



Riverside Community Special School

Supporting Pupils with Medical Conditions Policy

Policy by: DfE guidance/Kim Radlett

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To be reviewed annually.

This policy is available on our school website and is available on request from school office. We also inform parents/carers about this policy when their children join our school.

This policy will be reviewed in full (by the Governing Body) on at least an annual basis.

Supporting Pupils with Medical Needs Policy

Introduction

Section 100 of The Children and Families Act 2014 places a duty on the governing body of this school to make arrangements for supporting children at their premise with medical conditions. The Department of Education have produced statutory guidance 'Supporting Pupils with Medical Conditions' and we will have regard to this guidance when meeting this requirement. This policy should also be read alongside the Administration of Medicines Policy.

We will endeavour to ensure that children with medical conditions are properly supported so that they have full access to education, including school trips and physical education. The aim is to ensure that all children with medical conditions, in terms of both their physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

It is our policy to ensure that all medical information will be treated confidentially by the Headteacher and staff. All administration of medicines is arranged and managed in accordance with the DfE document, Supporting Pupils with Medical Needs. All staff have a duty of care to follow and co-operate with the requirements of this policy.

Where children have a disability, the requirement of the Equality Act 2010 will apply. Where children have an identified special need, the SEN Code of Practice will also apply. We recognise that medical conditions may impact social and emotional development as well as having educational implications.

Key Roles & Responsibilities

The governing body should ensure that the school's policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support children at school with medical conditions.

The Governing Body is responsible for:

Making arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed and implemented.

Ensuring that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life.

Ensuring that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.

Ensuring 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.

Promoting a culture that reflects Riverside's values so that parents, pupils and staff are confident that effective arrangements are in place for supporting pupils with medical conditions.

The Headteacher is responsible for:

Ensuring that their school's 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.

Ensuring that all staff who need to know are aware of the child's condition (including temporary and agency staff).

Ensuring 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.

The Headteacher has overall responsibility for the development of individual healthcare plans (IHCP) once the necessary medical information has been received and will make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way.

Contacting the school nursing service in the case of any child who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse.

Making, in partnership with Governors, decisions about whether or not the school can accept responsibility for interventions that are considered NHS healthcare services beyond the scope of the school's systems, competence and statutory powers.

Maintaining oversight of the specific healthcare interventions delivered by school staff and ensuring the appropriate insurance and indemnity cover is in place in line with Hampshire County Council's self-insurance scheme.

Working in collaboration with partners to ensure that the systems and processes are in place to monitor the effectiveness and support regular review of the policy.

Having school-led risk assessments, where required, that are suitable and sufficient and ensuring healthcare services/ professionals are supported to carry out NHS-led risk

assessments for healthcare services delivered in school e.g. NHS-led care plans and health professional delegation.

Making revised programmes of study and/ or alternative access arrangements for pupils who may be unable to attend school due to health needs, if and when appropriate.

Teachers and Support Staff:

Although school staff may be asked to provide support to children with medical conditions, they will not be required to do so unless the support is part of their contract of employment or the staff member agrees.

When school staff do agree to provide health support to pupils, they must receive sufficient and suitable training and achieve the required level of competency before they take on the responsibility for providing support 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 staff are responsible for:

- Understanding this policy and be aware of their role and responsibilities in its implementation.
- Attending and engaging in all training relating to pupil health and wellbeing, as requested. This includes general awareness training on medical conditions.
- Knowing which pupils have medical conditions, the content of individual healthcare plans and the potential impact of the medical condition e.g. how it affects their access to the curriculum.
- Understanding and knowing what to do in an emergency situation and how to respond when they become aware that a pupil with a medical condition needs help.
- Ensuring pupils have access to their emergency medication at all times.
- Supporting pupils with individual healthcare plans, as designated. In these instances, staff are required to:
 - follow the training instructions, school procedures and management as set out in individual healthcare plans, for example, administering medication;
 - engage in all NHS-led theoretical and practical training, supervision arrangements and competency assessments and follow the health professional instructions; and
 - raise any concerns or issues with an appropriate staff member e.g. line manager or health professional.
- Ensuring pupils with medical conditions receive support with learning and accessing the curriculum, as and when needed.
- Utilising opportunities in the curriculum to promote awareness and understanding of medical conditions e.g. the PSHE curriculum.

