

SEAHAM HIGH SCHOOL



**Supporting Students with
Medical Conditions**

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Review Date	Cycle	Reviewer	Adopted	Committee
June 2026	Annually	L Whitehead	June 2026	Full Governors

Supporting Students with Medical Conditions

Introduction

Seaham High School wishes to ensure that students with medical conditions receive appropriate care and support at school. All students have an entitlement to a full-time curriculum or as much as their medical condition allows. This policy has been developed in line with the Department for Education's statutory guidance released in April 2014 –This policy has been developed in accordance with the Department for Education statutory guidance *Supporting Pupils at School with Medical Conditions* (September 2014, updated August 2017), issued under Section 100 of the Children and Families Act 2014."This policy also aligns with the DfE statutory guidance and, where applicable, the SEND Code of Practice.

The school will have regard to the statutory guidance issued. We take account of it, carefully consider it and we make all efforts to comply.

Ofsted places a clear emphasis on meeting the needs of students with SEN and Disabilities, also including those students with medical conditions.

1) Key roles and responsibilities

a) The Local Authority (LA) is responsible for:

- 1) Promoting co-operation between relevant partners regarding supporting students with medical conditions.
- 2) Providing support, advice /guidance and training to schools and their staff to ensure Individual Healthcare Plans (IHP) are effectively delivered.
- 3) Working with schools to ensure students attend full-time or make alternative arrangements for the education of students who need to be out of school for fifteen days or more due to a health need and who otherwise would not receive a suitable education.

b) The Governing Body of Seaham High School is responsible for:

- 1) Ensuring arrangements are in place to support students with medical conditions.
- 2) Ensuring the policy is developed collaboratively across services, clearly identifies roles and responsibilities and is implemented effectively.
- 3) Ensuring that the Supporting Students with Medical Conditions Policy does not discriminate on any grounds including, but not limited to protected characteristics: ethnicity/national/origin, religion or belief, sex, gender reassignment, pregnancy & maternity, disability or sexual orientation.

- 4) Ensuring the policy covers arrangements for students who are competent to manage their own health needs.
- 5) Ensuring that all students with medical conditions are able to play a full and active role in all aspects of school life, participate in school visits / trips/ sporting activities, remain healthy and achieve their academic potential.
- 6) Ensuring that relevant training is delivered to a sufficient number of staff who will have responsibility to support children with medical conditions and that they are signed off as competent to do so. Staff to have access to information, resources and materials.
- 7) Ensuring written records are kept of, any and all, medicines administered to students.
- 8) Ensuring the policy sets out procedures in place for emergency situations.
- 9) Ensuring the level of insurance in place reflects the level of risk.
- 10) Handling complaints regarding this policy as outlined in the school's Complaints Policy.

c) The Headteacher is responsible for:

- 1) Ensuring the policy is developed effectively with partner agencies and then making staff aware of this policy.
- 2) The day-to-day implementation and management of the Supporting Students with Medical Conditions Policy and Procedures of Seaham High School.
- 3) Liaising with healthcare professionals regarding the training required for staff in conjunction with the SENDCO
- 4) Identifying staff who need to be aware of a child's medical condition.
- 5) Delegating responsibility to the SENDCO to develop Individual Healthcare Plans (IHPs)
- 6) Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHPs in normal, contingency and emergency situations.
- 7) If necessary, facilitating the recruitment of staff for the purpose of delivering the promises made in this policy. Ensuring more than one staff member is identified, to cover holidays / absences and emergencies.
- 8) Ensuring the correct level of insurance is in place for teachers who support students in line with this policy.
- 9) Continuous two-way liaison with school nurses and school in the case of any child who has or develops an identified medical condition.

- 10) Ensuring confidentiality and data protection including adherence to GDPR principles in relation to student medical information.
- 11) Assigning appropriate accommodation for medical treatment/care
- 12) The purchase of a defibrillator.
- 13) Voluntarily holding 'spare' salbutamol asthma inhalers for emergency use.

d) Staff members are responsible for:

- 1) Taking appropriate steps to support children with medical conditions and familiarising themselves with procedures which detail how to respond when they become aware that a student with a medical condition needs help. *A first-aid certificate is not sufficient.*
- 2) Knowing where controlled drugs are stored and where the key is held.
- 3) Taking account of the needs of students with medical conditions in lessons.
- 4) Undertaking training to achieve the necessary competency for supporting students with medical conditions, with particular specialist training if they have agreed to undertake a medication responsibility.
- 5) Allowing inhalers, adrenalin pens and blood glucose testers to be held in an accessible location, following DfE guidance.
- 6) The school recognises allergies and anaphylaxis as potentially life-threatening medical conditions and will ensure appropriate healthcare planning, staff training and emergency procedures are in place

e) School nurses are responsible for:

- 1) Collaborating on developing an IHP in anticipation of a child with a medical condition starting school.
- 2) Notifying the school when a child has been identified as requiring support in school due to a medical condition at any time in their school career.
- 3) Supporting staff to implement an IHP and then participate in regular reviews of the IHP. Giving advice and liaison on training needs.
- 4) Liaising locally with lead clinicians on appropriate support. Assisting the Headteacher in identifying training needs and providers of training.

f) Parents and carers are responsible for:

- 1) Keeping the school informed about any new medical condition or changes to their child/children's health.
- 2) Participating in the development and regular reviews of their child's IHP.

