Farsley Farfield Primary School
Supporting pupils at school with medical conditions
January 2024 (updated Oct 2026)

SECTION 1

Background:

An increasing number of children and young people with health needs, including long-term conditions and highly complex needs, are attending mainstream school. Some of these pupils have short-term needs for support, such as being helped to take prescription medicines. However, many require continuous and ongoing care and intervention while at school, including intimate or invasive care procedures.

The Children and Families Act 2014 brought with it a change in the law meaning that from September 2014, schools have to make arrangements to support pupils with medical conditions. The Department for Education (England) published new statutory guidance to accompany this change, called '*Supporting pupils at school with medical conditions*' and schools must have regard to this. This policy adopts the statutory guidance.

SECTION 2:

Role of the governing bodies, proprietors and management committees:

Governing bodies are legally responsible under Section 100 of the Children and Families Act 2014 to make arrangements to support pupils with medical conditions and must have regard to the new guidance. The governing body must ensure that the school has the necessary arrangements in place to support pupils with medical conditions and that policy, plans, procedures and systems are properly and effectively implemented.

SECTION 3

Policy Statement:

We are an inclusive community that welcomes and supports children and young people with medical conditions. We provide all children and young people with medical conditions the same opportunities as others at school.

We will help to ensure they:

- Are safe from harm
- Do well at all levels of learning and have the skills for life
- Choose healthy lifestyles
- Have fun growing up
- Are active citizens who feel they have voice and influence

Objectives of the policy:

- Pupils at school with medical conditions will be properly supported so that they have full access to education wherever practical, including school trips, residentials and physical education.
- School will make the necessary arrangements to support pupils at school with medical conditions.
- School will consult with health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.

SECTION 4

Policy implementation:

At Farsley Farfield Primary School:

- Parents are responsible for informing school of any medical requirements that a child may have.
- The head teacher has overall responsibility for ensuring that staff working with children who have a medical condition are suitably trained.
- The head teacher is committed to ensure that all relevant staff will be made aware of the child's condition.
- The head teacher will work closely with the SENDCo to ensure that the necessary equipment and space is provided.
- Significant ongoing medical needs and provision will be captured in an Individual Health and Care Plan and summarised on the Class Passport.
- The SENDCo will apply for additional 'Top Up Funding', usually through an EHCP, where a child might meet the criteria for additional funding for medical needs.
- The headteacher, SENDCo or a senior member of staff will strive to make the necessary cover arrangements in case of staff absence or staff turnover to ensure someone is always available to meet a child's medical needs.
- In planned absences, the class teacher will brief the covering member of staff/supply teacher of the individual medical needs in that class.
- In unplanned absences, the covering member of staff/supply teacher will be briefed by another member of staff e.g. admin, class TA, partner class teacher, SLT.
- Risk assessments for school visits, holidays, and other school activities outside of the normal timetable will be conducted as required and submitted with the Evolve RA produced for that visit; it is not expected that this would be for every trip e.g. swimming/PE as these weekly arrangements should be detailed on the child's individual healthcare plan (IHCP).
- The SENDCo / Senior Admin / Admin should take a lead in writing. Class teachers should take the lead in monitoring, updating and evaluating IHCPs; this may be achieved by working with a colleague who has experience of writing these documents. The admin team will ensure that those children with IHCPs are recorded on the school MIS.
- Teachers are responsible for sharing the IHCP with parents.
- We understand that supporting a child with a medical condition is not the sole responsibility of one person; there will be collaboration between school staff,

healthcare professionals, local authorities, parents, pupils and social care professionals where appropriate.

- We have appropriate insurance to support pupils with medical conditions.
- We may have access to school nursing services to support staff on implementing a child's IHCP and provide advice and liaison, for example on training.
- Any member of school staff may be asked to provide support to children with medical conditions, including the administering of medicines, although they cannot be required to do so. This may be task dependent and based on training requirements.
- Each class will have a class passport which details medical information for the pupils in the class.

SECTION 5

Individual Healthcare Plans (IHCP):

- A child who has daily medical or health requirements will need an IHCP
- IHCPs should be drawn up in partnership between the school, parents, healthcare professionals and whenever appropriate, the child.
- IHCPs should capture the key information and actions that are required to support the child effectively.
- School will hold a central list of all IHCPs which will be shared with all relevant staff.
- IHCPs should be reviewed at least annually or earlier if evidence is presented that the child's needs have changed.
- In producing IHCPs, the school must consider the following:
  - the medical condition, its triggers, signs, symptoms and treatments
  - the pupil's resulting needs including medical, education, social and emotional needs
  - the level of support needed, including in emergencies
  - who will provide the support, their training needs, confirmation of their proficiency from a healthcare professional (as appropriate), and cover arrangements
  - arrangements for written permission from parents for medication to be administered by a member of staff (as appropriate)
  - procedures if a child refuses to take the medication outlined in the plan
  - separate arrangements required for school trips or other school activities outside of the normal school timetable, e.g. risk assessments (as appropriate)
- Where a child has a special educational need disability (SEND) but does not have an education, health and care plan (EHCPlan), their special educational needs should be included in their IHCP.
- Where a child has a special educational need identified in an EHCPlan, the IHCP should be linked to or become part of that EHCPlan.
- A review or drafting of an EHCPlan may conclude that the healthcare needs of a child cannot be met in the school.
- Children with asthma should have an 'asthma card' completed by their parent/carer at the beginning of each academic year. See asthma policy.

- School will hold a central Asthma Register. This will link to each child's Asthma Plan and state what to do in an emergency. Asthma plans will also be printed and a copy kept securely with the school emergency inhalers.
- Asthma plans will be sent out at the beginning of each academic year for updating by parents/carers.

SECTION 6

Staff training and support:

- Staff will be supported in carrying out their role to support pupils with medical conditions.
- Healthcare professionals should lead on identifying and agreeing with the school the type and level of training required, and how this can be obtained.
- Healthcare professionals, including the 0 -19 nursing team, can provide confirmation of the proficiency of staff in a medical procedure or in providing medication.
- Training should be sufficient to ensure staff are confident to support pupils with medical conditions. They will need an understanding of the specific medical conditions they are asked to deal with.
- A first-aid certificate does not constitute appropriate training in supporting children with medical conditions.
- Staff who provide support to pupils with medical conditions should (if possible) be included in relevant meetings or have details of any changes communicated to them effectively.
- Parents may provide specific advice but should not be the sole trainer of staff.

SECTION 7

The child's role in managing their own medical needs:

- The IHCP should state arrangements for the child if he/she is competent to manage their own health needs and medicines and detail the appropriate level of supervision required.
- Staff should not force a child to take their medicine or carry out a necessary procedure if the child refuses. Instead they should follow the procedure agreed in the IHCP and inform the child's parents.

SECTION 8

Managing medicines on school premises

See First Aid and Medication Policy for more details on managing medicines in school.
See Allergies and Anaphylaxis Policy for more details,

SECTION 9

Emergency procedures:

- IHCP should clearly define what constitutes an emergency and explain what to do.
- If a child is taken to hospital, staff should stay with the child until the parent arrives or accompany a child taken to hospital by ambulance.

SECTION 10

Other issues for consideration:

- Although school staff should use their discretion and judge each case on its merits with reference to the child's IHCP, it is not generally acceptable practice to:

– prevent children from easily accessing their inhalers
– 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
– if the child becomes ill, send them to the school 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, 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 children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child

Policy review date: January 2030