



# **Oakgrove School**

**Supporting Children at School with Medical  
Conditions**

**OAKGROVE SCHOOL**  
**Supporting Children at School with Medical Conditions**

**ADOPTION AND AMENDMENTS TO SUPPORTING CHILDREN AT SCHOOL WITH MEDICAL CONDITIONS POLICY**

Written September 2014

| Section                  | Governors' Meeting or Committee     |
|--------------------------|-------------------------------------|
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<sup>1</sup> Admissions, Discipline & Welfare Committee

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# OAKGROVE SCHOOL

## Supporting Children at School with Medical Conditions

### Introduction

From 1 September 2014 Oakgrove School is under a duty to make arrangements for supporting children with medical conditions. This policy sets out what those arrangements are. This policy follows the guidance published by the DfE in April 2014 'Supporting children at school with medical conditions'.

This policy is restricted to children with an ongoing medical condition for which parent/carers have provided proof to the school. The separate First Aid Policy covers minor, short term and one-off medical problems.

The school will maintain a focus on each individual child with a medical condition and seeks to give parents/carers and children's confidence in the school's ability to provide effective support for medical conditions in school.

The school will always aim to:

- have a good understanding of how medical conditions impact on a child's ability to learn
- increase the child's confidence
- promote self-care

Procedure to be followed whenever Oakgrove School is notified that a child has a medical condition

- Health coordinator to be informed
- Individual Health Care Plan (IHP) to be agreed with parent/carer/child/School health coordinator/Learning Co-ordinator
- IHP information recorded through Sims, accessible by all staff but in some cases on a need to know basis
- Individual procedures for life-threatening conditions included on IHP's and available to all staff
- Staff are made aware of **all medical conditions** (common and ongoing) within school via Sims as parents/carers input details or the School Health Coordinator updates this. All IHP's are linked to the Sims profiles.
- Once parents/carers have contacted school, arrangements are made immediately and a care plan is put in place within a week.

### Individual healthcare plans

IHPs exist to document a child's medical needs and provision being made for those needs. These are written with input from all the relevant parties including the school health coordinator, Heads of Year (Class teacher in the Primary and Nursery), parent/carer and child.

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IHPs will be developed with child's best interests in mind and will ensure that the school assesses and manages risks to the child's education, health and social well-being and minimises disruption.

IHPs will be reviewed annually or earlier if evidence is presented that the child's needs have changed.

The following Information will be recorded on Oakgrove IHPs:

- the medical condition, its triggers, signs, symptoms and treatments;
- the child'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 child's educational, social and emotional needs – which might include: 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, (some children will be able to take responsibility for their own health needs), including in emergencies. If a child 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 child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable;
- who in the school needs to be aware of the child's condition and the support required;
- arrangements for written permission from parents/carers and the Headteacher (Headteacher (Primary and Nursery) in the Primary and Nursery), for medication to be administered by a member of staff, or self-administered by the child 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. Risk assessments; can be found on the '**Medication consent form**'
- where confidentiality issues are raised by the parent/carer/child, the designated individuals to be entrusted with information about the child's condition; and
- what to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

#### **Student's role in managing own medical needs**

children may be competent to manage their own medical needs and medicines, although this is unlikely to be the case in the Primary and Nursery.

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***Information regarding 'self-administration' can be found on the 'Medication Consent Form'***

children will be positively encouraged to take responsibility after discussion with parents/carers and the School health coordinator and this will be reflected in IHPs. Where a child is reluctant to take on this responsibility, the school will support the child to reach the level of responsibility agreed and documented in the IHP. No child will be forced to self-administer.

Where possible children will carry their own medicines or devices or be able to access them quickly.

No child will be expected to take on responsibility until they are ready for it and appropriate supervision will still be given if needed.

**Managing Medicines on School Premises: (See 'Administration of Medicines by Staff' policy)**

#### **Record keeping**

Written records are kept of all medicines administered to children on Medical Tracker. In the Primary and Nursery, these records are held in the school office, though the medicines may be administered elsewhere.

#### **Procedures for emergency situations**

All staff know what action to take in the event of a medical emergency. This includes:

- staff contacting emergency services through reception. (School health coordinator will contact directly.)
- in the Primary and Nursery, emergency services will be contacted through the school office or by a member of staff directly.
  
- staff are able to contact the School health coordinator directly or through reception / child services.  
If a child needs to be taken to hospital, parents/carers will be contacted. In certain circumstances an adult member of Oakgrove School will accompany the child to hospital and stay with them until a parent/carer arrives.
- training is refreshed for all staff in 'procedures' during September training days before children return from the holidays.
  
- any specific procedures recorded in IHP's.
  
- If a medical emergency occurs during a school trip or sporting activity, the lead member of staff will assess the emergency, give emergency medical attention as necessary (as recorded in the IHP). If required contact is made to the emergency services direct. The Lead teacher will contact the 'named personnel' on the 'trips / activities list', which will be carried with them at all times along with a copy of the IHP. Parents/Carers will be informed and on return from the trip, a report will be submitted regarding the medical emergency and a meeting held with parents/carers, the school health coordinator, the trips leader and a member of SLT, to review the practice undertaken.

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### **Day trips, visits and sporting / other activities**

Where possible Oakgrove School will offer flexibility and make reasonable adjustments so that children with medical conditions can take part.

- Risk assessments are carried out by Oakgrove School prior to any 'out-of-school' visit and medical conditions are considered during this process. Factors this school considers include: how all children will be able to access the activities proposed, how routine and emergency medication will be stored and administered, and where help can be obtained during 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 children start any work experience or off-site educational placement. It is the School's responsibility to ensure that the placement is suitable, including travel to and from the venue for the child. Permission is sought from both the child and the parent/carer before any medical information is shared with an employer or other education provider.
- Oakgrove School is committed to reducing the likelihood of medical emergencies by identifying and reducing triggers both at school and on out-of-school visits.
- Oakgrove School ensures the needs of all children with medical conditions are adequately considered to ensure they have full access to extended school activities such as school discos, homework club, all extra-curricular activities, fixtures, school productions, child voice and residential visits.
- All staff are aware of the potential social problems that children 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.
- The school may meet parents/carers as part of preparing to meet the child's needs on a trip. Where possible the school will arrange adjustments to the programme, accommodation or food provision to meet a child's needs.

The school uses IHPs to identify individual children who are sensitive to particular triggers.

- The school reviews medical emergencies and incidents to see how they could have been avoided. Appropriate changes to this school's policy and procedures are implemented after each review.

### **Children with health needs that cannot attend school**

- Oakgrove School will support the child and the family to ensure the child receives a full education, this may change over time based on the medical needs of the child.
- Where full-time education would not be in the best interests of a child because of reasons relating to their physical or mental health, Oakgrove will support a part-time education with particular focus on the core subjects of English, Maths and Science.
- Where a health need (either physical or medical) is creating a barrier to child attending school, the school will work in partnership with the Local Authority to meet the child's educational needs.

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- Oakgrove School will make the necessary referrals to agencies and work with these agencies to support the continued education of a child with health needs. Services in the Local Authority may include Special Educational Needs and Disability Services (SEND), Child and Adolescent Mental Health Services (CAMHS), Children's Social Services, the intervention and inclusion service, educational psychologists, school nurses and NHS England. This will be a tailored approach to meet the individual needs of the child. There will be timely reviews to make any necessary adjustments to the support and education provided.
- Where reintegration back into school is required, Oakgrove school will work with the parents/carers, the child and agencies to ensure a planned approach is taken for a gradual return and provide additional support as required.

#### **Good practice at Oakgrove School:**

At Oakgrove School we will:

- make sure children have easy access to their inhalers and medication and can administer their medication when and where necessary;
- not assume that every child with the same condition requires the same treatment;
- listen to the views of the child and/or their parents/carers and to medical evidence or opinion, (although this may be challenged);
- not send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- accompany a child to the medical room (if they become ill or send them with someone appropriate. In the Primary and Nursery, a member of staff from Oakgrove School will remain with the ill child until they are handed over to someone appropriate, ill children will never be left alone;
- be understanding of a child's attendance record if their absences are related to a medical condition and not penalise them for this eg; hospital appointments;
- allow children to drink, eat, take toilet breaks or other breaks whenever they need to in order to manage their medical condition effectively;
- support parents/carers with their child's medical condition and not expect them to attend school to administer medication or provide medical support for their child, including toileting issues as the school will support their child's medical needs.
- We will encourage children with medical conditions to participate in any aspect of school life, including school trips and not create barriers to non-participation.

#### **Policy Implementation**

- The Headteacher has overall responsibility for the implementation of this policy.
- The school is committed to making sure that all relevant staff will be made aware of the child's condition. Training is given to all staff in September and new staff when they join the school. All cover supervisors and supply staff are made aware of the medical conditions policy.

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- Information of Health Care Plans are kept in the Medical Folder on the Shared Google Drive. IHP's are also linked to the specific children Sims profile.
- The school has arrangements in place in case of staff absence or staff turnover to ensure someone is always available. In the case of the School health coordinator being absent from school, trained first aiders will be called to any incident. In the Primary and Nursery, trained first aiders will be called to any incident as the first point of contact. Staff dealing with the medical emergency will call reception/child services, who will contact the relevant first aider. If an ambulance is required, reception (the School Office in the Primary and Nursery) will make the call at this point.
- The school will make sure risk assessments for school visits, holidays, and other school activities outside of the normal timetable include provision for children with medical conditions. Risk assessments for trips will be overseen by the Senior Assistant Head Teacher Educational Visits Co-ordinator.
- The school will monitor individual healthcare plans. These will be reviewed annually. Meanwhile, if there are changes to the child's medical condition, an interim meeting will be held to review the current plan.

#### **The Roles of those involved in providing support for children with medical conditions**

##### **The Governing Body must:**

- make arrangements to support children with medical needs, including making sure a policy is developed and implemented
- ensure that sufficient staff at Oakgrove School have received suitable training and are competent before they take on responsibility to support children with medical conditions
- ensure staff have access to information about children medical conditions and training materials

##### **The Headteacher must:**

- ensure policy is developed and adequately implemented with partners
- make sure all staff are aware of the policy and understand their role in implementation
- ensure all staff who need to know are aware of a particular child's medical condition
- ensure sufficient staff are appropriately trained
- take overall responsibility for the development of Individual Healthcare Plans
- make sure staff are adequately insured and made aware of cover.
- make sure the health coordinator is aware of children requiring support.

##### **Any member of School Staff:**

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- may be asked to provide support to children with medical conditions, including the administering of medicines, although they cannot be required to do so
- should take into account the needs of children with medical conditions that they teach, although administering medicines is not part of a teacher's professional duties
- should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions
- should know what to do and respond accordingly when they become aware that a child with a medical condition needs help.

#### **The School Health coordinator:**

- The School has an employed health coordinator and also has access to school nursing services to support children with medical conditions and to provide training for staff.
- The health coordinator is responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Where possible identification of need should take place before a child starts at Oakgrove School.
- The school nursing services will support staff on implementing a child's individual healthcare plan and provide advice and liaison if required.
- The school health coordinator will liaise with lead clinicians locally on appropriate support for the child and associated staff training needs.

#### **Other Healthcare Professionals should:**

- notify the school health coordinator of children requiring support.
- provide advice on developing IHPs

#### **children should:**

- provide information about how their condition affects them
- be fully involved in discussions and contribute to their IHP.

#### **Parents/Carers should:**

- provide school with sufficient up to date information
- be involved in development and review of IHP's
- should carry out any action they agreed to as part of implementation of IHP.

#### **The Local Authority must:**

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- promote co-operation between relevant partners
- **provide alternative education for children aged five to 16** who are at home sick for more than 15 school days.

#### **Clinical Commissioning Groups:**

- are responsible for commissioning other healthcare professionals such as specialist nurses
- must ensure that commissioning is responsive to children's needs and that health services can cooperate with schools

#### **Ofsted**

- The inspection framework places clear emphasis on meeting needs of disabled children and children with SEN. Inspectors are briefed to consider children with medical conditions alongside these groups and to report on how well their needs are being met.

#### **Staff Training**

The school has a responsibility to ensure staff are properly trained and any member of staff providing support to a child with medical needs will receive suitable training.

Staff must not give prescription medicines or undertake health care procedures without appropriate training.

Staff will be supported in carrying out their role in supporting children with medical conditions by:

- receiving copies of up to date information at the first staff meeting of the school year and before Health Care Plans are distributed to parents/carers
- having access to information of children with common medical conditions on the Google drive
- having access to IHP's on Sims (linked documents)
- having scheduled medical condition training and information dissemination by the School health coordinator / school nursing services
- key principles of the policy being displayed in several prominent staff areas at this school
- informing all supply and temporary staff of the policy and their responsibilities.
- having their training requirements assessed through needs arising from Pastoral 'child support meetings'(including SEN and disabilities).
- having necessary training arranged through the Local Authority for people handling, first aid training, paediatric first aid training, manual handling etc. Training will be arranged through organisations when a need arises in a care plan or when all staff undertake common medical conditions training, such as use of epi-pens
- the Head teacher being responsible for ensuring that sufficient staff are suitably trained in supporting children with medical conditions.

#### **Insurance**

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The Governing Body ensures that the appropriate level of insurance is in place and appropriately reflects the level of risk.

**Complaints handling**

Any complaint in relation to this policy or the school's implementation of it should be raised in accordance with the school's Complaint's policy.

**Review Frequency**

This policy will be reviewed annually.