- 3) Completing a parental consent form to administer medicine or treatment before bringing medication into school.
- 4) Providing the school with the medication their child requires and keeping it up to date including collecting leftover medicine.
- 5) Carrying out actions assigned to them in the IHP with particular emphasis on, they or a nominated adult, being contactable at all times.

g) Students are responsible for:

- 1) Providing information on how their medical condition affects them.
- 2) Contributing to their IHP
- 3) Complying with the IHP and self-managing their medication or health needs including carrying medicines or devices, if judged competent to do so by a healthcare professional and agreed by parents/carers.

2) Training of staff

- a) Newly appointed teachers, supply or agency staff and support staff will receive training on the 'Supporting Students with Medical Conditions' Policy as part of their induction.
- b) The clinical lead for each training area/session will be named on each IHP.
- c) No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the condition and signed off as competent.
- d) School will keep a record of medical conditions supported, training undertaken and a list of teachers qualified to undertake responsibilities under this policy.

3) Medical conditions register /list

- a) Schools – Parents/carers must have easy pathway to inform school at any point in the school year if a condition develops or is diagnosed. Consideration could be given to seeking consent from GPs to have input into the IHP and also to share information for recording attendance.
- b) A medical conditions list or register should be kept, updated and reviewed regularly by the nominated member of staff. Each class / form tutor should have an overview of the list for the students in their care, within easy access.
- c) Supply staff and support staff should similarly have access on a need to know basis. Parents/carers should be assured data sharing principles are adhered to.

- d) For students on the medical conditions list key stage transition points meetings should take place in advance of transferring to enable parents/carers, school and health professionals to prepare IHP and train staff if appropriate.

4) Individual Healthcare Plans (IHPs)

- a) Where necessary (Headteachers will make the final decision) an Individual Healthcare Plan (IHP) will be developed in collaboration with the student, parents/carers, Headteacher, Special Educational Needs Coordinator (SENDCO) and medical professionals.
- b) IHPs will be stored securely on the school's VLE known to all relevant staff as per the Information Commissioner's Office (ICO). Guidance including conditions with potential life-threatening implications and essential information, including a photo (with parental consent) will also be clearly displayed. Staffrooms are inappropriate locations under Information Commissioner's Office (ICO) advice for displaying IHP as visitors /parent helpers etc. may enter. If consent is sought from parents/carers a photo and instructions may be displayed. More discreet location for storage such as Intranet or locked file is more appropriate.
- c) IHPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.
- d) Where a student has an Education, Health and Care plan or special needs statement, the IHP will be linked to it or become part of it whilst adhering to the principles of the SEND Code of Practice.
- e) Where a child is returning from a period of hospital education or alternative provision or home tuition, collaboration between the LA /AP provider and school is needed to ensure that the IHP identifies the support the child needs to reintegrate.
- f) IHPs should include:
- triggers and symptoms
 - medication requirements
 - emergency procedures
 - educational adjustments
 - named responsible staff.

5) Transport arrangements

- a) Where a student with an IHP is allocated school transport the school should invite the driver or escort to participate in the IHP meeting. A copy of the IHP must be passed to the current operator for use by the driver /escort.

- b) For some medical conditions the driver/ escort will require adequate training. For students who receive specialised support in school with their medical condition this must equally be planned for in travel arrangements to school.
- c) When prescribed controlled drugs need to be sent in to school, parents/carers will be responsible for handing them over to the adult in the car in a suitable bag or container. They must be clearly labelled with name and dose etc.

Controlled drugs will be kept under the supervision of the adult in the car throughout the journey and handed to a school staff member on arrival.

6) Education Health Needs (EHN) referrals

- a) All students of compulsory school age who because of illness, lasting 15 days or more, would not otherwise receive a suitable full-time education are provided for under the local authority's duty to arrange educational provision for such students.
- b) In order to provide the most appropriate provision for the condition the EHN team accepts referrals where there is a medical diagnosis from a medical consultant.

