



**LANGTREE SCHOOL GOVERNORS' POLICY**  
**SUPPORTING STUDENTS AT SCHOOL WITH MEDICAL CONDITIONS**

LANGTREE SCHOOL ACADEMY TRUST COMPANY  
 AN EXEMPT CHARITY LIMITED BY GUARANTEE  
 COMPANY NUMBER 7980335

In this policy as in all documents of The Langtree School Academy Trust Company ("TLSATC") any reference to Langtree School, School, Governors of Langtree School or Trustees of Langtree School Academy Trust Company is a reference to The Board of Directors of The Langtree School Academy Trust Company and any reference to the Headteacher of Langtree School is a reference to the Chief Executive Officer of TLSATC.

<b>STATUS:</b>	
<b>RECOMMENDED</b>	<b>Statutory</b> ✓
<b>REVIEW FREQUENCY</b>	<b>2 years</b>
<b>DATE OF POLICY</b>	<b>January 2023</b>
<b>REVIEW DUE</b>	<b>January 2025</b>
<b>COMMITTEE</b>	<b>Pastoral and Community</b>
<b>Signed: Chair of Governors</b>	
<b>Supporting Students at School with Medical Conditions January 2023</b>	

## 1. Aims

This policy aims to ensure that:

- students, staff and parents understand how our school will support students with medical conditions
- students with medical conditions are properly supported to allow them to access the same education as other students, including school trips and sporting activities

The governing body will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of student's condition, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support students with medical conditions
- Providing supply teachers with appropriate information about the policy and relevant students
- Developing and monitoring Individual Healthcare Plans (IHPs)

The named person with responsibility for implementing this policy is the Head Teacher's Personal Assistant.

## 2. Legislation and statutory responsibilities

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on governing boards to make arrangements for supporting students at their school with medical conditions.

It is also based on the Department for Education's statutory guidance: [Supporting students at school with medical conditions](#).

## 3. Roles and responsibilities

### 3.1 Staff

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

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

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

### 3.2 Parents

Parents will:

- Provide the school with sufficient and up-to-date information about their child's medical needs
- Be involved in the development and review of their child's IHP and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the IHP e.g. provide medicines and equipment
- Ensure that all medication is within the prescribed date and in original packaging. At the end of the summer term, medication must be collected by the student from the school office. If necessary, the medication box should be returned to the School Office at the beginning of the school year in September, once again ensuring all medication is within the prescribed date. Parents will inform school promptly of any changes in medical conditions.

### 3.3 students

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

### **3.4 School nurses and other healthcare professionals**

Our school nursing service will notify the school when a student has been identified as having a medical condition that will require support in school. This will be before the student starts school, wherever possible.

Healthcare professionals, such as GPs and paediatricians, will liaise with the schools nurses and notify them of any students identified as having a medical condition.

### **4. Equal opportunities**

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

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

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that students with medical conditions are included. In doing so, students, their parents and any relevant healthcare professionals will be consulted.

#### **5. Being notified that a child has a medical condition**

When the school is notified that a student has a medical condition, the process outlined below will be followed to decide whether the student requires an IHP.

We will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for students who are new to our school.

Please see Appendix A for supporting students with Allergies.

### **6. Individual healthcare plans**

The headteacher has overall responsibility for the development of IHPs for students with medical conditions. This has been delegated to the Headteacher's Personal Assistant.

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

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

- What needs to be done
- When
- By whom

Not all students with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the headteacher will make the final decision.

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

IHPs will be linked to, or become part of, any statement of special educational needs (SEN) or education, health and care (EHC) plan. If a student has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP.

In producing an IHP, the following will be considered:

- The medical condition, its triggers, signs, symptoms and treatments
- The student's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons
- Specific support for the student's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- The level of support needed, including in emergencies. If a student is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring

- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the student's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- Who in the school needs to be aware of the student's condition and the support required
- Arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the student during school hours
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the student can participate, e.g. risk assessments
- Where confidentiality issues are raised by the parent/student, the designated individuals to be entrusted with information about the student's condition
- What to do in an emergency, including who to contact, and contingency arrangements

## 7. Managing medicines

Prescription and non prescription medicines will only be administered at school:

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

**The only exception to this is where the medicine has been prescribed to the student without the knowledge of the parents and they have been deemed Gillick / Fraser competent.**

Anyone giving a student any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed.

The school will only accept prescribed medicines that are:

- In-date
- Labelled
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Students will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to students and not locked away.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

Students should not carry non emergency or non prescribed medication on them around school. This is because:

- we do not know what they have taken if they become unwell
- they may give this medication to other students who may be allergic to this drug
- it might be a self harm risk

If a student asks a member of staff if they can take a pain relief, the student should be sent to the school office. The school office should then contact the student's parents to seek consent. If the student is regularly taking medication then the parents should fill in a medical form (see link below)

### 7.1 Controlled drugs

[Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

A student who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another student to use. All other controlled drugs are kept in a secure cupboard in the school office and only named staff have access.

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

## **7.2 students managing their own needs**

students with IHPs who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents and it will be reflected in their IHPs.

students will be allowed to carry their own medicines and relevant devices wherever possible. Staff will not force a student to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered, if necessary.

## **7.3 Unacceptable practice**

School staff should use their discretion and judge each case individually with reference to the student's IHP, but it is generally not acceptable to:

- Prevent students from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every student with the same condition requires the same treatment
- Ignore the views of the student or their parents
- Ignore medical evidence or opinion (although this may be challenged)
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- If the student becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- Give sanctions to students for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- Prevent students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Require parents, 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 the school is failing to support their child's medical needs
- Prevent students from participating, or create unnecessary barriers to students participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child
- Administer, or ask students to administer, medicine in school toilets

## **8. Emergency procedures**

Staff will follow the school's normal emergency procedures (for example, calling 999). All students' IHPs will clearly set out what constitutes an emergency and will explain what to do.

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

## **9. Training**

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

The training will be identified during the development or review of IHPs. Staff who provide support to students with medical conditions will be included in meetings where this is discussed. Training needs will be identified annually, in the light of the IHP in place, and any necessary training will be commissioned by the Headteacher's Personal Assistant.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the students

- Fulfill the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

The support of students with medical conditions is included in staff induction. All staff are provided with an annual update on the policy and their role in its implementation.

Records of staff training are kept in the school office with the emergency medication.

## **10. Record keeping**

The governing body will ensure that written records are kept of all medicine administered to students. Parents will be informed if their student has been unwell at school.

IHPs are kept in a readily accessible place which all staff are aware of.

Information on medical conditions and IHP is recorded on SIMS as follows:

### **Student Details**

**Quick Note:** Name of medical condition, IHP (if there is one)

### **Medical**

**Medical Notes** - IHP if there is one uploaded here

**Medical Conditions** - names

All students with medical needs are listed in the 'Student with medical conditions' folder which is stored in the medicine cabinet in the front office. It is updated at least annually or when there are important changes to students' medical needs.

All IHP are stored in the medicine cabinet with the students medication.

## **11. Liability and indemnity**

Teachers who undertake responsibilities within this policy are covered by the school's insurance.

The insurance arrangements in place which cover staff providing support to students with medical conditions are with the Department for Education risk protection arrangement (RPA).

The RPA will provide an indemnity (under Third Party Liability) if a Member becomes legally liable to pay for damages or compensation in respect of or arising out of personal injury in connection with the provision of medicines or medical procedures. Indemnity will also be provided to any member of staff (other than any doctor, surgeon or dentist while working in a professional capacity) who is providing support to students with medical conditions and has received sufficient and suitable training.

Cover provided by the RPA will be subject to adherence with the statutory guidance on supporting students at school with medical conditions, December 2015 link provided below: -

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/349435/Statutory\\_guidance\\_on\\_supporting\\_students\\_at\\_school\\_with\\_medical\\_conditions.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/349435/Statutory_guidance_on_supporting_students_at_school_with_medical_conditions.pdf)

## **12. Complaints**

Parents with a complaint about their child's medical condition should discuss these directly with the Headteacher's Personal Assistant in the first instance. If they cannot resolve the matter, they will direct parents to the school's complaints procedure.

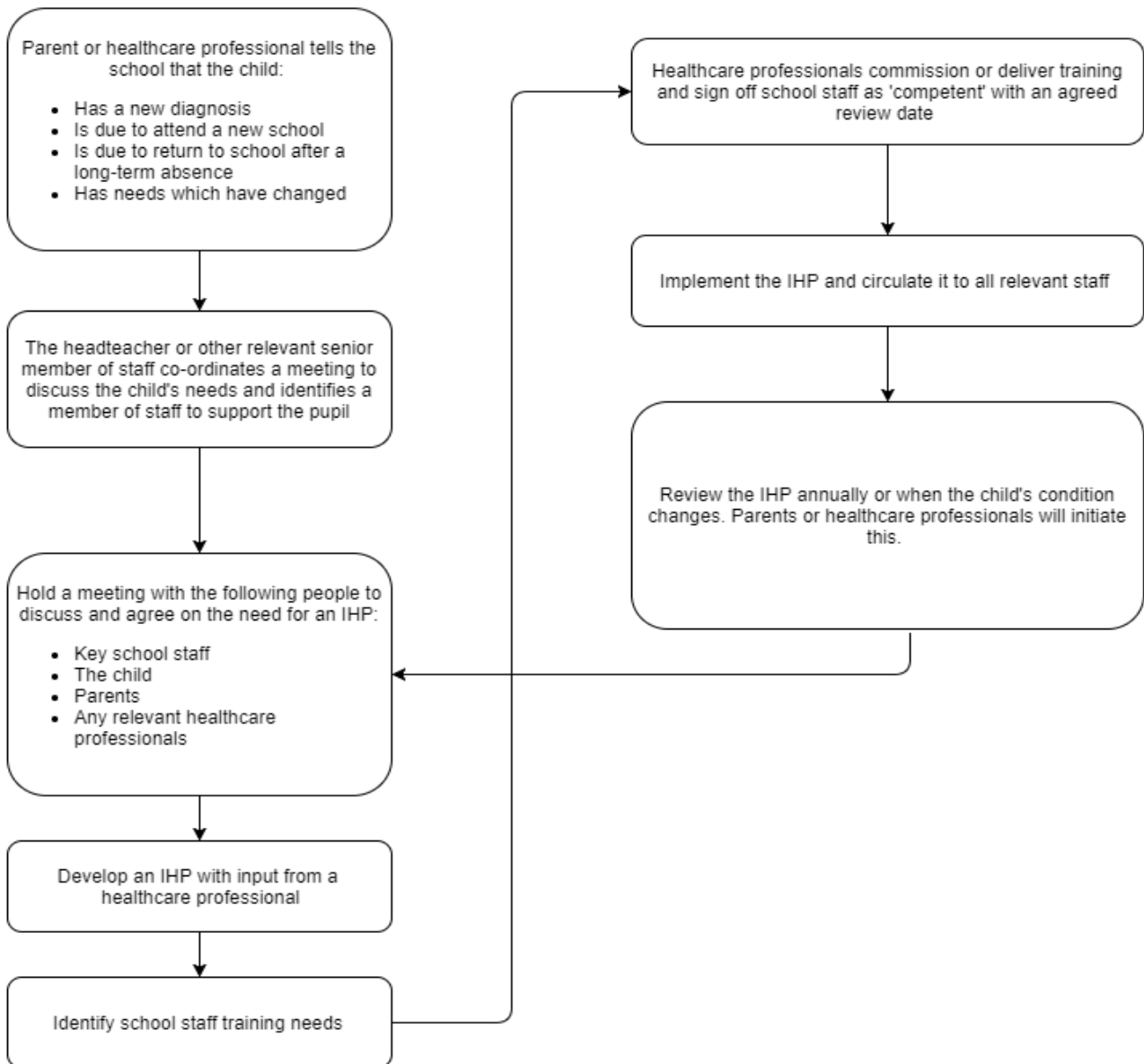
## **13. Monitoring arrangements**

This policy will be reviewed and approved by the governing board every 2 years

#### 14. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- Health and safety
- Safeguarding
- Special educational needs report



## **Appendix A**

### **ALLERGY AND ANAPHYLAXIS MANAGEMENT**

#### **Overview**

Langtree School is committed to student safety and has created this policy in order to reduce the risk of children having allergy related incidents whilst in school. The common causes of allergies relevant to this policy are nuts, (in particular peanuts), dairy products, eggs, wasps, bees, and ants. However, this list of allergies is not exhaustive and the policy will apply to any allergy suffered by any student or member of staff in the school of which the school has been notified.

As the school is not a completely allergen free environment, we aim to:

- Minimise the risk of exposure to allergens,
- Encourage self-responsibility of students, and,
- Plan for an effective response to possible emergencies.

#### **Notification Procedure**

Prior to entry into Langtree, parents must inform the school of their child's allergy. The medical form must be completed in the Enrolment Application Form and returned to the Admission Officer who will enter the details onto the electronic system and inform the School Nurse and relevant Head of Year of the medical condition.

If a current student develops an allergy, a medical form must be sent to the parents for them to complete and returned to the School Nurse and relevant Head of Year. They will then ensure that the information is recorded electronically.

On either the first day of school (new students) or after an allergy is diagnosed (current students), parents must complete a medication consent form, bring their most up to date allergy clinic letter/plan and their emergency medication into school. The medication and plan will be reviewed and updated annually or at any point of change by the school nurse. The plan and emergency medication will be kept in the medicine cabinet in reception that remains open and easily accessible to all staff members. Ideally the child will carry their own emergency medication with them alongside the medication stored in school.

The relevant Head of Year or school nurse will be responsible for providing information at the start of each academic year regarding students who suffer from any allergies to all school staff. Allergy action plans will be published in the staff room with update photographs from the school system. This will also apply to any casual entrants who join the school mid-year and who suffer from such an allergy, and any student who develops an allergy.

It is the parent's responsibility that all medication is within the prescribed date and up to date with the child's current prescription. At the end of the summer term, medication must be collected by the student from the school office. If necessary, the medication should be returned to the School Office at the beginning of the school year in September, once again ensuring all medication is within the prescribed date. It is the parents responsibility to dispose of any out of date medication.

#### **Key Strategies**

- First Aid staff will be trained in anaphylaxis management (EpiPen training), including awareness of triggers and first aid procedures to be followed in the event of an emergency. All school staff will also be able to attend this First Aid session on an annual basis.
- The school lunch caterer and suppliers will be made aware of the risk minimisation policy and requested to eliminate nuts and food items with nuts as ingredients from meals. This does not extend to those foods labelled "may contain traces of nuts".
- Parents of children with packed lunches will be requested to give careful thought to eliminating food that may be of risk to those members of staff and students who suffer from such allergies. Whilst the school will request this, compliance cannot be guaranteed.



- Students will be encouraged to self-manage their allergy and carry their own emergency medication.
- The school will ensure diligent management of wasp, bee and ant nests on school grounds and proximity. This must include the effective system for staff reporting to site-management, and a system of timely response to eradicating nests.

#### School Trips

- The Group Leader will have access to all the medical forms either electronically or printed forms, of the students attending the school trip and be aware of those with allergies, bringing their care plans and medication that are usually stored in school.
- The Group Leader will ensure that a trained First Aider is present on the school trip.
- Parents should ensure that the student brings their own emergency medication with them on a school trip when possible.
- The Group Leader will ensure the student has his or her emergency medication on the visit if available and will take responsibility for the medication usually held in school. This responsibility includes the timely return of emergency medication and plans to the metal storage cabinet in reception on return from the trip
- If in doubt over the risk of a student with an allergy taking part on an education visit the Group Leader should seek advice from the parent.

#### School Nurse Referral Form

[LINK HERE](#)

## Langtree School: parental agreement for setting to administer medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by	
Name of school/setting	
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

### Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

**NB: Medicines must be in the original container as dispensed by the pharmacy**

### Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) \_\_\_\_\_

Date \_\_\_\_\_

## Template G: model letter inviting parents to contribute to individual healthcare plan development

Dear Parent

### DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting students at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each student needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, students, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or student support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely

Template A: 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	
<b>Family Contact Information</b>	
Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
<b>Clinic/Hospital Contact</b>	
Name	
Phone no.	
<b>G.P.</b>	
Name	
Phone no.	

Who is responsible for providing support in school

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

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

[Empty text box]

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

[Empty text box]

Arrangements for school visits/trips etc

[Empty text box]

Other information

[Empty text box]

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

[Empty text box]

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

[Empty text box]

Plan developed with

[Empty text box]

Staff training needed/undertaken – who, what, when

[Empty text box]

Form copied to

[Empty text box]