GRAVENEY SCHOOL

Supporting Pupils at School with Medical Conditions Policy

Policy statement

Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions.

The governing body will ensure that all pupils with medical conditions in our school are supported to enable them to have full access to all aspects of the education provided and the same opportunities as other pupils, including access to school trips and physical education.

All pupils with medical conditions, in terms of either physical or mental health, will be properly supported so that they can play a full and active role at school, remain healthy and achieve their academic potential.

The school will consult and work in partnership with health and social care professionals, pupils and parents to ensure the needs of pupils with medical conditions are effectively met.

The school will ensure that there is a focus on the needs of each individual pupil and how their medical condition impacts on their school life.

The school will ensure staff are provided with appropriate training to provide whatever support pupils require, including training in what to do in an emergency.

All staff have a clear understanding that medical conditions should not be a barrier to learning and that they have a duty of care to pupils.

The named person with overall responsibility for pupils with medical needs is:

The Principal First Aider

The **Principal First Aider** is responsible for daily care of pupils in the medical room and the administering and monitoring of medication.

Introduction

Parents* of children with medical conditions are often concerned that their child's health will deteriorate or not be effectively managed when they attend school. This is because pupils with long-term and complex medical conditions may require on-going support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. It is therefore important that parents feel confident that the school will provide effective support for their child's medical condition and that the children feel safe.

In addition to the educational impacts, there are social and emotional implications associated with medical conditions. Children may be self-conscious about their condition and some may be bullied or develop emotional disorders such as anxiety or depression around their medical condition.

Long-term absences due to health problems affect children's educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health. Reintegration back into school should be properly supported so that children with medical conditions fully engage with learning and do not fall behind when they are unable to attend. Short-term and frequent absences, including those for appointments connected with a pupil's medical condition (which can often be lengthy), also need to be effectively managed and appropriate support put in place to limit the impact on the child's educational attainment and emotional and general wellbeing.

Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case the governing body must comply with their duties under that Act.

Some children may have special educational needs (SEN) and a statement or Education, Health and Care (EHC) plan which brings together health and social care needs as well as their special education provision.

* The term 'parent' implies any person or body with parental responsibility such as foster parent, carer, guardian or local authority.

Consultation and Communication

This policy has been developed in consultation with key stakeholders within the school and within local health and social care agencies, as well as pupils and parents.
Key Stakeholders:

- Principal
- Principal First Aider
- Pupils with medical conditions
- parents
- school nurse
- head teacher
- teachers

- special educational needs coordinator
- pastoral care/welfare officer
- members of staff trained in first aid
- all other school staff
- school governors.
- Local healthcare professionals

The school recognises the importance of providing feedback to those involved in the development process and is committed to acknowledging input from others and taking account of suggestions or advice received.

In order to ensure full implementation of this policy, pupils, parents, staff and relevant health and social care partners will be informed about it, copies will be provided as appropriate, access to the policy signposted and regular reminders will be put in place.

In addition a staff training programme will be provided, which will take account of the need for specialist training (when required) for some key members of the staff team, as well as generic training for all staff. In addition, all new staff, including supply and temporary staff, will be informed of the policy and their responsibilities. (NB some suggestions for a communication plan are attached as App A)

Staff Awareness, Training and Support

The school employs a principal First Aider who is based in the school's medical centre who is responsible for administering first aid. He/she is supported by a team of Qualified First Aiders who are available as back up when required. In addition, there are staff members with first aid qualifications who can be called upon in an emergency. All staff members are trained in accordance with legal requirement. A qualified First Aider is always included within any staff team that takes pupils out of school on trips or journeys.

All staff in the school are made aware of any pupils with additional medical needs and the systems in place to support them. This information is regularly updated.

All staff understand their duty of care to pupils at all times and in the event of an emergency, action required in an emergency for the common serious conditions is displayed in prominent locations for staff.

See also First Aid Handbook For Guidance and Procedures.

All staff supporting pupils with medical needs will receive relevant training. Training provided will be planned in conjunction with the school lead and relevant external medical professionals. Training for staff will be at a level which ensures staff members are competent and have confidence in their ability to support pupils effectively and to fulfill the requirements set out in their individual healthcare plans.

First aid At Work training will be refreshed on a 3 year basis or as required. Staff will receive a certificate detailing the training they have received and a record is kept by the member of SLT with responsibility for CPD, detailing training provided and who attended. The record is reviewed annually to ensure staff are suitably trained. As a minimum staff should have received training in the following:

- Epipen / severe allergic reaction
- Epilepsy
- Diabetic coma
- Asthma management

This training can be offered by the school nursing service.

If there is a need for a child to be taken to hospital the parent will be informed, a member of staff (wherever possible someone familiar to the child) will always accompany the child and stay with them until a parent or responsible family member arrives. The school will ensure a copy of the child's healthcare plan is taken to the hospital with the child wherever possible.

All staff accompanying children on off-site visits will be made aware of pupils with medical conditions involved in the trip and any relevant information necessary.

Notification that a pupil has a medical condition, process for ensuring support is put in place and individual healthcare plans

Notification may come through a statement of SEN, an Education, Health and Care (EHC) plan, from a medical practitioner or from the parent/carer of the child.

When a pupil is starting at our school at the usual transition points, and has an identified medical condition, we will ensure that arrangements are in place in time for the start of the relevant school term.

In other cases, such as a new diagnosis or children moving mid-term, we would expect to have arrangements in place within two weeks of notification or admission.

The usual process for supporting a pupil with medical needs will be by establishing an Individual Healthcare Plan. Individual Healthcare plans help to ensure that pupils with medical needs are effectively supported. The plan provides clarity about what needs to be done, when and by whom. The plan is helpful in the majority of cases and especially for long-term and complex medical conditions, although not all children will require one. The level of detail within the Individual Healthcare Plan will depend on the complexity of the child's condition and the degree of support needed. The school recognizes that different children with the same health condition may require very different support.

Individual Healthcare plans may be initiated by a member of school staff or a healthcare professional involved, or initially, by parent/guardian in providing care to the child. Where the child has SEN the Individual Healthcare plan will be linked to the child's statement or EHC plan.

Individual Healthcare Plans will include the following information:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication (its side-effects and its storage) and other treatments, dose, time, facilities, equipment, testing, dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons
- Specific support for the pupil's educational, social and emotional needs, including how absences will be managed, support to catch up with work missed, additional time for exams, counselling etc
- Who will provide this support, their training needs and cover arrangements in their absence
- Who in the school needs to be aware of the child's condition and the support required
- Written permission for medication to be administered by a member of staff, or self-administered by individual pupils during school hours
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the 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 who to contact, and contingency arrangements.

Responsibility for the wellbeing of the pupil will not be left to one person; a team of people will be identified to ensure that the pupil's health, safety and emotional well being are supported. Close liaison between the school and the relevant healthcare providers will be developed to ensure that the needs of the pupil are fully catered for and reasonable adjustments made to ensure inclusion.

A flow chart setting out the process for identifying and agreeing the support a child needs is at Appendix B

Individual Healthcare Plans are used by the school to ensure that pupils with medical conditions are effectively supported to access the curriculum and wider school life. They are developed in the context of assessing and managing risks to the child's education, health and social well-being and to minimise time out of school / learning.

Where a child is absent from school for over 15 days in an academic year due to illness the school will review the plan, taking into account information received from health practitioners involved in their care, and a referral made (if appropriate) to the LA medical provision. For Wandsworth resident children, this is the Home and Hospital Tuition Service, children resident in other boroughs will be referred to the equivalent service in their LA.

Record keeping, Healthcare Plan register and reviews

The governors will ensure that robust records are kept relating to pupils with medical conditions including:

- their Individual Healthcare Plans, key staff involved and the review processes
- administration of medication (Form 4)
- Training
- emergency procedures
- parental permission forms

Parents are asked if their child has any health conditions or health issues and if so these should be recorded appropriately when the child is admitted to the school. Parents are expected to update the school if their child's medical needs change.

Individual healthcare plans are used to create a centralised register of pupils with medical needs. An identified member of staff has responsibility for maintaining and updating the register, and will contact parents if any further information or clarification is required.

The healthcare register will be securely kept, all staff will respect pupil confidentiality and permission will be sought from parents and pupils before any medical information is shared with any other party. The school seeks permission from parents to allow the healthcare plan to be sent ahead to emergency care staff, should an emergency happen during school hours or at a school activity outside the normal school day. This permission is included in the healthcare plan.

Apart from the central copy, specified members of staff (agreed by the pupil and parents) securely hold copies of pupils' Healthcare Plans. These copies are updated at the same time as the central copy.

All members of staff who work with groups of pupils have access to the Healthcare Plans of pupils in their care.

When a member of staff is new to a pupil group, for example due to staff absence, the school makes sure that they have access to the Healthcare Plans of pupils in their care.

All Individual Healthcare Plans will be reviewed annually as a minimum.

Staff at the school will also use opportunities such as teacher-parent consultations and student planners to ensure information held is accurate and updated where needed.

Parents and pupils will always be provided with a copy of the pupil's current plan.

An anonymised overview report on the support for pupils with medical conditions will be presented to governors annually. The report will be prepared by the (Principal First Aider and will summarise key issues emerging from the plans and processes in place including issues re access to the curriculum.

Consent to administer medicines, storage and administration of medication at school

Parents are responsible for making sure their child is well enough to attend school. When children are acutely unwell, they should be kept at home.

Medicines will only be administered at the school when it would be detrimental to a child's health or school attendance not to do so. The final decision as to whether the school can assist with a child's medication or treatment rests with the principal. His decision will be based on the information provided by parents on their Request for the School to Administer Medication form (Form 2), advice from other professionals including the School Nurse the child's GP or other specialists as appropriate, and other factors including any other support that is being provided for that pupil.

Parental Responsibility

- If a pupil requires regular prescribed or non-prescribed medication at school, parents are asked to provide consent on the Request for School to Administer Medication form (Form 2) giving the pupil or staff permission to administer medication on a regular/daily basis, if required.

- Drawing up a health care plan with the school with the school or other professionals

- Ensuring that all medicines are handed in personally to the medical room

- Ensuring that the medicine supplied is in its original container and is correctly labelled with the child's name, medication name, dose and frequency, cautionary advice, storage information and expiry date.

- Providing their child with medication, as necessary to take on any out of school activities (to be held by the teacher in charge).

- Informing the school whether an adverse effect may result from failure to receive the medication or possible side effects of administration.

On the first day of any illness where parents wish the school to administer medication, it will be sufficient for the pupil to bring in a note from their parent to the medical room with their medication. The note must provide details of the medication frequency of dose, possible side effects and emergency contact number. The pupil will be given Form 2 to take home and this must be completed by parents and returned to the medical room on the second day of illness. Failure to return the completed form will mean that the medical staff cannot administer medication to the child.

The school understands the importance of medication being taken as prescribed.

No child under 16 will be given prescription or non-prescription medicines without their parent's written consent.

Only prescribed medicines that are in-date, labelled with the child's name, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage are acceptable. The exception to this is insulin which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container.

School responsibility

All medicines will be stored safely and in accordance with instructions, taking account of temperature requirements etc.

We will ensure that children know where their medicines are at all times and are able to access them immediately. Where relevant, they should know who holds the key to the storage facility. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenalin pens should be always readily available to children and not locked away.

Pupils Carrying Own medicine

Where possible, pupils will be allowed to carry their own medication, particularly epipens and asthma inhalers. This will need to be identified on Form 2. Request for School to Administer Medication Form. The Principal will need to satisfy himself that the medicine will be safe and will be used responsibly.

Specific arrangements will be put in place for school trips where a child requires medication.

Controlled drugs that have been prescribed for a pupil will be securely stored in a non-portable container and only named staff will have access. We will ensure that controlled drugs are easily accessible in an emergency.

Epipens should be stored safely but easily accessible to all. They are light sensitive and so should be stored accordingly.

A member of staff may administer a controlled drug to the child for whom it has been prescribed providing they have received specialist training/instruction. This requires bespoke management for each individual case due to strict rules which apply to the use of controlled drugs.

We will ensure an adequate number of staff members have received training in administering medication to meet the needs of pupils.

