



Sutton Coldfield Grammar School for Girls

CHILDREN WITH HEALTH NEEDS WHO CANNOT ATTEND SCHOOL & SUPPORTING PUPILS WITH MEDICAL CONDITIONS POLICY

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1. Aims

This policy aims to ensure that:

- Suitable education is arranged for pupils on roll who cannot attend school due to health needs;
- Pupils, staff and parents/carers understand what the School is responsible for when this education is being provided by the local authority (LA);
- Pupils, staff and parents/carers understand how our School will support pupils with medical conditions; and
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities.

The Governing Board will ensure this policy is implemented through the delegation of the below actions to the School staff, in accordance with this policy:

- Making sure sufficient staff are suitably trained;
- Making staff aware of a pupil's medical condition, where appropriate;
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions;
- Providing supply teachers with appropriate information about the policy and relevant pupils; and
- Developing and monitoring individual healthcare plans (IHCPs).

The named person with responsibility for implementing this policy is the Deputy Head (Staff & Student Development).

2. Legislation and guidance

This policy reflects the requirements of the [Education Act 1996](#) and [DfE \(2013\) 'Ensuring a good education for children who cannot attend school because of health needs'](#) and [DfE \(2015\) 'Supporting pupils at school with medical conditions'](#) as well as [The Equality Act 2010](#) and the [Data Protection Act 2018](#).

This policy also meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on Governing Boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education's statutory guidance: [Supporting pupils at school with medical conditions](#).

This policy also complies with our funding agreement and articles of association.

3. Definitions

3.1 Children who are unable to attend school as a result of their medical needs may include those with:

- Physical health issues;
- Physical injuries;
- Mental health problems, including anxiety issues;
- Emotional difficulties or school refusal;
- Progressive conditions; and
- Terminal illnesses.

3.2 Children who are unable to attend mainstream education for health reasons may attend any of the following:

- Hospital school: a special school within a hospital setting where education is provided to give continuity whilst the child is receiving treatment;
- Home tuition: many LAs have home tuition services that act as a communication channel between schools and pupils on occasions where pupils are too ill to attend school and are receiving specialist medical treatment; and
- Medical Pupil Referral Units (PRUs): these are LA establishments that provide education for children unable to attend their registered school due to their medical needs.

3.3 Children who are able to attend mainstream education with medical conditions may include those with:

- Physical or mental health issues;
- Long-term and complex medical conditions that may require ongoing support, medicines or care while at school to help them manage their condition and keep them well;
- Conditions which may require monitoring and interventions in emergency circumstances; and

Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010.

4. Roles and Responsibilities

The School aims to ensure that all children who are unable to attend school due to medical needs, and who would not receive suitable education without such provision, continue to have access to as much education as their medical condition allows, to enable them to reach their full potential.

Due to the nature of their health needs, some children may be admitted to hospital or placed in alternative forms of education provision. The School recognises that, whenever possible, pupils should receive their education within our School and the aim of the provision will be to reintegrate pupils back into School as soon as they are well enough.

The School understands that it has a continuing role in a pupil's education whilst they are not attending the School and will work with the relevant professionals, healthcare partners and families to ensure that all children with medical needs receive the right level of support to enable them to maintain links with their education.

The School aims to ensure that all students who can attend School with medical conditions receive appropriate support allowing them to play a full and active role in school life, remain healthy, have full access to education (including school trips and physical education) and achieve their academic potential.

There are also social and emotional implications associated with medical conditions. Students with medical conditions can develop emotional disorders, such as self-consciousness, anxiety and depression, and be subject to bullying. This policy aims to minimise the risks of students experiencing these difficulties.

Long-term absences as a result of medical conditions can affect educational attainment, impact integration with peers, and affect wellbeing and emotional health. This policy contains procedures to minimise the impact of long-term absence and effectively manage short-term absence.

The relevant local authority to the student's home address is responsible for arranging suitable full-time education for children who – because of illness or other reasons – would not receive suitable education without such provision. This means that where a child cannot attend school because of health problems, and would not otherwise receive a suitable full-time education, the relevant local authority is responsible for arranging provision and must have regard to the guidance DfE (2013) "Ensuring a good education for children who cannot attend school because of health needs".

4.1 If the School makes arrangements for a child who is unable to attend School or attends School with a medical condition

Initially, the School will attempt to make arrangements to deliver suitable education for children with health needs and medical conditions who cannot attend School or need supported provision.

4.1.1 The Headteacher is responsible for:

- Making sure all staff are aware of this policy and understand their role in its implementation;
- Ensuring that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHCPs), including in contingency and emergency situations. Training may be identified during the development or review of IHCPs and the relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the SENCO and Deputy Headteacher: Staff and Student Development. Training will be kept up to date;
- Making sure that school staff are appropriately insured and aware that they are insured to support pupils in this way;
- Ensuring that healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication; and
- Ensuring that all relevant named staff will be made aware so that they are familiar with this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

4.1.2 The Deputy Headteacher: Staff and Student Development is responsible for:

- Working with the Governing Board to ensure compliance with the relevant statutory duties when supporting pupils with health needs and medical conditions;
- Working collaboratively with parents/carers and other professionals to develop arrangements to meet the best interests of children;
- Ensuring the arrangements put in place to meet pupils' health needs are fully understood by all those involved and acted upon;
- Ensuring, as appropriate for the needs of the child, that a member of the pastoral team (eg. SENCO/Head of Year) is responsible for pupils with healthcare needs and liaises with parents/carers, pupils, the LA, key workers and others involved in the pupil's care;
- Ensuring the support put in place focusses on and meets the needs of individual pupils;
- Liaising with the Facilities and Compliance Manager to arrange appropriate training for staff with responsibility for supporting pupils with health needs;
- Ensuring teachers who support pupils with health needs are provided with suitable information relating to a pupil's medical condition and the possible effect the condition and/or medication taken has on the pupil;
- Reporting to the Governing Board on the effectiveness of the arrangements in place to meet the health needs of pupils;
- Ensuring the relevant LA is notified when a pupil is likely to be away from the school for a significant period of time due to their health needs;
- Supporting the SENCO in overseeing the development of IHCPs;

- Ensuring the school nursing service is notified regarding any pupil 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; and
- Ensuring that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date.

4.1.3 The Head of Year is responsible for:

- Dealing with pupils who are unable to attend School because of medical needs;
- Actively monitoring pupil progress and reintegration into School;
- Supplying pupils' education providers with information about the child's capabilities, progress and outcomes;
- Liaising with the Deputy Headteacher: Curriculum & Data, Assistant Headteacher: Teaching & Learning, SENCO, education providers and parents/carers to determine pupils' programmes of study whilst they are absent from School;
- Keeping pupils informed about school events and encouraging communication with their peers; and
- Providing a link between pupils and their parents/carers, and the relevant LA.

4.1.4 Teachers and support staff are responsible for:

- Understanding confidentiality in respect of pupils' health needs;
- Designing lessons and activities in a way that allows those with health needs to participate fully and ensuring pupils are not excluded from activities that they wish to take part in without a clear evidence-based reason;
- Understanding their role in supporting pupils with health needs and ensuring they attend the required training; and
- Ensuring they are aware of the needs of their pupils through the appropriate and lawful sharing of the individual pupil's health needs.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

4.1.5 Parents/carers are expected to:

- Ensure the regular and punctual attendance of their child at the School where possible;
- Work in partnership with the School to ensure the best possible outcomes for their child;
- Notify the School of the reason for any of their child's absences without delay;
- Provide the School with sufficient and up-to-date information about their child's medical needs;
- Attend meetings to discuss how support for their child should be planned; and
- 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.

4.1.6 Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHCPs. They are also expected to comply with their IHCPs.

4.1.7 School nurses and other healthcare professionals

Our School nursing service will notify the School when a pupil has been identified as having a medical condition that will require support in School. This will be before the pupil starts School, wherever possible. They may also support staff to implement a child's IHCP.

Healthcare professionals, such as GPs and paediatricians, should liaise with the School's nurses and notify them of any pupils identified as having a medical condition.

4.1.8 Managing absences

Parents/carers are advised to contact the School by 9.30 am on the first day their child is unable to attend due to illness.

Absences due to illness will be authorised unless the School has genuine cause for concern about the authenticity of the illness.

The School will provide support to pupils who are absent from School because of illness for a period of less than 15 school days by liaising with the pupil's parents/carers to arrange schoolwork as soon as the pupil is able to cope with it or part-time education at School. The School will give due consideration to which aspects of the curriculum are prioritised in consultation with the pupil, their family and relevant members of staff.

For periods of absence that are expected to last for 15 or more school days, either in one absence or over the course of a school year, the Attendance Officer, in liaison with the SENCO or Deputy Headteacher-Student and Staff Development as appropriate, will notify the relevant LA, who will take responsibility for the pupil and their education.

For hospital admissions, the appointed member of the pastoral team (HOY or SENCO) will liaise with the relevant professionals regarding the programme that should be followed while the pupil is in hospital.

The School will monitor pupil attendance and mark registers to ensure it is clear whether a pupil is, or should be, receiving education otherwise than at school.

The School will only remove a pupil who is unable to attend School because of additional health needs from the School roll where:

- The pupil has been certified by the School's medical officer as unlikely to be in a fit state of health to attend school, before ceasing to be of compulsory school age; and
- Neither the pupil nor their parent/carer has indicated to the School the intention to continue to attend the School, after ceasing to be of compulsory school age.

A pupil unable to attend School because of their health needs will not be removed from the School register without parental consent and appropriate advice from medical professionals.

4.1.9 Support for pupils

Where a pupil has a complex or long-term health issue, the School will discuss the pupil's needs and how these may be best met with the relevant medical professionals, parents/carers and, where appropriate, the pupil.

The School will make reasonable adjustments to accommodate pupils' IHCPs.

Pupils admitted to hospital will receive education as determined appropriate by the medical professionals and hospital tuition team at the hospital concerned.

During a period of absence, the School will work with the provider of the pupil's education to establish and maintain regular communication and effective outcomes.

Whilst a pupil is away from School, the School will work with the appropriate organisation to ensure the pupil can successfully remain in touch with their School.

Where appropriate, the School will provide the pupil's education provider with relevant information, curriculum materials and resources.

To help ensure a pupil with additional health needs is able to attend School following an extended period of absence, the following adaptations will be considered:

- A personalised or part-time timetable, drafted in consultation with Head of Year or other member of the pastoral team;
- Access to additional support in School;
- Online access to the curriculum from home;
- Movement between and to lessons;
- Places to rest at School; and
- Special exam arrangements to manage anxiety or fatigue.

4.1.10 Reintegration

When a pupil is considered well enough to return to School, the School will develop a tailored reintegration plan in collaboration with the relevant professionals.

The School will work with the relevant professionals when reintegration into School is anticipated, to plan for consistent provision during and after the period of education outside School.

As far as possible, the child will be able to access the curriculum and materials that they would have used in School.

If appropriate, the School nurse will be involved in the development of the pupil's reintegration plan and informed of the timeline of the plan by the appointed named member of staff, to ensure they can prepare to offer any appropriate support to the pupil.

The School will consider whether any reasonable adjustments need to be made to provide suitable access to the School and the curriculum for the pupil.

For longer absences, the reintegration plan will be developed near to the pupil's likely date of return, to avoid putting unnecessary pressure on an ill pupil or their parents/carers in the early stages of their absence.

The School is aware that some pupils will need gradual reintegration over a long period of time and will always consult with the pupil, their parents/carers and key staff about concerns, medical issues, timing and the preferred pace of return.

The reintegration plan will include:

- The date for planned reintegration, once known;
- Details of regular meetings to discuss reintegration;
- Details of the named member of staff who has responsibility for the pupil;
- Clearly stated responsibilities of all those involved;
- Details of key contacts;
- A programme of small goals leading up to reintegration; and

- Follow-up procedures.

The School will ensure a welcoming environment.

Following reintegration, the School will support the relevant professionals in seeking feedback from the pupil.

It is essential that all information about pupils with health needs is kept up-to-date.

All teachers, supply and support staff will be provided with access to relevant information, including high-risk health needs, first aiders and emergency procedures appropriately.

Parents/carers will be made aware of their own rights and responsibilities regarding confidentiality and information sharing. To help achieve this, the School will:

- Ensure this policy is easily available and accessible.
- Direct the pupil and their parents/carers to a copy of the GDPR policy which includes information sharing. Consider how friendship groups and peers may be able to assist pupils with health needs.

When a pupil is discharged from hospital or is returning from other education provision, the School will ensure the appropriate information is received to allow for a smooth return to the School. The named member of staff will liaise with the hospital or other tuition service as appropriate.

4.2 If the local authority makes arrangements for a child who cannot attend School

If the School cannot make suitable arrangements, the relevant local authority to the student's home address will become responsible for arranging suitable education for these children.

In cases where the local authority makes arrangements, the School will:

- Work constructively with the local authority, providers, relevant agencies and parents/carers to ensure the best outcomes for the pupil;
- Share information with the local authority and relevant health services as required; and
- Help make sure that the provision offered to the pupil is as effective as possible and that the child can be reintegrated back into school successfully.

When reintegration is anticipated, the School will work with the local authority to:

- Plan for consistent provision during and after the period of education outside the School, allowing the pupil to access the same curriculum and materials that they would have used in School as far as possible;
- Enable the pupil to stay in touch with school life;
- Create individually tailored reintegration plans for each child returning to School; and
- Consider whether any reasonable adjustments need to be made.

5. Being notified that a child has a medical condition

When the School is notified that a pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an IHCP.

The School does not wait for a formal diagnosis before providing support to students. Where a student's medical condition is unclear, or where there is a difference of opinion concerning what support is required, a judgement is made by the Headteacher based on all available evidence (including medical evidence and consultation with parents/carers).

The School will make every effort to ensure that arrangements are put into place as soon as possible, or by the beginning of the relevant term for pupils who are new to our School.

See Appendix 1.

6. Individual Healthcare Plans

The Headteacher has overall responsibility for the development of IHCPs for pupils with medical conditions. This has been delegated to the SENCO.

Development of IHCPs will be through the combination of specialist medical input and that of the school. A summary document outlining the needs of the student and how school activities can be supported will also be sought. Whilst this summary is being developed, the full ICHP document will be circulated to staff on the basis of student timetable and other school activities.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done;
- When; and
- By whom.

Not all pupils with a medical condition will require an IHCP. It will be agreed with a healthcare professional and the parents/carers when an IHCP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the Headteacher will make the final decision.

Plans will be drawn up in partnership with the School, parents/carers and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHCPs will be linked to, or become part of, any statement of special educational needs (SEN) or education, health and care (EHC) plan. If a pupil has SEN but does not have a statement or EHC plan, the SEN will be mentioned in the IHCP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The Deputy Headteacher: Staff and Student Development and SENCO, will consider the following when deciding what information to record on IHCPs:

- 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, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions;
- The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring;
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil'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 pupil's condition and the support required;
- Arrangements for written permission from parents/carers and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil 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 pupil can participate, e.g. risk assessments;

- Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition; and
- What to do in an emergency, including who to contact, and contingency arrangements.

7. Managing medicines

Prescription and non-prescription medicines will only be administered at School:

- When it would be detrimental to the pupil's health or school attendance not to do so; **and**
- Where we have parents/carers' written consent.

The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents/carers.

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents/carers will always be informed.

The School will only accept prescribed medicines that are:

- In-date;
- Labelled; and
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage.

The School will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Pupils will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils and not locked away. Medicines will be returned to parents/carers to arrange for safe disposal when no longer required.

7.1 Controlled drugs

Controlled drugs are prescription medicines that are controlled under the Misuse of Drugs Regulations 2001 and subsequent amendments, such as morphine or methadone.

A pupil who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another pupil to use. If found to have done so, the pupil will be sanctioned in line with the Behaviour for Learning Policy. All other controlled drugs are kept in a secure cupboard in the school office and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

7.2 Pupils managing their own needs

Pupils will be allowed to carry their own epipens and inhalers wherever possible. Where requested by parents/carers, other medicines are stored safely in the school office.

7.3 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHCP, but it is generally not acceptable to:

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary;

- Assume that every pupil with the same condition requires the same treatment;
- Ignore the views of the pupil or their parents/carers;
- Ignore medical evidence or opinion (although this may be challenged);
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHCPs;
- If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- Penalise pupils 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/carers, or otherwise make them feel obliged, to attend School to administer medication or provide medical support to their pupil, including with toileting issues.
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents/carers to accompany their child; and
- Administer, or ask pupils to administer, medicine in school toilets.

8. Emergency medical procedures

Staff will follow the School's normal emergency procedures (for example, calling 999) in the case of a medical emergency. All pupils' IHCPs will clearly set out what constitutes an emergency and will explain what to do.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent/carer arrives, or accompany the pupil to hospital by ambulance.

9. Record keeping of medical conditions

The Governing Board will ensure that written records are kept of all medicine administered to pupils. This is delegated on a day-to-day basis to the Deputy Headteacher: Staff and Student Development. Parents/carers will be informed if their child has been unwell at school.

IHCPs are kept in a readily accessible place which all staff are aware of.

10. Liability and indemnity

The Governing Board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk. The School is a member of Department for Education's risk protection arrangement.

11. Complaints

Parents/carers with a complaint about the School's handling of their child's medical condition should discuss these directly with the Deputy Headteacher: Student and Staff Development in the first instance. If the Deputy Headteacher cannot resolve the matter, they will direct parents/carers to the School's complaints procedure.

12. Monitoring arrangements

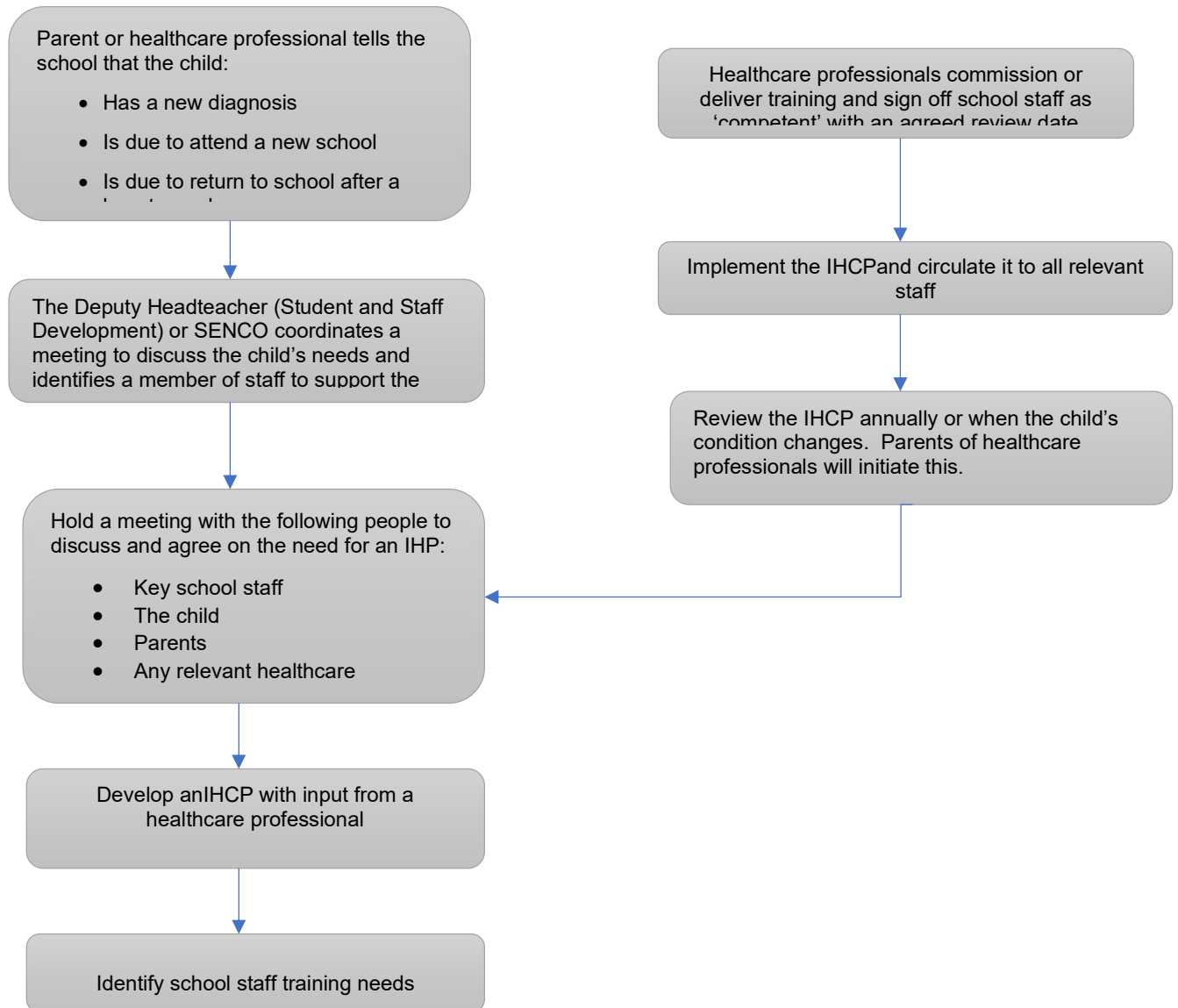
This policy will be reviewed annually by the Deputy Headteacher: Staff and Student Development and the SENCO. At every review, it will be approved by the Welfare and Access Committee on behalf of the Full Governing Board.

13. Links to other policies

This policy links to the following policies:

- Inclusion & Accessibility Action Plan
- Complaints Procedure
- Equality & Diversity Policy
- Health and Safety Policy and Procedures
- Child Protection and Safeguarding Policy
- Special educational needs information report
- SEND Policy
- GDPR Policy
- Behaviour for Learning Policy

Appendix 1: Being notified a child has a medical condition



Appendix 2 - Individual healthcare plan template (IHP summary document may be used in place of and/or in conjunction with this template)

Name of medication, dose, method of administration, when to be taken, side effects, contraindications, administered by/self-administered with/without supervision.

Daily care requirements

Specific support for the student'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

Appendix 3

Sutton Coldfield Grammar School for Girls

Request for child to carry their own medicine

This form must be completed by parent / carer

If staff have any concerns, the request will be discussed with healthcare professionals.

Name of school/setting	Sutton Coldfield Grammar School for Girls
Student's name	
Tutor group	
Address	
Name of medicine	
Procedures to be taken in an emergency	
Contact Information	
Name	
Daytime phone number	

I would like my daughter to keep her medicine with her for use as necessary.

Parent's name (please print) _____

Signed _____

Date _____

If more than one medicine is to be given a separate form should be completed for each one.

Appendix 4 – Parental/Carer agreement for a school to administer medicine template

The school will not give your child medicine unless you complete and sign this form, and the school has a policy that the staff can administer medicine.

Sutton Coldfield Grammar School for Girls medicine administering form

Date for review to be initiated by

Name of child

Date of birth

Group/class/form

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 the school office

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 _____

Appendix 5 - Record of medicine administered to an individual child template

Sutton Coldfield Grammar School for Girls record of medicine administered to an individual child

Name of child	
Date medicine provided by parent	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Staff signature _____

Signature of parent _____

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Appendix 6 - Record of medicine administered to all children

Sutton Coldfield Grammar School for Girls

[illegible]

Appendix 7- Staff training record – administration of medicines

Name of school/setting:

Name:

Type of training received:

Date of training completed:

Training provided by:

Profession and title:

I confirm that (add name of member of staff) _____ has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated by (add name of member of staff) _____.

Trainer's signature _____

Date _____

I confirm that I have received the training detailed above.

Staff signature _____

Date _____

Suggested review date _____

Appendix 8 - 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.

- Your telephone number – 0121 354 1479
- Your name.
- Your location as follows:
Sutton Coldfield Grammar School for Girls
Jockey Rd
Sutton Coldfield
B73 5PT
- The exact location of the patient within the school.
- The name of the child and a brief description of their symptoms.
- The best entrance to use and state that the crew will be met and taken to the patient.

Put a completed copy of this form by the phone.

Appendix 9 - Model letter inviting parents to contribute to individual healthcare plan development

Dear Parent/Carer,

RE: DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting students at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support each student needs and how this will be provided. Individual healthcare plans are developed in partnership with the school, parents/carers, students, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will include add details of team. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I or add name of other staff lead would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely,

SENCO

INITIAL EQUALITY IMPACT ASSESSMENT FORM

Name of policy/activity/project:

Supporting students with medical conditions policy.

Is this a new or an existing policy/activity/project?

Existing

Scope/timescales for project or activity (including review date):

To be reviewed in March 2024

Policy/project lead and Author of Equality Impact Assessment:

Neil Eaton

Outline of main aims of this activity/policy/project:

To provide guidelines for all members of the school community about the school's expectations with regard to supporting students with medical conditions and the management of medicines in schools

Who will benefit/be affected by this policy/activity?

Students, parents and staff of Sutton Coldfield Grammar School for Girls

If an existing policy/activity, do you have any data of use by or impact on different groups which may raise concerns over an equality impact?

No concerns

Does the activity have the potential to impact differently on groups due to a protected characteristic (eg race/ethnicity, gender, transgender, disability, religion & belief, age, sexual orientation, maternity/paternity) for:

(a) Students and members of the community? (eg The Governing Board, students, contractors, visitors, hirers of the premises, agency staff, suppliers etc). Which groups are likely to be affected?

No

(b) Employees?

No

Does this activity make a positive contribution to the School's general or specific duties under the Equality Act 2010? If yes, please detail.

Yes – the Policy applies to all students equally

Having reviewed the potential impact of the policy/activity listed above, **I believe a full impact assessment is required / NOT required** (delete as applicable with justification below)

Full impact assessment is not required

Justification: The policy is of equal benefit to all students, regardless of gender, race, religion, maternity/paternity, sexual orientation etc.

Name : N. Eaton Date : March 2024