children feel safe and nurtured at school (as Jesus cared for his sheep and lambs) then they will be enabled to live life in all its fullness and “Be the best they can be”.

This policy has been produced to assist St Thomas à Becket Church of England Federation (which is referred to as the Federation in the rest of this document) develop an effective management system to support pupils with medical conditions, in accordance with the Department for Education’s (DfE) ‘Supporting pupils at school with medical conditions’ statutory guidance.

1. Introduction

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

- Children and Families Act 2014 - section 100
- Supporting pupils at school with medical conditions: Statutory guidance for governing bodies of maintained schools and proprietors of academies in England, Department for Education (DfE), December 2015
- 0-25 SEND Code of Practice, DfE January 2015
- Mental Health and behaviour in schools: departmental advice for school staff, DfE November 2018
- Equalities Act 2010
- Schools Admissions Code, DfE September 2021
- ESCC Accessibility Strategy
- ESCC SEND Strategy
- SEND MATRIX <https://czone.eastsussex.gov.uk/inclusion-and-send/sen-matrix/the-matrix/>
- East Sussex policy for the education of children and young people unable to attend school because of health needs (link: <https://www.eastsussex.gov.uk/educationandlearning/schools/attendance-behaviour/too-sick/>)
- ISEND Front Door <https://czone.eastsussex.gov.uk/inclusion-and-send/isend-front-door-referrals/> and include the following documents: Additional Needs Plan or IHCP, registration certificate and current medical evidence. Potential referrals can be discussed with TLP – 01273 336888

1.2 This policy should be read in conjunction with the following Federation policies - SEN Policy / SEN Information Report, Child Protection and Safeguarding Policy and Procedure, Allergy Awareness Policy, Educational Visits and Offsite Activities Policy and Complaints Policy and Procedure.

1.3 This policy was developed with Teachers, Governors, PTA and PTFA representatives and will be reviewed annually.

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1.4 Systems are in place to ensure that the Federation's Designated Safeguarding Leads are kept informed of arrangements for children with medical conditions and are alerted where a concern arises, such as an error with the administering of medicines or intervention, or repeated medical appointments being missed, or guidance or treatments not being followed by the parents or the child.

2 Definitions of Medical Conditions

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

Short-term affecting their participation at school because they are on a course of medication.

Long-term potentially limiting access to education and requiring on-going support, medicines or care while at school to help them to manage their condition and keep them well, including monitoring and intervention in emergency circumstances. It is important that parents feel confident that the Federation will provide effective support for their child's medical condition and that pupil's feel safe. (Further information on specific medical conditions is available on Webshop).

2.2 Some children with medical conditions may be considered disabled under the definition set out in the Equality Act 2010. Where this is the case Governing Bodies **must** comply with their duties under that Act. Some may also have special educational needs and/or disability (SEND) and may have an Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For children with SEND, this policy should be read in conjunction with the Special Educational Needs and Disability (SEND) code of practice (DfE January 2015) which explains the duties of local authorities, health bodies, schools and colleges to provide for those with special educational needs and disabilities. For pupils who have medical conditions and have EHC plans, compliance with the SEND code of practice will ensure compliance with this policy in respect of those children.

3. The Role of the Governing Body

3.1 The Governing Body remains legally responsible and accountable for fulfilling their statutory duty for supporting pupils at their school within the Federation with medical conditions.

The Federation's Governing Body fulfils this by:

- Ensuring that arrangements are in place to support pupils with medical conditions. In doing so we will ensure that such children can access and enjoy the same opportunities at their school as any other child;
- Taking into account that many medical conditions that require support at school will affect the quality of life and may be life-threatening. Some will be more obvious than others and therefore the focus is on the needs of

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each individual child and how their medical condition impacts on their school life;