7) Medicines

- a) Where possible, unless advised it would be detrimental to health, medicines should be prescribed in frequencies that allow the students to take them outside of school hours.
- b) If this is not possible, prior to staff members administering any medication, the parents/carers of the child must complete and sign a parental consent to administration of medicine form.
- c) No child will be given any prescription or non-prescription medicines without written parental consent except in exceptional circumstances.
- d) Where a student is prescribed medication by a healthcare professional without their parents'/carers' knowledge, every effort will be made to encourage the student to involve their parents/carers while respecting their right to confidentiality.
- e) No child under 16 years of age will be given medication containing aspirin without a doctor's prescription.
- f) Medicines MUST be in date, labelled, and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered.

- g) A maximum of **four** weeks' supply of the medication may be provided to the school at one time.
- h) A child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence which will be dealt with under the Drug and Alcohol Policy. Schools should otherwise keep controlled drugs that have been prescribed for a student securely stored in a non-portable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency.
- i) Medications will be stored in the medical room and those requiring refrigeration will be stored in the medical fridge within the medical room which is locked.
- j) Any medications left over at the end of the course will be returned to the child's parents/carers.
- k) Written records will be kept of any medication administered to children.
- l) Students will never be prevented from accessing their medication.
- m) Emergency salbutamol inhaler kits are kept voluntarily by school
- n) General posters about medical conditions (diabetes, asthma, epilepsy etc.) are distributed to staff and is shared in staff briefings.
- o) Seaham High School cannot be held responsible for side effects that occur when medication is taken correctly.
- p) Staff will not force a student, if the student refuses to comply with their health procedure, and the resulting actions will be clearly written into the IHP which will include informing parents.

8) Emergencies

- a) Medical emergencies will be dealt with under the school's emergency procedures which will be communicated to all relevant staff so they are aware of signs and symptoms.
- b) Students will be informed in general terms of what to do in an emergency such as telling a teacher.
- c) If a student needs to be taken to hospital, a member of staff will remain with the child until their parents/carers arrive.

9) Day visits, residential visits and sporting activities

- a) Unambiguous arrangements should be made and be flexible enough to ensure students with medical conditions can participate in school visits, residential stays, sports activities and not prevent them from doing so unless a clinician states it is not possible.
- b) To comply with best practice risk assessments should be undertaken, in line with H&S guidance on school educational visits, in order to plan for including students with medical conditions. Consultation with parents/carers, healthcare professionals etc. on educational visits will be separate to the normal day to day IHP requirements for the school day.

10) Avoiding unacceptable practice

Each case will be judged individually but in general the following is not considered acceptable.

The following behaviour is unacceptable in Seaham High School:

- a) Preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- b) Assuming that students with the same condition require the same treatment.
- c) Ignoring the views of the student and/or their parents/carers or ignoring medical evidence or opinion.
- d) Sending students home frequently or preventing them from taking part in activities at school
- e) Sending the student to the medical room or school office alone or with an unsuitable escort if they become ill.
- f) Penalising students with medical conditions for their attendance record where the absences relate to their condition.
- g) Making parents/carers feel obliged or forcing parents/carers to attend school to administer medication or provide medical support, including toilet issues.
- h) Creating barriers to children participating in school life, including school trips.
- i) Refusing to allow students to eat, drink or use the toilet when they need to in order to manage their condition.

11) Insurance

- a) Teachers who undertake responsibilities within this policy will be assured by the Headteacher that are covered by the school's insurance.
- b) Full written insurance policy documents are available to be viewed by members of staff who are providing support to students with medical conditions. Those who wish to see the documents should contact the Business Manager

12)Complaints

- a) All complaints should be raised with the school in the first instance.
- b) The details of how to make a formal complaint can be found in the School's Complaints Policy.

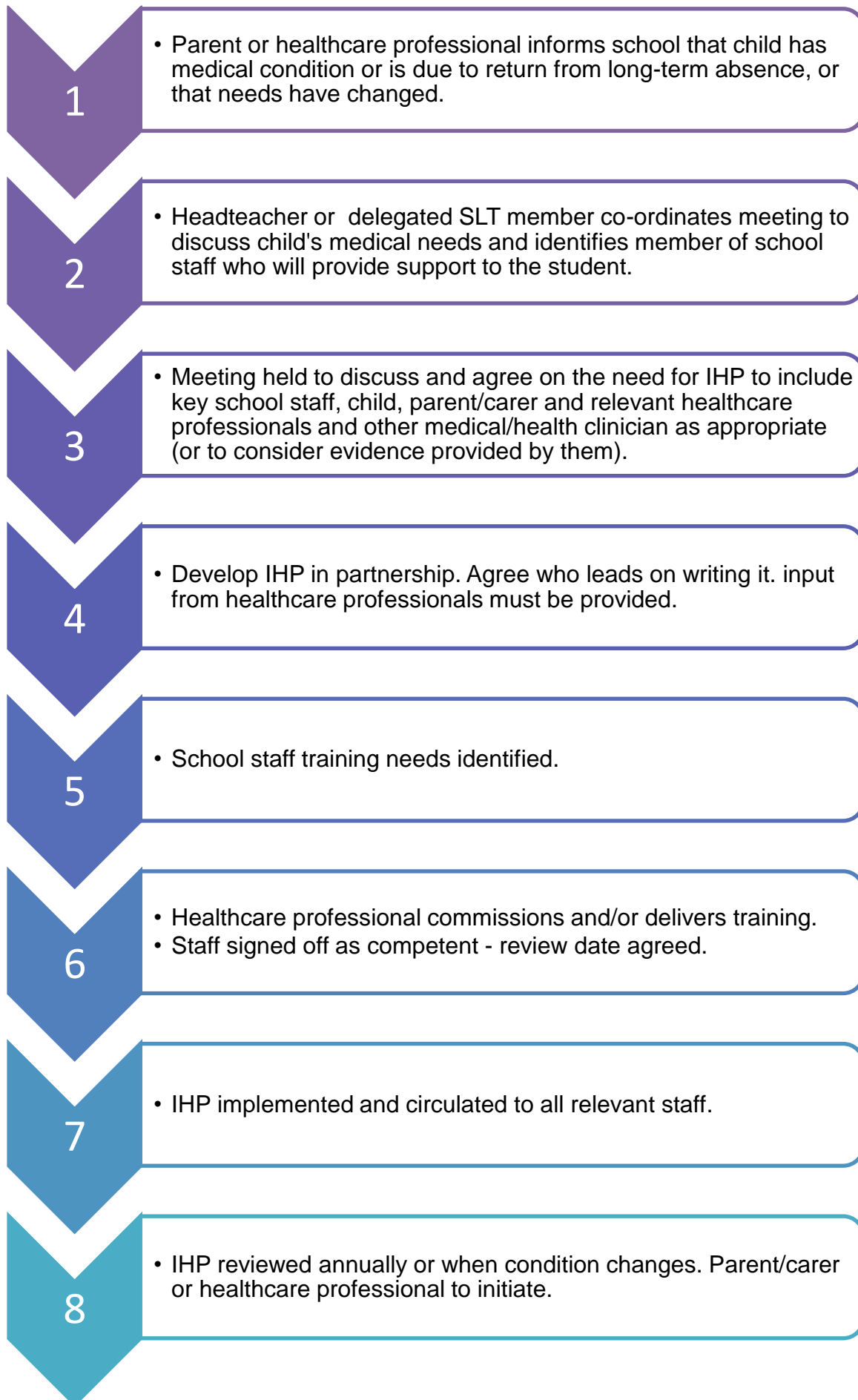
13) Near Miss Reporting

"The school will record and review medical incidents and near misses in order to identify lessons learned and improve future practice."

14)Definitions

- a) 'Parent(s)' is a wide reference not only to a student's birth parents but to adoptive, step and foster parents, or other persons who have parental responsibility for, or who have care of, a student.
- b) 'Medical condition' for these purposes is either a physical or mental health medical condition as diagnosed by a healthcare professional which results in the child or young person requiring special adjustments for the school day, either ongoing or intermittently. This includes; a chronic or short-term condition, a long-term health need or disability, an illness, injury or recovery from treatment or surgery.
- c) 'Medication' is defined as any prescribed or over the counter treatment.
- d) 'Prescription medication' is defined as any drug or device prescribed by a doctor, prescribing nurse or dentist and dispensed by a pharmacist with instructions for administration, dose and storage.
- e) A 'staff member' is defined as any member of staff employed at Seaham High School

Supporting Students with Medical Conditions



1. Seaham High School Individual healthcare plan

Child's name	
Tutor Group	
Date of birth	
Medical diagnosis or condition	
Date	
Review date	

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 student's educational, social and emotional needs

Other information

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

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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.	
Parent/carer Signature:	
Date:	

2. Seaham High School - Parental agreement for setting to administer medicine

The school 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 child

Date of birth

Tutor Group

Medical condition or illness

Medicine

Name/type of medicine
(as described on the container)

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

Seaham High School

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 _____

4. Contacting emergency services

Request an ambulance - dial 999

**ask for an ambulance and be ready
with the information below**

**Speak clearly and slowly and be ready
to repeat information if asked**

1. your telephone number
2. your name
3. your location as follows [insert school/setting address]
4. state what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code
5. provide the exact location of the patient within the school setting
6. provide the name of the child and a brief description of their symptoms
7. inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient