

SUPPORTING PUPILS WITH MEDICAL CONDITIONS POLICY

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1. Purpose

- 1.1 To provide effective support to pupils with medical conditions to ensure pupils can play an active role in school life, and that they have full access to education, sporting activities and educational visits.
- 1.2 To provide clarity and understanding on how Jigsaw will support pupils with medical conditions and the actions to be taken should a pupil become unwell during the school day.

2. Definitions

- 2.1 'The school' and 'Jigsaw' means Jigsaw CABAS® School
- 2.2 CABAS® is an acronym for Comprehensive Application of Behaviour Analysis to Schooling
- 2.3 'Medical conditions' refer to any short or long-term health and medical needs
- 2.4 IHCP is an acronym for individual healthcare plan
- 2.5 MERT is an acronym for the school's medical emergency response team

3. Legislation and statutory responsibilities

- 3.1 This policy meets the requirements under section 100 of the Children and Families Act 2014, which places a duty on schools/governing boards to make arrangements for supporting pupils with medical conditions.
- 3.2 This policy is also based on the Department for Education's statutory guidance on Supporting pupils with medical conditions at school, 2014.

4. Scope

- 4.1 This policy applies to all staff, pupils, parents/carers and, where relevant, external health care professionals.
- 4.2 The school has a separate policy for the management and administration of medicines in school. Other policies that are closely linked and should be interpreted alongside this policy include: Health & Safety, First Aid, Learning Outside the Classroom and Educational Visits, Early Years and Safeguarding & Child Protection policies.
- 4.3 Jigsaw will work closely with parents/carers, health and social care professionals to ensure that effective individual health care plans, and procedures for the monitoring, review and updating of these are in place to support any child with medical conditions.
- 4.4 Jigsaw seeks to ensure that parents feel confident and reassured that effective support for pupils with medical conditions is provided that includes:
 - having good links with local health and social care services
 - allowing pupils easy access to their inhalers and medication
 - administering medication as and when necessary
 - taking account the views of children, parents and medical professionals

- allowing children to participate in all curriculum, sporting and school activities unless there is an over-riding reason provided by parent or health care professionals as to why the child should not participate in a particular activity
- providing assistance should a pupil become ill
- allowing pupils with medical conditions to take drinking, eating or toilet breaks as and when necessary
- not penalising a pupil for poor attendance due to their medical condition
- dealing with social and emotional problems linked to a pupil's medical condition
- building confidence and promoting self-care.

4.5 We acknowledge and support Article 12 of the United Nations Convention on the Rights of the Child that children should be encouraged to form and to express their views.

5. Roles and responsibilities

Role of the Governors

5.1 The governing body has ultimate responsibility to ensure that satisfactory arrangements are in place to support pupils with medical conditions and that staff have received suitable training before they can take responsibility for supporting any child with medical conditions.

Role of the Director of Education and School Management Team

5.2 Ensure all staff and parents are aware of this policy and understand their role in its implementation

5.3 Lead the embedment of this policy throughout the school, and ensure that it is monitored, reviewed and updated

5.4 Ensure that appropriate systems are in place to record individual healthcare plans (IHCPs) and that all relevant staff have access to a pupil's IHCP and are made aware of any changes to an IHCP

5.5 Ensure all pupils with medical conditions have full access to the curriculum, all sporting and school activities unless there is an over-riding reason provided by parent or health care professionals as to why the child should not participate in a particular activity

5.6 Ensure that there is a sufficient number of trained staff to implement this policy and deliver against all IHCPs, including cover for contingency and emergency situations

5.7 Monitor training needs and arrange suitable training for staff in line with the health/medical needs of pupils with medical conditions

5.8 Ensure that training records are maintained and that a list of first aid, paediatric first aid and medication trained and competent staff is maintained, regularly reviewed and displayed

5.9 Ensure that systems are in place to obtain information about a child's medical needs and that this information is maintained up to date

- 5.10 Ensure that all staff who need to know are aware of a pupil's medical conditions and their individual healthcare plans
- 5.11 Lead the Medical Emergency Response Team (MERT), chair meetings and ensure that minutes and actions are recorded and disseminated
- 5.12 Ensure debriefs are completed following any medical emergency to understand what can be learned from the incident and provide support, as appropriate for any staff involved
- 5.13 Ensure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- 5.14 Ensure appropriate arrangements are in place for the safe storage of medication
- 5.15 To report any medical emergencies to the Governing Body including any lessons learnt and changes to policy

Role of the CABAS Supervisors

- 5.16 Work closely with the School Management Team to implement this policy
- 5.17 Be the main contact for parents/carers and staff for queries and concerns regarding medication and welfare of pupils
- 5.18 Update relevant school staff on pupils' medical needs and any changes to IHCPs
- 5.19 Undertake risk assessments for extra-curricular activities, educational visits and other off-site visits for those pupils with medical conditions and review these at least annually. Where relevant, parents/carers, pupils and any relevant healthcare professionals will be consulted.
- 5.20 Ensure parents are informed of any incidents that may occur that impacts the welfare of a pupil with medical conditions
- 5.21 Liaise with school management regarding any new or existing medical conditions and health needs of pupils

Role of Staff

- 5.22 Supporting pupils with medical conditions during school hours is not a sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they are not required to do so. This also applies to the administration of medicines.
- 5.23 Those staff who take responsibility to support pupils with medical conditions will receive appropriate suitable training and may only support pupils with medical conditions once they have demonstrated the necessary competency.
- 5.24 Teaching staff should take into account the needs of pupils with medical conditions that they teach. All staff should be aware of the action to be taken and respond accordingly when they become aware that a pupil with medical conditions requires assistance.
- 5.25 Any medical incidents involving pupils with medical conditions should be recorded and reported to senior staff.
- 5.26 Staff should report any concerns with regard to the implementation of this policy to the School Management Team.

Role of Parents/Carers

- 5.27 Provide the school with all relevant information regarding their child's medical needs and any changes on a timely basis
- 5.28 Be involved in the drafting, and review of their child's IHCP
- 5.29 Comply with school policies and procedures and any relevant provisions within the IHCP, e.g. to provide medicines and/or equipment
- 5.30 Ensure that any changes to their own or any emergency contacts details are advised to the school on a timely basis and either they or their nominated emergency contacts are contactable at all times

Role of Pupils

- 5.31 Where possible, and with due consideration of each individual pupil's level of ability and understanding, Jigsaw will endeavour to involve pupils in discussions about their medical support needs and support pupils to contribute as much as possible to the development and review of their IHCP.
- 5.32 Pupils will be encouraged to manage their own health needs and medications.

Role of other Healthcare Professionals

- 5.33 Healthcare professionals such as specialist nurses, paediatricians, pharmacists and general practitioners provide advice on the drafting and review of individual healthcare plans and information regarding medical conditions.
- 5.34 Where relevant support will be provided for pupils with particular conditions, and training for school staff.

6. Equal opportunities

- 6.1 Jigsaw is committed to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities unless there is an over-riding reason provided by parent or health care professionals as to why the child should not participate in a particular activity
- 6.2 The school will consider any reasonable adjustments that are required to enable these pupils to participate fully and safely in school activities.

7. Being notified that a pupil has a medical condition

- 7.1 Where the school is notified that a child has a medical condition, whether before the child joins the school, or an existing pupil, the school will ensure that an IHCP is completed with input from parents and, where appropriate healthcare professionals. All IHCPs should be reviewed and updated each academic year in tandem with the pupil's annual review or earlier should there be changes to medical conditions and/or healthcare needs.
- 7.2 The school will make every effort to ensure that arrangements are put in place as soon as reasonably practicable to accommodate the specific medical/healthcare needs of pupils, including appropriate training for staff, making necessary adjustments and sourcing specialist equipment.

- 7.3 Where required, the individual risk assessment completed for pupils whose medical needs and conditions have changed or they are returning to school after long-term illness/sickness will be reviewed and updated, to ensure that appropriate measures are in place to support the pupil effectively and safely.

8. Individual Healthcare Plans (IHCPs)

- 8.1 IHCPs should be completed for any pupil with known medical conditions
- 8.2 The Director or Education has overall responsibility for ensuring that IHCPs are completed for all relevant pupils.
- 8.3 The IHCP will be compiled with the pupil's best interest in mind and will specify what needs to be done, when and by whom. The level of detail in the plan will depend on the complexity of the pupil's medical condition and the level of support needed.
- 8.4 The plan will give consideration to:
- confidentiality of pupil information
 - medical conditions, their triggers, signs, symptoms and treatments and resulting needs including medication (dosage, side effects, accessibility and storage)
 - self-management of medication
 - dietary requirements
 - access to food and drink
 - specialist equipment and facilities
 - level of support required
 - cover arrangements
 - training needs of school staff
 - health and safety issues
 - environmental issues and requirements
 - attendance at medical appointments
 - procedures regarding educational visits
 - school timetable
 - risk assessments
 - dealing with emergency situations, what to do, who to contact and contingency arrangements
 - school evacuation procedures
 - home to school transport arrangements
 - roles and responsibilities of relevant school staff

9. Managing and administering medicines

- 9.1 The school has a separate policy in place for the management and administration of medicines during school hours, which is available on the school's website.

10. Emergency procedures

- 10.1 In a medical emergency, staff will alert the Medical Emergency Response Team ('MERT') for support. The MERT and the school management team will decide on the next steps and whether there is any need for emergency services to be called.
- 10.2 All pupils' IHCPs will clearly identify what constitutes a medical emergency and the steps that should be taken by school and parents/carers.
- 10.3 If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance.

11. Pupils becoming unwell during the school day

- 11.1 The health and wellbeing of all pupils is of paramount importance to enable them to, therefore, all stakeholders, including staff, parents, carers and medical professionals should work closely together in a supportive manner to ensure the wellbeing of pupils.
- 11.2 For guidance on how pupils are supported when they become unwell during the school day, please refer to the Unwell Pupil Guidance in the Appendix.

12. Record keeping

- 12.2 Jigsaw will ensure that relevant records on medical and healthcare needs will be held in line with the school's retention schedule.
- 12.1 IHCPs will be readily accessible to all staff and staff advised of the location of these records

13. Liability and indemnity

- 13.1 The school will ensure that an appropriate level of insurance is in place commensurate with the school's perceived level of risk.
- 13.2 All staff members who have responsibility for supporting pupils with medical conditions must act within the remit of their role and responsibilities. The school's insurance will indemnify staff against allegations of negligence provided they acted within their remit and responsibilities and correctly followed policy and procedures.

14. Complaints

- 14.1 Parents/carers with a concern about their child's medical condition should discuss these directly with their child's Supervisor or ABA Consultant in the first instance. If the matter is not resolved, parents should follow the School's complaints procedure. The complaints procedure is available on the school's website.

15. Monitoring the Effectiveness of the Policy

- 15.1 The practical application of this policy will be reviewed annually or when the need arises by the School Management Team.

16. Policy Review

- 16.1 This policy will be reviewed and updated biannually to reflect best practice and to ensure compliance with any changes or amendments to relevant legislation.
- 16.2 This policy was last reviewed in January 2023.

17. Version History

No.	Date	Amendment
1.1		Reformatted policy
2.1	February 2021	Policy has been rewritten to reflect current school practice and introduction of the MWO role since the previous review.
2.2	January 2023	The following wording has been changed throughout school personnel changed to staff, IHP changed to IHCP as this is the term commonly used in school. Removed references to Medication & Welfare Officer as the role no longer exists. Responsibilities updated in light of the removal of the Medication & Welfare Officer role. Raising awareness section replaced with Complaints. Appendix updated with Unwell Pupil Guidance and the flowchart for being notified of a medical condition removed. Language tightened.
2.3	February 2023	Following Governor feedback: Language tightened, removal of some duplication of information, removal of Section on Training,

18. Related Legislation & Guidance

Document	Location
Medicines Act 1968	https://www.legislation.gov.uk/ukpga/1968/67
Misuse of Drugs Act 1971	https://www.legislation.gov.uk/ukpga/1971/38/contents
Health and Safety Act 1974	https://www.legislation.gov.uk/ukpga/1974/37/contents
Children Act 1989	https://www.legislation.gov.uk/ukpga/1989/41/contents
Education Act 1996	https://www.legislation.gov.uk/ukpga/1996/56/contents
Education Act 2002	https://www.legislation.gov.uk/ukpga/2002/32/contents
Children Act 2004	https://www.legislation.gov.uk/ukpga/2004/31/contents
The NHS Act 2006	https://www.legislation.gov.uk/ukpga/2006/44/contents
Equality Act 2010	https://www.legislation.gov.uk/ukpga/2010/15/contents
School Premises (England) Regulations 2012 (as amended)	https://www.legislation.gov.uk/uksi/2012/1943/contents/made
Children and Families Act 2014	https://www.legislation.gov.uk/ukpga/2014/6/contents
The Special Needs Code of Practice	https://www.legislation.gov.uk/uksi/2015/893/contents/made

19. Related Internal Documentation

Document	Electronic Copy Location
Supporting Pupils at School with Medical Conditions	Home Page (Common)/ Policies /School
Managing and Administering Medicines Policy & Procedures	Home Page (Common)/ Policies /School
Health & Safety Policy	Home Page (Common)/ Policies /School
Personal & Intimate Care Policy	Home Page (Common)/ Policies /School
Physical Education Policy	Home Page (Common)/ Policies /School
Educational Visits Policy	Home Page (Common)/ Policies /School
Safeguarding & Child Protection Policy	Home Page (Common)/ Policies /School
Early Years Foundation Stage Policy	Home Page (Common)/ Policies /School

Appendix - Unwell Pupil Guidance

Unwell Pupil Guidance

We recognise our responsibility to promote a learning environment that is safe and healthy for all. In order to maintain a clean, safe and healthy environment, this guidance outlines the requirements for staff and parents as to when pupils should or should not be in school if showing signs of sickness/illness.

The purpose of this guidance is to:

- Ensure that sick/unwell pupils are appropriately and correctly identified
- Ensure sick/unwell pupils are cared for and supported appropriately
- Protect pupils and staff from preventable infections
- Enable staff and parents to be clear about the requirements and procedures when pupils are unwell

Scope

This guidance applies to all staff, pupils, parents and carers and considers advice from the NHS and UK Health Security Agency. It forms part of our statutory requirements of supporting pupils with medical conditions and should be interpreted alongside other key policies & procedures, namely:

- Health and safety policy
- First aid policy
- Administering and managing medication in school policy
- Hygiene and infectious disease control procedures

Guidance:

- Pupils should not be brought to / come to school if they are displaying signs of illness or vomited in the night.
- Parents are responsible for keeping the school informed about their child's health.
- If pupils do come to school and staff feel that they are unfit to be in school, parents, carers or emergency contacts will be contacted and requested to come and collect their child/ren and asked not to send them back to school until they are symptom free.
- Pupils with infectious and contagious diseases will not be permitted to attend for certain periods. If staff suspect that a pupil has an infectious or contagious disease, they will request that parents/carers consult a doctor before returning the pupil to school.

Illnesses and exclusion periods:

Infection or complaint:	Exclusion period:
Chicken pox	Until all spots have formed a scab. This is usually 5 days after the spots appeared.
Cold sores	<p>There's no need to keep your child off school if they have a cold sore.</p> <p>Encourage them not to touch the blister or kiss anyone while they have the cold sore, or to share things like cups and towels.</p>
Conjunctivitis	Do not need to stay away from school, unless feeling unwell.
Coronavirus (COVID-19)	<p>Your child should try to stay at home and avoid contact with other people if they have symptoms of COVID-19 and they either:</p> <ul style="list-style-type: none"> • have a high temperature • do not feel well enough to go to school or do their normal activities <p>If they have mild symptoms and they feel well enough, they can still attend school.</p>
Diarrhoea and/or vomiting	48 hours after last bout of diarrhoea or vomiting
Flu	Until recovered
German Measles/ Measles (Rubella)	At least 4 days from when the rash first appears.
Hand, foot and mouth	If your child has hand, foot and mouth disease but seems well enough to attend school, there's no need to keep them off.
Head lice & nits	There's no need to keep your child off school if they have head lice. Please treat as soon as possible.
Impetigo	Until lesions are crusted and healed or 48 hours after starting antibiotic treatment
Meningitis	Until recovered

Mumps	5 days after onset of swelling
Norovirus/Rotavirus	48 hours after the diarrhoea and vomiting symptoms have stopped
Scabies	Pupils can return after first treatment
Scarlet fever (Strep-A)	Pupil can return 24 hours after starting appropriate antibiotic treatment
Slapped cheek	<p>You don't need to keep your child off school if they have slapped cheek syndrome, because once the rash appears, they're no longer infectious.</p> <p>If you suspect your child has slapped cheek syndrome, take them to see a GP and let the school know if they're diagnosed with it.</p>
Sore throat	You can still send your child to school if they have a sore throat. But if they also have a high temperature, they should stay at home until it goes away. A sore throat and a high temperature can be symptoms of tonsillitis.
Typhoid and paratyphoid fever	48 hours after the diarrhoea and vomiting symptoms have stopped
Whooping cough	At least 48 hours after starting appropriate antibiotic treatment or 21 days from onset of the symptoms if no antibiotics have been taken

Pupils becoming unwell at school:

- Staff will look after pupils in a kind, caring and supportive manner. As pupils may be distressed, it is important to be calm and reassuring.
- Pupils will be seen by a qualified first aider to assess their condition. Individual Health Care Plans will be referenced and followed, if relevant.
- Parents, carers will be informed of the situation and, where required, asked to collect their child as soon as possible.
- Whilst awaiting the arrival of parents, the staff will ensure the comfort of the pupils, taking appropriate action, which would include seeking medical advice if necessary. Staff will report any worries about a pupil's health to the parents, carers immediately.
- We understand the needs of working parents and do not request pupils being collected from school and remain at home unnecessarily. However, the decision of the school is final when

requesting a child is collected due to illness or infection. Decisions will consider the needs of the pupil and those of the other pupils and staff in school.

- Decisions to send a pupil home due to illness are made collectively by senior staff who know the pupil well and approved by the School Management Team.
- It is the parents' responsibility to arrange collection of their unwell child/ren as soon as possible and providing details to school. Please bear in mind that depending on the nature of illness (e.g. diarrhoea and/or vomiting) it may not be appropriate and safe for the unwell pupil to travel home in a shared taxi with other pupils.
- The school has a medical room, which can be used for short periods of time by pupils to rest and await collection by parents. It is important that unwell pupils are collected as soon as possible to ensure the room is available for the care and support of other pupils who would fall ill during the school day.

There are certain symptoms and conditions that give more cause for concern, therefore, when a pupil presents one or more of these symptoms, parents/carers will be asked to collect their child as soon as possible:

- *Fever:* fever is defined as having a temperature of 38C or above. Pupils must be fever free for a minimum of 24 hours before returning to school; that means the pupil is fever free without the aid of any other fever reducing substance, for example Calpol.
- Fever and sore throat
- *Vomiting:* Parents/carers will be contacted at the first occurrence of vomiting. If there are other signs of the pupil being unwell, i.e. lethargy, loss of appetite, raised temperature and unusually quiet and subdued behaviour, parents will be asked to collect their child. If there are no other signs and symptoms of the pupil being unwell, then the pupil may remain in school with the parent/carer's agreement. If further occurrences of vomiting occur or other symptoms appear, parents will be contacted again and asked to collect their child.
- NB: Where there is already a case of diarrhoea and vomiting in school, and the unwell pupil can be linked to the existing case, for example, same class, shared transport, shared break times; parents, carers will be asked to collect their child/ren at the first occurrence of vomiting as a precautionary measure to reduce the risk of an outbreak in the school.
- *Diarrhoea:* Diarrhoea is defined as having 2 or more liquid or semi-liquid stools within 4 hours, or 3 or more liquid or semi-liquid stools within a 24-hour period. Parents, carers will be contacted at the first occurrence of liquid or semi-liquid stools if there are other signs and symptoms of the pupil being unwell i.e. lethargy, loss of appetite, raised temperature, unusually quiet and subdued behaviour, and asked to collect their child. If there are no other signs of the pupil being unwell, the pupil may remain in school with the parent/carer's agreement. If further liquid or semi-liquid stools occur or other symptoms appear, parents will be contacted and asked to collect their child.
- NB: Where there is already a case of diarrhoea and vomiting in school and the unwell pupil can be linked to the existing case, for example, same class, shared transport, shared break times; parents, carers will be asked to collect their child/ren at the first occurrence of liquid, semi-liquid stools, as a precautionary measure to reduce the risk of an outbreak in school.

- *Rash*: any sudden onset of rash that does not fade when a glass is rolled over it. Other types of rash & spots may also require collection.
- *Ingesting inedible items*: when an inedible item is swallowed/ingested staff will contact parents and will also seek guidance from NHS111. Staff will pass on any advice they receive from NHS111 to parents, and in cases where the advice is to have the pupil checked by medical staff, parents will be asked to collect their child from school. If ingesting the inedible item is deemed a medical emergency, staff will accompany the pupil to A&E and stay with the pupil until parents arrive.

Antibiotics

If a pupil has been prescribed antibiotics, they will need to be absent from the school for the first 24 hours of having taken the antibiotics. This is in case the pupil has a reaction to the antibiotic.

Coughs and colds

Coughs and colds do not normally require pupils to be absent from school, this however depends on the severity and how the pupil is able to cope with daily school routines. If the pupil is unable to participate in the normal school routine and regular day, the school may request that the pupil remains at home or collected from school if already in school.

Existing medical conditions

We recognise that pupils may have existing medical conditions and/or specific medications they take may present with side effects. We aim to have these recorded in the Individual Health Care Plans (IHCP) to enable us to support pupils effectively. Staff will refer to the unwell pupil's IHCP to confirm arrangements in place before parents, carers are contacted.

Review and Monitoring

This guidance will be reviewed biannually, in line with the Supporting Pupils with Medical Conditions Policy by the School Management Team.

This guidance was reviewed in January 2023.