- Ensuring that the arrangements give parents and pupils confidence in the Federation's ability to provide effective support for medical conditions, should show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care. We will ensure that staff are properly trained to provide the support that pupils need;
- Ensuring that the arrangements put in place are sufficient to meet our statutory duties and ensure that policies, plans, procedures and systems are properly and effectively implemented;
- Developing a policy for supporting pupils with medical conditions that is reviewed regularly and accessible to parents and Federation members of staff (this policy);
- Ensuring that the policy includes details on how it will be implemented effectively, including a named person who has overall responsibility for policy implementation (see section below on policy implementation);
- Ensuring that the policy sets out the procedures to be followed whenever the Federation is notified that a pupil has a medical condition (see section below on procedure to be followed when notification is received that a pupil has a medical condition);
- Ensuring that the policy covers the role of individual healthcare plans, and who is responsible for their development, in supporting pupils at school with medical conditions and that they are reviewed at least annually or earlier if evidence is presented that the pupil's needs have changed (see section below on individual healthcare plans);
- Ensuring that the policy clearly identifies the roles and responsibilities of all those involved in arrangements for supporting pupils at school with medical conditions and how they will be supported, how their training needs will be assessed and how and by whom training will be commissioned and provided (see section below on staff training and support);
- Ensuring that the policy covers arrangements for children who are competent to manage their own health needs and medicines (see section below on the child's role in managing their own medical needs);
- Ensuring that the policy is clear about the procedures to be followed for managing medicines including the completion of written records (see section below on managing medicines on school premises);
- Ensuring that the policy sets out what should happen in an emergency situation (see section below on emergency procedures);
- Ensuring that the arrangements are clear and unambiguous about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so (see section on day trips, residential trips and sporting activities);

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- Ensuring that the policy is explicit about what practice is not acceptable (see section on unacceptable practice);
- Ensuring that the correct level of insurance is in place and appropriate to the level of risk (see section on liability and indemnity);
- Ensuring that the policy sets out how complaints may be made and will be handled concerning the support of pupils with medical conditions (see section on complaints).

4. Policy Implementation

4.1 The statutory duty for making arrangements for supporting pupils at school with medical conditions rests with the Governing Body. The Governing Body has delegated the implementation of this policy to the post holders below. However, the Governing Body remains legally responsible and accountable for fulfilling its statutory duty.

4.2 The overall responsibility for the implementation of this policy is given to the Mr Graham Sullivan, Headteacher at Blackboys and Mrs Claire Roberts Interim Headteacher at Framfield. They will also be responsible for ensuring that sufficient members of staff are suitably trained and will ensure cover arrangements in cases of staff absences or staff turnover to ensure that someone is always available and on-site with an appropriate level of training.

4.3 They will be responsible for briefing supply teachers, preparing risk assessments for offsite visits and other school activities outside of the normal timetable and for the monitoring of individual healthcare plans.

4.4 Mrs Sophie Levey, The Special Educational Needs Co-ordinator together with the schools' First Aid team will be responsible in conjunction with parents/carers, for drawing up, implementing and keeping under review the individual healthcare plan for each pupil and making sure relevant members of staff are aware of these plans.

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

5. Procedure to be followed when notification is received that a pupil has a Medical Condition

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

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

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

5.4 The Federation does not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on available evidence. This would normally involve some form of medical evidence and consultation with parents/carers. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place. These discussions will be led by, the Federation's Headteachers and then an individual healthcare plan will be written in conjunction with the parent/carers by the Special Educational Needs Co-ordinator and schools' first aid team and put in place. (Please also see 'Safeguarding children in whom illness is fabricated or induced' Department for Children's & Families 2008).

6. Individual Healthcare Plans

6.1 Individual healthcare plans will help to ensure that the Federation effectively supports pupils with medical conditions. They will provide clarity about what needs to be done, when and by whom. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. They are likely to be required in the majority of other cases too, especially where medical conditions are long-term and/or complex. However, not all pupils will require one. The school within the Federation, healthcare professional and parent/carer should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached the relevant Federation Headteacher is best placed to take a final view. (A flow chart for identifying and agreeing the support a child needs and developing an individual healthcare plan is available on Webshop.)

(Where a child may have been diagnosed with asthma, this may be supported by written asthma plans and regular training and support for staff. Children/young people with significant asthma should have an individual healthcare plan. See guidance on Specific Medical Conditions on Webshop and Asthma UK website for model resources. Where this approach is used, schools should include this within their own policy.)

6.2 Individual healthcare plans will be easily accessible to all who need to refer to them, while preserving confidentiality. Plans will capture the key information and actions that are required to support the pupil effectively. The level of detail within the plan will depend on the complexity of the pupil's condition and the degree of support needed. This is important because different pupils with the same health condition may require very different support. Where a pupil has SEND but does not have an EHC plan, their special educational needs should be mentioned in their individual healthcare plan and Additional Needs Plan (ANP). (Where a child/young person has a long term or a complex medical condition, it is recommended that an Additional Needs Plan is initiated and included with the individual healthcare plan as long-term conditions can affect mental health and cognition.)

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

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

6.5 Where home to school transport is being provided by East Sussex County Council, we will support the development of any risk assessments and share the individual healthcare plan with the local authority and driver/escort. Where pupils have a life threatening condition or a medical need that requires an emergency response, individual healthcare plans should be carried on the vehicle detailing the procedure to be followed in the event of an emergency. In the event that home to school transport is not being provided by East Sussex County Council, the risk assessment and healthcare plan will be shared as appropriate.

6.6 Individual healthcare plans (a basic individual healthcare plan template is available on Webshop) will suit the specific needs of each pupil, but will all include the following information:

- The medical condition, its triggers, signs, symptoms and treatments;
- The pupil's resulting needs, including medication (dose, side effects, storage and expiry) 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 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 pupils will be able to take responsibility for their own health needs) including in emergencies. As a Federation with primary aged pupils it would not be appropriate for pupils to be self-managing their medication, this would be clearly stated with appropriate arrangements for monitoring;
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional; and cover arrangements for when they are unavailable;
- Who in the school within the Federation needs to be aware of the pupil's condition and the support required;
- Arrangements for written permission from parents/carers and the relevant Federation Headteacher, for medication to be administered by a member of staff during school hours;
- Separate arrangements or procedures required for offsite visits or other school activities outside of the normal school timetable that will ensure the pupil can participate e.g., risk assessment;
- Where confidentiality issues are raised by the parent/pupil, the designated individual is to be entrusted with information about the pupil's condition; and
- What constitutes an emergency for the individual child, procedures to be followed in an emergency, including whom to contact, and contingency arrangements. Some pupils may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

7 Roles and Responsibilities

7.1 Please refer to the section on policy implementation for the functions that have been delegated to different, named post holders/members of staff at the Federation.

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7.2 In addition the Federation can refer to the **School Health Team** using the online referral form which can be found at <https://www.kentcht.nhs.uk/service/school-health-service-east-sussex/> for support with drawing up Individual Healthcare Plans, awareness training around common medical conditions, liaison with lead clinicians including identifying specialist training and advice or support in relation to pupils with medical conditions.

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

7.4 **Pupils** with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their Individual Healthcare Plan or Additional Needs Plan. The Federation school should complete a Pupil Voice tool to support the development of these plans.

7.5 **Parents/carers** should provide their school within the Federation with sufficient and up-to-date information about their child's medical needs. They may, in some cases be the first to notify their school that their child has a medical condition. Parents are key partners and should be involved in the development and review of their child's individual healthcare plan and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

7.6 East Sussex County Council will work with the Federation to support pupils with medical conditions to attend full time. Where pupils would not receive a suitable education in a mainstream school because of their health needs, the Local Authority has a duty to make other arrangements. ISEND Teaching and Learning Provision is an East Sussex service which supports schools in the education of children and will provide teaching in a range of settings if a young person is unable to attend school for 15 days or more because of health needs (whether consecutive or cumulative across the year).

7.7 **Providers of health services** should co-operate with schools that are supporting children with medical conditions. They can provide valuable support, information, advice and guidance to schools, and their members of staff, to support children with medical conditions at school.

7.8 The **Ofsted** common inspection framework promotes greater consistency across inspection remits. Inspectors must consider how well a school meets the needs of the full range of pupils, including those with medical conditions. Key judgements will be informed by the progress and achievement of these children alongside those of pupils with special educational needs and disabilities, and also by pupils' spiritual, moral, social and cultural development. Schools are expected to

have a policy dealing with medical needs and to be able to demonstrate that it is being implemented effectively.

8. Staff Training and Support

8.1 Whole Federation awareness training will be arranged so that staff are aware of the Federation's policy for supporting pupils with medical conditions and their role in implementing this policy. This will be through staff meetings and TA briefing.

Framfield Church of England School

<i>Course</i>	<i>Member of Staff</i>	<i>Date of Course</i>	<i>Expiry Date</i>	<i>Days Worked</i>
First Aid at Work	Sandra Duncan - HLTA	01/02/2022	01/02/2025	M/T/W/TH
First Aid at Work	Debbie Cosshall - TA	19-21/09/2023	21/09/2026	M/T/W/TH/F
First Aid at Work	Nicky Kent - Teacher	21/10/24	21/10/2027	M/T/W/TH/F
Paediatric First Aid	Sandra Duncan - HLTA	23/05/2022	23/05/2025	M/T/W/TH
Paediatric First Aid	Debbie Cosshall - TA	29/09/2022	29/09/2025	M/T/W/TH/F
Paediatric First Aid	Stephanie Lancaster - Teacher	10/06/2024	09/06/2027	T/W/TH/F
Paediatric First Aid	Joanne Fenton - MDSA	18/09/2024	17/09/2027	M/T/W/TH/F Lunchtimes
Paediatric First Aid	Nicky Kent - Teacher	07/10/2024	06/10/2027	M/T/W/TH/F
Administration of Medicines	Sandra Duncan – HLTA	02/12/2024	02/12/2026	M/T/W/TH
Administration of Medicines	Hollie Maughan – Secretary	12/07/2023	12/07/2025	W/TH/F
Administration of Medicines	Emma Doherty – Secretary	15/11/2024	15/11/2026	M/TU
Diabetes Training	Sandra Duncan - HLTA	02/12/2024	02/12/2026	M/T/W/TH
Diabetes Training	Debbie Cosshall - TA	15/05/2022	15/05/2023	M/T/W/TH/F
Diabetes Training	Sarah Pepper - Teacher	15/07/2024	15/07/2025	TH/F
Epilepsy Awareness	Sandra Duncan - HLTA	21/01/2024		M/T/W/TH

Epilepsy Awareness	Nicky Kent - Teacher	22/01/2024		M/T/W/TH/F
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Blackboys Church of England Primary School

<i>Course</i>	<i>Member of Staff</i>	<i>Date of Course</i>	<i>Expiry Date</i>
First Aid at Work	Charlene Pomfret - TA	15/10/2022	15/10/2025
First Aid at Work	Lucy Sheffield – Administration Co-ordinator	12/05/2022	12/05/2025
First Aid at Work	Julia Harper- TA	21-22/02/23	21/02/26
Paediatric First Aid	Charlene Pomfret -TA	07/03/2023	07/03/2026
Paediatric First Aid	Julia Harper – TA	15/09/2021	15/09/2024
Administration of Medicines	Charlene Pomfret - TA	13/10/23	13/10/25
Administration of Medicines	Julia Harper – TA	15/09/22	15/09/24
Administration of Medicines	Emma Doherty – Secretary	11/11/2022	11/11/2024
Administration of Medicines	Graham Sullivan – Headteacher	11/11/2022	11/11/2024
Diabetes Training	Sue Page - HLTA	02/09/20	tbc
Diabetes Training	Charlene Pomfret - TA	02/09/21	tbc
Diabetes Training	Julia Harper- TA	17/7/23	tbc

8.2 We will record employee training for administration of medicines and/or clinical procedures. (templates are available on Webshop to record this training).

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

8.4 Training should be sufficient to ensure that members of staff are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements set out in the individual healthcare plans. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

8.5 For the protection of both members of staff and pupils a second member of staff will be present while more intimate procedures are being followed.

8.6 Members of staff must not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect any individual healthcare plans). A first aid certificate does not constitute appropriate training in supporting children with medical conditions. Healthcare professionals, including the school nurse, can provide confirmation of proficiency of members of staff in a medical procedure, or in providing medication.