Trained first aiders are responsible for administering medication and first aid and medical needs are always addressed in the risk assessment for off-site activities.

We will keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Parents will be informed when a child has been unwell and /or medication has been required / administered.

Parents at this school understand that if their child's medication changes or is discontinued, or the dose or administration method changes, that they should **notify the school immediately.**

If a pupil refuses their medication, this will be recorded and the parent notified. If necessary advice will be sought from the relevant health professional.

If a pupil misuses medication, either their own, or another pupil's, their parents are informed as soon as possible. These pupils are subject to the school's usual disciplinary procedures.

The Principal First Aider ensures the correct storage of medication at school. he/she will check for expiry dates on a weekly basis. The parent will be informed and asked to replace the medication if necessary. It is the parent's responsibility to collect all expired medication.
It is the parent's responsibility to ensure in date medication is in school on the first day of the new academic year, and whenever required.

All school staff have been informed through training that they are required, under common law duty of care, to act like any reasonably prudent parent in an emergency situation. 'Emergency' is defined as a potentially life-threatening situation. This may include taking action such as administering medication. It is crucial that accurate information about any action taken is passed to acute / ambulance services on arrival.

Residential visits and School Trips

Parents are sent a residential visit / school trips form to be completed and returned to school shortly before their child leaves for an overnight or extended day visit. This form requests up-to-date information about the pupil's current condition and their overall health. This provides essential and up-to-date information to relevant staff and school supervisors to help the pupil manage their condition while they are away. This includes information about medication not normally taken during school hours.

All residential visit forms are taken by the relevant staff member on visits and for all out-of-school hours activities where medication is required. These are accompanied by a copy of the pupil's Healthcare Plan.

All parents of pupils with a medical condition attending a school trip or overnight visit are asked for consent, giving staff permission to administer medication at night or in the morning if required.

If the form includes current issues of medication - a discussion is held with the parent about how the medical condition will be managed whilst on the trip.

The school is committed to providing a physical environment that is accessible to pupils with medical conditions and this includes school trips and journeys.

The school ensures the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured social activities, including during breaks and before and after school.

The school ensures the needs of pupils with medical conditions are adequately considered to ensure they have full access to extended school activities such as school discos, breakfast club, school productions, after school clubs and residential visits.

All staff at this school are aware of the potential social problems that pupils with medical conditions may experience. Staff use this knowledge to try to prevent and deal with problems in accordance with the school's anti-bullying and behaviour policies.

Staff use opportunities such as personal, social and health education (PSHE) lessons to raise awareness of medical conditions amongst pupils and to help create a positive social environment.

The school understands the importance of all pupils taking part in sports, games and activities.

The school ensures all classroom teachers, PE teachers and sports coaches make appropriate adjustments to sports, games and other activities to make physical activity accessible to all pupils. However we also ensure all classroom teachers, PE teachers and sports coaches understand that pupils should not be forced to take part in an activity if they feel unwell.

Teachers and sports coaches are aware of pupils in their care who have been advised to avoid or to take special precautions with particular activities, and all PE teachers, classroom teachers and school sports coaches are aware of the potential triggers for pupils' medical conditions when exercising and how to minimize these triggers.

The school ensures all pupils have the appropriate medication or food with them during physical activity and that pupils take them when needed.

The school ensures all pupils with medical conditions are actively encouraged to take part in out-of-school clubs and team sports.

This school ensures that pupils with medical conditions can participate fully in all aspects of the curriculum and ensures that appropriate adjustments and extra support are provided.

Teachers at this school are aware of the potential for pupils with medical conditions to have special educational needs (SEN). Pupils with medical conditions who are finding it difficult to keep up with their studies are referred to the SEN coordinator. The school's SEN coordinator consults the pupil, parents and the pupil's healthcare professional to ensure the effect of the pupil's condition on their schoolwork is properly considered.

Risk assessments are carried out prior to any out-of-school visit and medical conditions are considered during this process. Factors we consider include: how all pupils will be able to access the activities proposed, how routine and emergency medication will be stored and administered, and where help can be obtained in an emergency.

The school understands that there may be additional medication, equipment or other factors to consider when planning residential visits.

Risk assessments are carried out before pupils start any work experience or off-site educational placement. The school accepts the responsibility for ensuring that the placement is suitable, including travel to and from the venue for the pupil. Permission is sought from the pupil and their parents before any medical information is shared with an employer or other education provider.

Health and safety, including common triggers that can make medical conditions worse or can bring on an emergency

The school has a list of common triggers for the common medical conditions at this school. The school is committed to reducing the likelihood of medical emergencies by identifying and reducing triggers both at school and on out-of-school visits.

School staff have been given training on medical conditions. This training includes detailed information on how to avoid and reduce exposure to common triggers for common medical conditions.

Healthcare Plans are used to identify individual pupils who are sensitive to particular triggers. The school has a detailed action plan to ensure these individual pupils remain safe during all lessons and activities throughout the school day.

Full health and safety risk assessments are carried out on all out-of-school activities before they are approved, including work experience placements and residential visits, taking into account the needs of pupils with medical conditions

All medical emergencies and significant incidents are reviewed to ascertain whether and / or how they could have been avoided. Appropriate changes to policy and procedures are implemented after each review.

Roles and responsibilities

This school works in partnership with all interested and relevant parties including the school's governing body, all school staff, parents, employers, community healthcare professionals and pupils to ensure the policy is planned, implemented and maintained successfully.

The **Governors** will ensure that arrangements are in place to support pupils with medical conditions and that they are enabled to access the fullest possible participation in all aspects of school life. Governors will ensure all staff have received the appropriate level of training and are competent to support pupils. Governors will receive annual updates as to the effective working of the policy, will review this carefully and ensure implementation of any changes or recommendations arising from the review.

The **Principal and the Lead for children with medical conditions** have lead responsibility for the implementation and review of the policy and will ensure that

- the school is inclusive and welcoming
- the policy is in line with national guidance and expectations, is put into action and maintained
- liaise with other interested and relevant parties (including parents and pupils, school health, community and acute health services, the local authority services etc)
- ensure information help by the school is accurate and up to date and good communication and information sharing systems are in place
- ensure pupil confidentiality is respected

- assess the training and development needs of staff and arrange for them to be met
- ensure all staff are aware of the policy, including supply teachers and new staff
- delegate tasks appropriately to named members of staff
- monitor and review the policy at least once a year, with input from pupils, parents, staff and external stakeholders and update it as and when necessary
- report back to governors and to all key stakeholders about the implementation of the medical conditions policy.

All staff at the school have a responsibility to

- be aware of and understand the school's medical conditions policy
- be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency
- know which pupils in their care have a medical condition and be familiar with the content of the pupil's Healthcare Plan
- allow all pupils to have immediate access to their emergency medication when necessary
- maintain effective communication with parents including informing them if their child has been unwell at school
- ensure pupils who carry their medication with them have it when they go on a school visit or out of the classroom
- be aware of pupils with medical conditions who may be experiencing bullying or need extra social support
- ensure all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in, and understand the impact a medical condition may have on a pupil and make any reasonable adjustments to accommodate this (e.g. that pupils have the appropriate medication or food with them during any exercise and are allowed to take it when needed, and are not forced to take part in an activity if they are unwell)
- be aware that medical conditions can affect a pupil's learning and provide extra help when pupils need it, including help to catch up with work when the pupil has been unwell
- use opportunities such as PSHE and other areas of the curriculum to raise pupil awareness about medical conditions

Specific responsibilities of key staff

- the **Special Educational Needs co-coordinator** for the school will keep an overview of any pupils whose medical needs impact on their learning, will advise staff working directly with them and ensure appropriate strategies are put in place to support them
- **Staff with first aid training** will give immediate help to casualties with common injuries or illnesses and those arising from specific hazards with the school and when necessary ensure that an ambulance or other professional medical help is called.
- **designated lead for medication** will ensure all medication is correctly stored and labelled, regularly reviewed, in date and that parents provide new medication as needed.

School nurse / school health team will be involved in the healthcare planning for pupils with medical needs as appropriate. This may include

- informing the school of pupils in need of a health care plan
- initiating healthcare plans when relevant
- contributing to healthcare plans and their review
- ensuring parental consent is obtained and recorded
- help in providing regular training for school staff in managing the most common medical conditions at school
- advising on training on less common conditions, including providing information about where the school can access other specialist training
- collating relevant health information to support pupil, family and school to inform the healthcare plan
- supporting pupils and parents as appropriate

Individual doctors and specialist healthcare professionals caring for pupils who attend this school have a responsibility to:

- complete the pupil's Healthcare Plans provided by parents
- where possible, and without compromising the best interests of the child, try to prescribe medication that can be taken outside of school hours
- offer every child or young person (and their parents) a written care/self-management plan to ensure children and young people know how to self manage their condition
- ensure the child or young person knows how to take their medication effectively
- ensure children and young people have regular reviews of their condition and their medication
- provide the school with information and advice regarding individual children and young people with medical conditions (with the consent of the pupil and their parents)
- understand and provide input in to the school's medical conditions policy

Acute health care service personnel have a responsibility to:

- have an agreed system for receiving information held by the school about children and young people's medical conditions, to ensure best possible care
- understand and provide input in to the school's medical conditions policy

The pupils at this school have a responsibility to**:**

- treat other pupils with and without a medical condition equally
- tell their parents, teacher or nearest staff member when they are not feeling well
- let a member of staff know if another pupil is feeling unwell
- treat all medication with respect
- know how to gain access to their medication in an emergency
- if mature and old enough, know how to take their own medication and to take it when they need it
- ensure a member of staff is called in an emergency situation.

The parents* of a child at this school have a responsibility to:

- tell the school if their child has a medical condition, whether existing or emerging, or any underlying mental health issue that may affect their well-being whilst on a school journey.
- ensure the school has a complete and up-to-date Healthcare Plan for their child

- inform the school about the medication their child requires during school hours
- inform the school of any medication their child requires while taking part in visits, outings or field trips and other out-of-school activities
- tell the school about any changes to their child's medication, what they take, when, and how much
- inform the school of any changes to their child's condition
- ensure their child's medication and medical devices are labelled with their child's full name
- provide the school with appropriate spare medication labelled with their child's name
- ensure that their child's medication is within expiry dates
- keep their child at home if they are not well enough to attend school
- ensure their child catches up on any school work they have missed
- ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional
- ensure their child has a written care/self-management plan from their doctor or specialist healthcare professional to help their child manage their condition.

* The term 'parent' implies any person or body with parental responsibility such as foster parent, carer, guardian or local authority.

Policy review

This policy is regularly reviewed and updated, taking account of guidance issued by the government. The school will seek feedback from all stakeholders both within the school and other partners. The views of pupils with medical conditions and their parents will be actively sought and are central to the evaluation and review process.

Last reviewed: June 2017

Appendix A

Communication plan to ensure full implementation of this policy

- Pupils are informed about the medical conditions policy in personal, social and health education (PSHE) classes and through school-wide communication about results of the monitoring and evaluation of the policy.

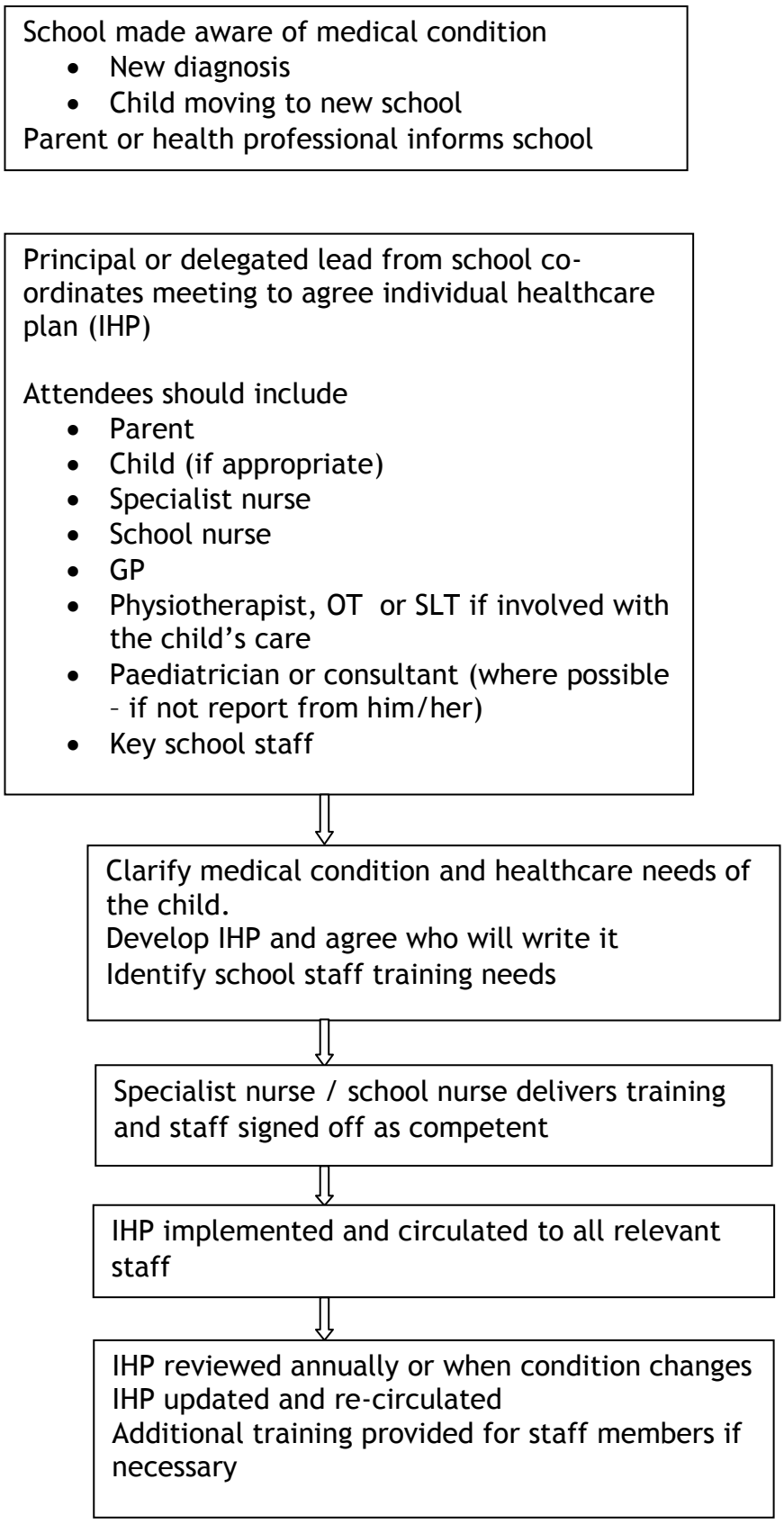
- Parents are informed about the medical conditions policy directly where their children have medical conditions, and also via the school website where a number of school policies are published.

- School staff are informed and regularly reminded about the medical conditions policy, which is incorporated within the Staff Guide. Key staff also participate in medical conditions training and the first aid arrangements are prominently displayed around the school. Supply and temporary staff are provided with key information about pupils in their classes via data held on their class registers and also receive a briefing from Phase and/or SEN staff if there are pupils in their classes with medical conditions that may require a higher level of knowledge than that which is usually expected of a class teacher.

- The health authority is consulted on the policy via the school nursing service, who contributes to both policy development and monitoring of it.

- Governors agree the policy and regularly review it (at least every 2 years)

Appendix B


School made aware of medical condition
• New diagnosis
• Child moving to new school
Parent or health professional informs school
Principal or delegated lead from school co-ordinates meeting to agree individual healthcare plan (IHP)
Attendees should include
• Parent
• Child (if appropriate)
• Specialist nurse
• School nurse
• GP
• Physiotherapist, OT or SLT if involved with the child's care
• Paediatrician or consultant (where possible – if not report from him/her)
• Key school staff
Clarify medical condition and healthcare needs of the child.
Develop IHP and agree who will write it
Identify school staff training needs
Specialist nurse / school nurse delivers training and staff signed off as competent
IHP implemented and circulated to all relevant staff
IHP reviewed annually or when condition changes
IHP updated and re-circulated
Additional training provided for staff members if necessary