Parents/Carers are responsible for:

Providing the school with up-to-date information about their child's medical needs. They will be involved in the development and review of their child's IHCP and may be involved in the drafting. They will carry out any action they have agreed to as part of the implementation of the IHCP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times.

Parents/carers are responsible for:

- Notifying the school of their child's medical condition and any changes in the condition or support that school staff need to be aware of, at the earliest opportunity.
- Providing the school with sufficient and up-to-date information about their child's health needs.
- Participating in discussions about developing and reviewing their child's healthcare plan, as appropriate.
- Ensuring medicines and medical devices are labelled with their child's full name and date of birth, in the original pharmacy packaging. Ensuring pharmacy labels match the required dose and timings that have been requested for us to administer. Pharmacy labels must not be tampered with or defaced.
- Ensuring that medicine brought into school is within its expiry date and when requested, providing the school with replacement medicine.
- Ensuring their child attends any NHS appointment, assessment or review requested by their GP or specialist NHS team.
- Completing and returning any paperwork requested by the school e.g. consent forms.
- Completing a parental agreement for school to administer medicine form before bringing medication into school and ensuring the returned form includes details of the medication, stated dose and times required.
- Carrying out any actions that have been agreed upon and included in their child's healthcare plan e.g. providing medicine and/or equipment and ensure they or another nominated adult is contactable at all times.
- Providing the required/requested consent to allow your child's NHS care plan to be shared with the school, as relevant i.e. when support and care is necessary in school.
- Providing up-to-date information and contact details for all health professionals that are involved in their child or young person's care.
- Handing medication to the taxi escort if travelling by mini bus, who will then need to bring it to the school office. Parents/carers that transport their own children should hand medication directly to the school office. There may be some occasions where the child is deemed capable of carrying their own medications in their school bag.
- Keeping their child at home if they are not well enough to benefit from education provided by the school.

The School Link Nurse is responsible for:

Notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they should do this before the child starts at the school. They would not usually have an extensive role in ensuring that the school is taking appropriate steps to support children with medical conditions, but may

support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training.

Local Arrangements

Identifying children with health conditions

The Governing body will ensure that the policy sets out the procedures to be followed whenever a school is notified that a pupil has a medical condition. See Appendix A

We will aim to identify children with medical needs on entry to the school by working in partnership with parents/ carers. Where there are medical needs identified by parents and/or in children's EHCPs, we may require a health care plan from the relevant NHS department.

Where a formal diagnosis is awaited or is unclear, we will plan to implement arrangements to support the child, based on the current evidence available for their condition, where a risk assessment identifies that this is appropriate. We will ensure that every effort is made to involve some formal medical evidence and consultation with the parents.

Individual health care plans

The Governing body will ensure that the school's policy covers the role of individual healthcare plans, and who is responsible for their development in supporting children at school with medical conditions.

We recognise that Individual Healthcare Plans are recommended in particular where conditions fluctuate or where there is a high risk that emergency intervention will be needed, and are likely to be helpful in the majority of other cases, especially where medical conditions are long term and complex. However, not all children will require one. The school, healthcare professional and parent will agree based on evidence when a healthcare plan would be inappropriate or disproportionate.

Where children require an individual healthcare plan it will be the responsibility of the Headteacher to work with parents and relevant healthcare professionals to ensure there is a plan.

A healthcare plan (and its review) may be initiated in consultation with the parent/carer, by a member of school staff or by a healthcare professional involved in providing care to the child. The Headteacher will work in partnership with the parents/carer, and a relevant healthcare professional e.g. school, specialist or children's community nurse, who can best advise on the particular needs of the child to draw up and/or review the plan. Where a child has a special educational need identified in a statement or Educational Health Care (EHC) plan, the individual healthcare plan will be linked to or become part of that EHC plan.

We may also refer to the flowchart contained within the document 'Process for identifying children with a health condition' for identifying and agreeing the support a child needs and then developing the individual healthcare plan.

We will use the individual healthcare plan template produced by the DfE to record the plan.

If a child is returning following a period of hospital education or alternative provision (including home tuition), we will work with Hampshire County Council and the education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

The governing body should ensure that all plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed. Plans should be developed with the child's best interests in mind and ensure that the school assesses and manages the risks to the child's education, health and social well-being and minimise disruption.

The school will review these plans every September, or immediately if there is a change in advice from parents/ health.

When deciding what information should be recorded on individual healthcare plans, the governing body should consider the following:

- 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;
- specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed
- the level of support needed (some children will be able to take responsibility for their own health needs) including in emergencies.
- 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 parents and the headteacher for medication to be administered by a member of staff
- 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, the designated individuals to be entrusted with information about the child's condition;
- what to do in an emergency, including whom to contact, and contingency arrangements.

Staff training

Statutory Requirement: The Governing Body will ensure that the School's policy is clear about the procedures to be followed for managing medicines.

Riverside Community Special School works collaboratively with parents/carers and NHS services/professionals to ensure pupils have access to the medicine they require at school.

All new staff will be inducted on the policy when they join the school through the induction process. This will be recorded as part of their induction checklist.

All nominated staff will be provided with awareness training on the school's policy for supporting children with medical conditions which will include what their role is in implementing the policy. This training will be carried out at the start of every year and following a review of the policy.

We will retain evidence that staff have been provided with the relevant awareness training on the policy by signature sheets. These are stored in the Training Folder.

Any staff member providing support to a student with a medical condition will receive suitable training. All staff will receive training on supporting pupils with medical conditions as part of induction. Regular and ongoing in-house briefing training will take place as part of their development, but this is not a substitute for formal registered nurse delegation in line with the Nursing and Midwifery Council and Royal College of Nursing professional requirements and standards.

Where required we will work with the relevant healthcare professionals to identify and agree the type and level of training required and identify where the training can be obtained from. This will include ensuring that the training is sufficient to ensure staff are confident in their ability to support children with medical conditions. The training will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs and therefore allow them to fulfil the requirements set out in the individual healthcare plan.

Any training undertaken will form part of the overall training plan for the school and refresher awareness training will be scheduled at appropriate intervals agreed with the relevant healthcare professional delivering the training.

A 'Staff training record– administration of medicines' form will be completed to document the type of awareness training undertaken, the date of training and the competent professional providing the training. The competent person will provide the headteacher with a signed list of staff whom they consider able to administer the medication to the child following the training they have delivered. This is stored in the Training Folder.

First Aid

Whilst it is important to recognise that first aid training does not constitute appropriate training in supporting pupils with medical conditions, there will be sufficient occasions where a direct intervention is not required and basic first aid actions will be sufficient. For example, a pupil suffering from a convulsive seizure may require positioning so that they do not injure themselves. Riverside School's first aiders receive training and certification in ITC Level 3 Award in Emergency First Aid for School and Colleges (EFASch) and Paediatric First Aid through St John's Ambulance. Riverside School currently has 5 staff qualified in Emergency First Aid at Work and 4 staff qualified in Paediatric First Aid. First Aiders receive renewal training every three years.

The child's role

The Governing body will ensure that the school's policy covers arrangements for children who are competent to manage their own health needs and medicines.

Where possible and in discussion with parents, children that are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be recorded in their individual healthcare plan. The healthcare plan will reference what will happen should a child who self-administers refuse to take their medication (this will normally be informing the parent/carer at the earliest opportunity).

If appropriate we will endeavour to ensure that children can carry their own medicines and relevant devices or have easy access to allow for quick self-medication. We will agree with relevant healthcare professionals/parent the appropriate level of supervision required and document this in their healthcare plan.

Managing medicines on School Premises

The Governing Body will ensure that the school's policy is clear about the procedures to be followed for managing medicines.

The administration of medicines is the overall responsibility of the parents/carers. Where clinically possible we will encourage parents to ask for medicines to be prescribed in dose frequencies which enable them to be taken outside of school hours. However, the headteacher is responsible for ensuring children are supported with their medical needs whilst on site, therefore this may include managing medicines where it would be detrimental to a child's health or school attendance not to do so.

We will not give prescription or non-prescription medicines to a child without their parent/carer's written consent (a 'parental agreement for setting to administer medicines' form will be used to record this).

Prescription and non-prescription medicine

Prescription Medicines: Also known as prescription-only-medicines (POM) are a pharmaceutical drug which legally requires a medical prescription to be dispensed and supplied. They include controlled drugs which are subject to higher levels of regulation.

Non-prescription medicines: Also known as over-the-counter (OTC) medicines are medications that can be obtained without a prescription and can be purchased either under the supervision of a pharmacist or on general sale through retailers such as supermarkets. Medications are classified as OTC, based on their safety profiles and to enable access to those medicines without the need to see a GP.

- There is no designated administrator of medication; however, where required, pupils can still receive their medication from staff.
- There will always be two members of staff who administer medications.
- The parents/carers of pupils who need medication administered will be sent a medication administration consent form to complete and sign; the signed consent form will be returned to the school and appropriately filed before staff can administer medication to pupils.
- Medicines should only be administered at school when it would be detrimental to a pupil's health or school attendance not to do so. Where clinically possible, we will encourage parents to ask for medicines to be prescribed in dose frequencies which enable them to be taken outside of school hours.
- Prescription or non-prescription medicines will not be administered to a pupil without their parent/carer's written consent.
- A pupil under 16 should never be given medicine containing aspirin unless prescribed by a doctor.
- Non-prescription medication for pain relief will not be administered without first checking maximum dosages and when the previous dose was taken. Parents/carers will be informed when the medication has been given.

- If there are any concerns surrounding giving medication to a pupil, the medication will not be administered, and the school will consult with the parents/carers or healthcare professional. If a pupil cannot receive medication in the method supplied, written instructions on how to administer the medication must be provided by the parent/carer following advice from a healthcare professional.
- Medication will be administered in a comfortable environment and as far as possible in the same room as the medication is stored.
- On occasions where a pupil refuses to take their medication, the parents/carers will be informed at the earliest opportunity.
- Written records of all medication administered to pupils including the date and time and the name of the staff members responsible are kept in accordance with the records retention schedule and held in the medical room.

A documented tracking system to record all medicines received in and out of the premises is in place. The tracking system used is The Children's Services Medication Tracking Form.

The name of the child, dose, expiry and shelf-life dates will be checked before medicines are administered.

We 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, their dosage and storage. Insulin is the exception, which must still be in date but will generally be available to schools inside an insulin pen or a pump, rather than its original container.

Children who are able to use their own inhalers themselves are encouraged to carry it with them. If the child is too young or it is not developmentally possible for them to take personal responsibility for their inhaler, staff should make sure that it is stored in a safe but readily accessible place, and clearly marked with the child's name.

Controlled drugs will be securely stored in a non-portable container which only named staff will have access to. We will ensure that the drugs are easily accessible in an emergency situation. A record will be kept of any doses used and the amount of the controlled drug held in school. There may be instances where it is deemed appropriate for a child to administer their own controlled medication. This would normally be at the advice of a medical practitioner. Where an individual child is competent to do so, and following a risk assessment, we may allow them to have prescribed controlled drugs on them with monitoring arrangements in place.

Any homeopathic remedies to be administered will require a letter of consent from the child's doctor and will be administered at the discretion of the Head teacher.

Emergency medicines will be stored in a safe location to ensure they are easily accessible in the case of an emergency. The IHP will record the location of emergency medications.

Types of emergency medicines include:

- Injections of adrenaline for acute allergic reactions
- Inhalers for asthmatics
- Injections of Glucagon for diabetic hypoglycaemia

Other emergency medication i.e. Rectal diazepam or Buccal Midazolam for major seizures will be stored in accordance with the normal prescribed medicines procedures (see storage section).

Storage

When a parent sends in medication for a pupil who travels via school transport they must do so via the school escort. The medication must be handed over in person to a member of school staff.

When a parent brings medication directly to school the medication must be handed over in person to a member of school staff.

When a pupil requires new supplies or medication is running low or close to expiry date, parents will be informed via a letter and/ or phone call.

Prescribed medicines will only be accepted if they are in date, labelled, provided in the original container as a dispensed by the pharmacist and are accompanied by a completed Administration of Medicines form, signed by a parent/ carer.

Insulin is the exception, which must still be in date but will generally be available to schools inside an insulin pen or a pump, rather than its original container.

All medication other than emergency medication will be stored safely in a locked cabinet, where the hinges cannot be easily tampered with and cannot be easily removed from the premises.

Where possible medication will be stored in named bags/boxes with expiry date clearly visible.

Where medicines need to be refrigerated, they will be stored in the fridge within the meeting room in a clearly labelled airtight container. There is restricted access to the refrigerator holding medicines with a coded, locked door to the room.

Medicines such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available when outside of the school premises or on school trips.

Storage of medication whilst off site will be maintained at steady temperature and secure. There will be appropriately trained staff present to administer day to day and emergency medication and copies of individual health care plans will be taken off site to ensure appropriate procedures are followed. These are stored within the trip bag with the trip phone and all medical and Educational Visits records.

Disposal

It is the responsibility of the parents/carers to dispose of their child's medicines. It is our policy to return any medicines that are no longer required including those where the date has expired to the parents/carers. Parents/carers will be informed of this when the initial agreements are made to administer medicines. Medication returned to parent/ carers will be documented on the tracking medication form.

Sharps boxes will be in place for the disposal of needles.

Medical Accommodation

The medical room will be used for all medical administration/treatment purposes. The room will be made available when required.

Record keeping

The governing body should ensure that written records are kept of all medicines administered to children.

We understand the importance of clear, written records when supporting pupils' medical needs. Accurate documentation offers protection to pupils and staff as it ensures and evidences that agreed procedures have been followed. As a school, we have robust processes in place for recording information. This includes written parental consent for supporting pupils with medical conditions, written records of interventions and care provided including any medication administered.

When registered health professionals delegate healthcare activity to Riverside Community Special School staff, it is our expectation that the health professional will delegate the associated record keeping in accordance with professional standards e.g. the RCN.

- Any medication administered will be recorded and parents/carers will be informed in accordance with the notification protocol detailed in a pupil's healthcare plan.
- When medication is administered by staff it is recorded on the pupil's 'record of prescribed medicines' form, which is located in the First Aid Room alongside their medication. Once the chart is complete it will be electronically stored on the pupil's file. Parents/carers will be informed via phone or the home school book if any emergency or OTC medications are administered and the time given.
- Riverside School staff follow instructions from NHS professionals on record keeping for controlled drugs e.g. how much was administered, when and by whom, the amount of the controlled drug held and any side effects.

Where Riverside School staff are administering controlled medicines, two staff will be present (one administering, 1 double checking dosage and process) and both will sign when dose is administered.

- Written records of all medication administered to pupils including the date and time and the name of the staff members responsible are kept in accordance with the records retention schedule and held on the pupil's file.
- Where a pupil requires interventions such as gastrostomy feeds, suctioning, stoma care records are maintained as instructed by registered health professionals delegating the intervention to school staff. The staff carrying out the required interventions have been signed off as competent by the registered health professional.

Any possible side effects of the medication will also be noted and reported to the parent/carers.

Emergency Procedures

The Governing body will ensure that the school's policy sets out what should happen in an emergency situation.

Riverside School has clear processes and procedures for managing health-related emergencies.

Key principles include:

- General school procedures for managing an emergency situation are covered during all new staff induction and routine update training.
- Where a pupil has an individual healthcare plan, the plan will clearly describe what constitutes an emergency, what actions need to be taken and by whom. This information will be shared with staff, as required and will be incorporated into relevant staff training and updates.
- Ensuring pupils, where appropriate, in the school know what to do in the event of an emergency i.e. informing a member of staff.
- Ensuring designated staff responsible for contacting local emergency services know what information to provide including how emergency services will access the school site.
- If a pupil needs to be taken to the hospital, a member of staff will accompany the pupil in the ambulance and stay with them until their parent arrives. (taking any relevant medical information, care plans etc that the school holds).
- Riverside School has an automatic defibrillator on site (First Aid Room). The defibrillator was issued by the DfE and school carry out weekly checks, along with a monthly check to ensure consumables are in date. If the defibrillator is required a check will take place to ensure consumables are replaced. All first aiders are trained on how to use them in the event of a cardiac emergency and are responsible for checking them on a monthly basis.

Day trips/off site activities

The Governing body should ensure that their arrangements are clear and unambiguous about the need to support actively pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

Riverside Community Special School actively supports pupils with medical needs so that they can participate in the range of activities that school offers such as trips, offsite activities and sporting activities.

We will ensure that teachers are aware of how a child's medical condition will impact on their participation in any off-site activity or day trip, but we will ensure that there is enough flexibility for all children to participate according to their own abilities within reasonable adjustments.

We will consider what reasonable adjustments we might make to enable children with medical needs to participate fully and safely on visits. We 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. We will consult with parents and pupils and gather advice from the relevant healthcare professional to ensure that pupils can participate safely. Staff members will ensure that they are aware of any pupil who will need medication administered during the trip or activity and will make certain that they are aware of the correct timings and dosage in line with any care plan.

Other issues

Home-to-school transport – this is the responsibility of local authorities, who may find it helpful to be aware of a pupil's individual healthcare plan and what it contains, especially in respect of emergency situations. Parents/carers are responsible for sharing this information.

Unacceptable practice

The governing body will ensure that the school's policy is explicit about what practice is not acceptable

Staff are expected to use their discretion and judge each child's individual healthcare plan on its merits, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- 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. A decision to send a pupil home due to their medical condition will be made in the pupil's best interests and may include an assessment of risk. If there are frequent occurrences for an individual pupil, staff will discuss with parents and the relevant health professional a review of the arrangements for managing the pupil's medical conditions in school.

- 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 there is a lack of appropriate school support or NHS services to manage their child's medical needs in school.
- 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.
- Administer, or ask a child to administer, medicine in school toilets.

Liability and Indemnity

The governing body will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.

Staff at the school are indemnified under the Hampshire County Council self-insurance arrangements.

The County Council is self-insured and has extended this self-insurance to indemnify school staff who have agreed to administer medication or undertake a medical procedure to children. To meet the requirements of the indemnification, we will ensure that staff at the school have parents' permission and follow a recognised care plan, co-constructed with suitably qualified health professionals. Where these conditions cannot apply, staff should not undertake medical interventions.

As a school, we expect our local partners such as NHS provider trusts to have the appropriate indemnity arrangements in place to cover liabilities as a result of health professional delegation.

Complaints

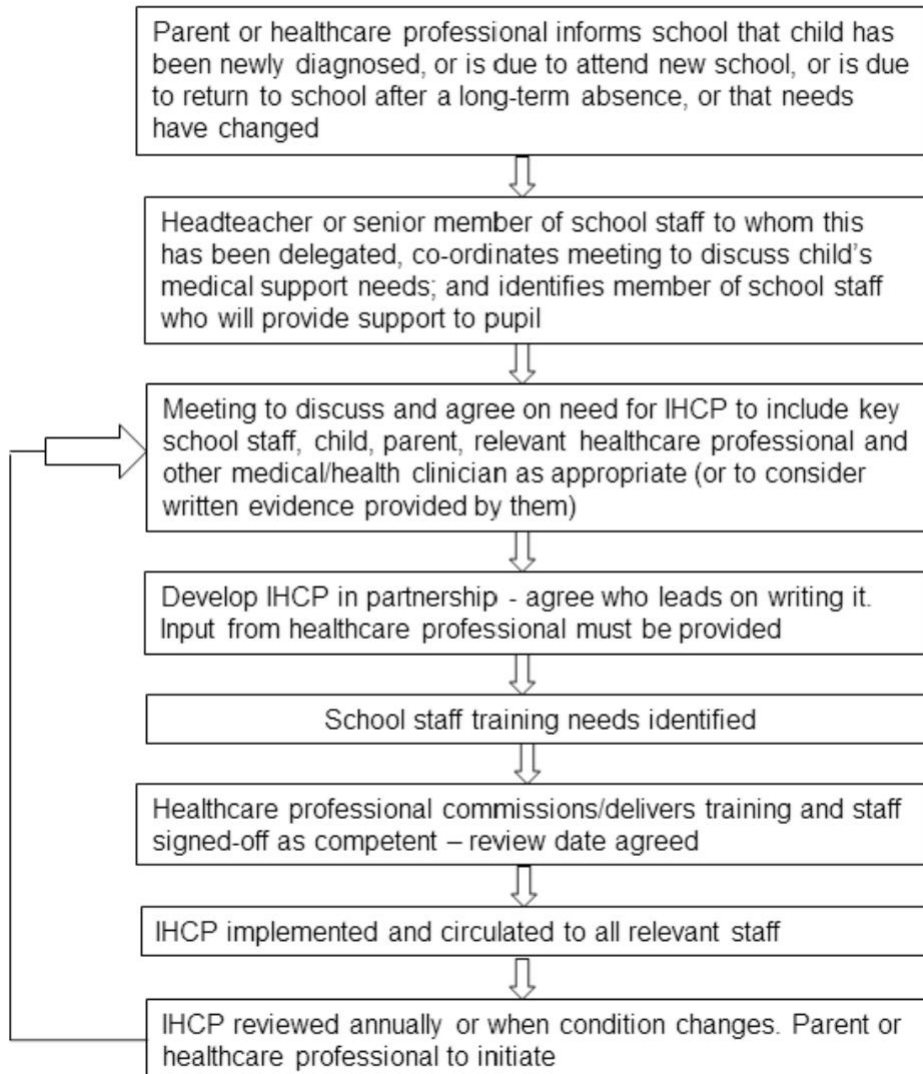
The governing body will ensure that the school's policy sets out how complaints may be made and will be handled concerning the support provided to pupils with medical conditions.

Should parents or children be dissatisfied with the support provided they can discuss their concerns directly with the Headteacher. If, for whatever reason, this does not resolve the issue, they may make a formal complaint via the school's complaints procedure. The

Complaints Policy can be found on the school's website or can be obtained by contacting the school office.

If the issue or concern relates to an aspect of an NHS service, this would need to be raised directly with the relevant NHS organisation or service. In these circumstances, the school will inform the parents/ carers or pupil and provide any assistance or information that is required.

Annex A: Model process for developing individual healthcare plans



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	

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

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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

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

Arrangements for school visits/trips etc

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