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

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

9. The child's role in managing their own medical needs

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

9.2 Wherever possible pupils will be allowed to carry their own medicines and relevant devices or should be able to access their medication for self-administration quickly and easily; these will be stored :-

At Framfield Church of England Primary School –Medicines which require refrigeration will be stored in the fridge in the small kitchen in a locked (key coded) tin. The key for the dry medicine cupboard is located at height in the small kitchen. All other 'dry' medicines are kept in the First Aid Cabinet located at height in the First Aid Room - to ensure that the safeguarding of other pupils is not compromised. Inhalers are kept in the classroom first aid rucksacks which is with the class at all times. EpiPens are held in a small portable first aid bag which is taken wherever the pupil goes in the school.

At Blackboys Church of England Primary School –Medicines which require refrigeration will be stored in the fridge in a locked safe. The key for this is kept in the Medicine Cabinet within the First Aid room (located at height and fixed to the wall). All other 'dry' medicines are kept in the First Aid Cabinet located at height in the First Aid Room - to ensure that the safeguarding of other pupils is not compromised. Inhalers are stored, by key stage, in drawers in the First Aid room and easily accessed. EpiPens are held in a small portable first aid bag attached to a classteacher's chair, with a spare EpiPen kept in the First Aid cabinet in the First Aid

room. A purchased spare EpiPen and a spare purchased inhaler is kept in the Emergency grab bag on the back of the Headteacher's Office door.

The Federation also recognises that pupils who take their medicines themselves and/or manage procedures may require an appropriate level of supervision. If it is not appropriate for a pupil to self-manage, then relevant staff will help to administer medicines and manage procedures for them.

9.3 If a pupil refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the individual healthcare plan and inform the DSL. Parents will also be informed so that alternative options can be considered.

10. Managing Medicines on Federation Premises and Record Keeping

10.1 Within the Federation the following procedures are to be followed:

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so;
- No child under 16 should be given prescription or non-prescription medicines without their parent's/carer's written consent (a template parental consent form is available on Webshop). - except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, every effort should be made to encourage the child or young person to involve their parents while respecting their right to confidentiality;
 - Framfield Church of England Primary School will not administer non-prescription medicines (including herbal medicines) except in exceptional circumstances and where agreed by a First Aider who has undertaken the administering medication course. If possible, parents/carers will be asked to administer non-prescribed medicines as required during the school day i.e. lunch time. Selective administration of non-prescription medicines can take place, e.g. to children with medical conditions that, if not managed would limit their access to education, where a child's condition can be managed with an 'over the counter' medicine or those children where the school would be considered in breach of disability legislation.

Blackboys Church of England Primary School will not administer non-prescription medicines (including herbal medicines) except in exceptional circumstances and where agreed by the Headteacher. A Headteacher consent form is signed and dated with clear justification for the exceptional circumstances in these instances. If possible, parents/carers will be asked to administer non-prescribed medicines as required during the school day i.e. lunch time. Selective administration of non-prescription medicines can take place, e.g. to children with medical conditions that, if not managed would limit their access to education, where a child's condition can

be managed with an 'over the counter' medicine or those children where the school would be considered in breach of disability legislation.

- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- The Federation will only accept prescribed medicines, with written permission from parent/carer that are in-date, within use-by date, labelled, provided in the original container (as dispensed by a pharmacist – bottles should have a childproof cap) and include instructions for administration, dosage and storage. The exception to this is insulin which must be in-date, but will generally be available to schools inside an insulin pen or a pump, rather than its original container;
- It is recommended that a primary school pupil should never carry medicine to and from school. Medicine must be handed to the Federation Schools' office staff as soon as the pupil arrives at school.

Framfield Church of England Primary School:

Hollie Maughan, Secretary, Emma Doherty, Secretary,
Claire Roberts, Interim Headteacher

Medicines which require refrigeration will be stored in the fridge in coded locked box. All other 'dry' medicines are kept in the locked First Aid Cabinet located at height in the First Aid Room - to ensure that the safeguarding of other pupils is not compromised. The keys are also kept at height in the first aid room. Inhalers are kept in the classroom first aid rucksack which is with the class at all times.

Blackboys Church of England Primary School:

Lucy Sheffield, Administration Co-ordinator, Emma Doherty, Secretary,
Charlene Pomfret, Teaching Assistant (TA), Julia Harper, Teaching
Assistant (TA), Graham Sullivan, Headteacher.

Medicines which require refrigeration will be stored in the fridge in a locked safe. The key for this is kept in the Medicine Cabinet within the First Aid room (located at height and fixed to the wall). All other 'dry' medicines are kept in the First Aid Cabinet located at height in the First Aid Room - to ensure that the safeguarding of other pupils is not compromised. Inhalers are stored, by key stage, in drawers in the First Aid room and easily accessed. EpiPens are held in a small portable first aid bag attached to a classteacher's chair, with a spare EpiPen kept in the First Aid cabinet in the First Aid room.

There should be restricted access to the refrigerator holding medicines.

- Pupils will know where their medicines are at all times and be able to access them immediately with a member of staff. Where relevant, they will know who holds the key to the storage facility:

Framfield Church of England Primary School – Sandra Duncan, HLTA,
(Hollie Maughan, Secretary, Emma Doherty, Secretary, for returning
medicines to parents/carers at the end of the school day).

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Blackboys Church of England Primary School – Charlene Pomfret, TA or Julia Harper, TA.

- First Aiders will be summoned to administer medicines and provide first aid via the schools' walkie talkies.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline auto-injectors should always be readily available and not locked away:-

At Framfield Church of England Primary School, pupils requiring such devices are identified and a 'register' of affected pupils is kept up to date. Asthma inhalers should be marked with the pupil's name and kept in their classes First Aid box.

At Blackboys School, inhalers are stored, by key stage, in drawers in the First Aid room and easily accessed. EpiPens are held in a small portable first aid bag attached to a classteacher's chair, with a spare EpiPen kept in the First Aid cabinet in the First Aid room.

- A pupil who had been prescribed a controlled drug may legally have it in their possession if they are competent to do so but passing it to another pupil for use is an offence. Monitoring arrangements may be necessary. As a Federation with primary aged pupils it is more appropriate that we will keep all controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named members of staff will have access. The name of the person(s) responsible for the cabinet or administering medication should be stated on the cabinet. Controlled drugs should be easily accessible in an emergency. In cases of emergency the key must be readily available to all members of staff to ensure access. A record should be kept of any doses used and the amount of the controlled drug held in a school within the Federation.
 - Staff administering medicines should do so in accordance with the prescriber's instructions. The Federation will keep a record of all medicines administered to individual pupils, (template available on Webshop), stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted. Written records are kept of all medicines administered to pupils. These records offer protection to members of staff and pupils and provide evidence that agreed procedures have been followed.
 - Only one member of staff **at any one time** should administer medicines (to avoid the risk of double dosing). Arrangements should be made to relieve this member of staff from other duties while preparing or administering doses (to avoid the risk of interruption before the procedure is completed). The dose is witnessed by a second member of staff to ensure correct administering. If more than one person administers medicines a system will be arranged to avoid the risk of double dosing, e.g. a rota, routine consultation of the individual pupil's medicine record before any dose is given, etc.
 - When no longer required, medicines should be returned to the parent/carer to arrange safe disposal (a medication in/out log is available)
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on Webshop). Sharps boxes should always be used for the disposal of needles and other sharps.

- Procedures are in place to ensure that medication expiry dates are checked, and that replacement medication is obtained.

11. Medication Errors

11.1 A medication error is when the administration deviates from the instructions of the medical professional and parent. Medication errors typically occur when schools have more than one pupil with the same name. Some examples of medication errors include administration of:

- a medication to the wrong pupil
- the wrong medication to a pupil
- the wrong dosage of medication to a pupil
- the medication via the wrong route
- the medication at the wrong time.

11.2 Each medication error must be reported to the Federation Headteacher, Designated Safeguarding Lead and the parents/carers. The incident will also be reported via the East Sussex County Council online incident reporting system. Procedures are in place to minimise the risk of medication errors, including auditing errors and preventing recurrence. Lessons learnt are recorded on My Concern and shared with colleagues.

12. Emergency Procedures

12.1 The Federation's Headteachers will ensure that arrangements are in place for dealing with emergencies for all school activities wherever they take place, including school trips within and outside the UK, as part of the general risk management process.

12.2 Where a pupil has an individual healthcare plan, this will clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant members of staff are aware of emergency symptoms and procedures. Other pupils in the school within the Federation should know what to do in general terms, such as informing a teacher immediately if they think help is needed.

12.3 If a pupil needs to be taken to hospital, members of staff will stay with them until the parent arrives, or accompany a child taken to hospital by ambulance. The Federation is aware of the local emergency services cover arrangements and that the correct information is provided for navigation systems.

13. Offsite Visits and Sporting Activities

13.1 The Federation will actively support pupils with medical conditions to participate in offsite visits and sporting activities by being flexible and making reasonable adjustments unless there is evidence from a clinician such as a GP that this is not possible.

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13.2 The Federation will always conduct a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions can be included safely. The individual healthcare plan will be updated with specific information required for the visit/activity and a copy will be taken on the visit. All members of staff supervising offsite visits will be made aware of any medical needs and relevant emergency procedures. This will involve consultation with parents\carers and relevant healthcare professions and will be informed by the Federation's Educational Visits and Offsite Activities Policy.

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

13.4 Specific procedures on the transporting, storing, etc of medication whilst on an off-site visit is detailed within the Federation's Educational Visits and Offsite Activities Policy.

14. Hygiene/Infection Control

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

15. Equipment

15.1 Some pupils will require specialist equipment to support them whilst attending school. Members of staff will check the equipment, in line with any training given, and report concerns to the relevant Federation Headteacher.

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

15.3 Staff must be made aware of the use, storage and maintenance of any equipment.

15.4 A defibrillator is available on both school sites; Framfield's is in the school office whilst Blackboys' is located in the school's first aid room.

16. Unacceptable Practice

16.1 Although members of staff within the Federation should use their discretion and judge each case on its merits with reference to the pupil's individual healthcare plan, it is unacceptable practice to:

- Prevent pupils from easily accessing their inhalers and medication and administering their medication when and where necessary;
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- Assume that every pupil with the same condition requires the same treatment;
- Ignore the views of the pupil or their parents\carers; or ignore medical evidence or opinion (although this may be challenged);
- Send pupils with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- Send a pupil who becomes ill to the school office or medical room unaccompanied, or with someone unsuitable, e.g. another pupil, parent helper;
- Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. hospital appointments;
- Prevent pupils from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively;
- Require parents\carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parents should have to give up working because the school is failing to support their child's medical needs; or
- Prevent pupils from participating or creating unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

17. Liability and Indemnity

Individual cover may need to be arranged for any healthcare procedures, in particular those which would be considered invasive or normally undertaken by a medical professional. If in any doubt, please contact the Insurance Team who will check with external insurers. Any requirements of the insurance, such as the need for staff to be trained, should be made clear in the Health Care Plan and complied with. In the event of a claim alleging negligence by a member of staff, civil actions are likely to be brought against the employer rather than the employee.

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

18. Complaints

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18.1 Should parents/carers be dissatisfied with the support provided they must discuss their concerns directly with their school within the Federation. This will be with the child's Classroom Teacher in the first instance, with whom any issues should be addressed. If this does not resolve the problem or allay the concern, the problem should be brought to the relevant Headteacher. In the unlikely event of this not resolving the issue, the parent\carer must make a formal complaint using the Federation's Complaints Policy and Procedure.

Appendix 1 - Individual Healthcare Plan

Name of school/setting

Child's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Clinic/Hospital Contact

Name

Phone no.

G.P.

Name

Phone no.

Who is responsible for providing support in school?

Who in the school needs to be aware of the child's condition and the support required?

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

Name of prescribed medication, dose, method of administration, when to be taken, side effects, contra-indications.

Describe action to take in the event of the child/young person refusing their medication

Daily care requirements

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

Procedures to be followed when transporting the child/young person (e.g. home to school/setting transport, off-site visits)

Other information

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

--

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

--

Plan developed with

--

Staff training needed/undertaken – who, what, when

--

Form copied to

--

Signed: (Headteacher / Manager)	Signed: (Parent / Carer)
Date:	Date:
	Relationship to child: