



**Mount Pleasant Federation of Schools
Supporting Children with Medical Need
Autumn 2024**



Name of Policy:	Supporting Children with Medical Needs		
Statutory Policy	Yes	Non Statutory Policy	
Date of Ratification	11.12.24		
Date of Review	Autumn 25		

To be read in conjunction with the following policies and documents	
Policy/Document	Appendix
Children’s and Family Act 2014	Our Ethos and Vision
Equalities and Diversity Policy	Individual Health Care Plans (IHCPs)
Intimate Care Policy	Medical Needs Teaching flow chart
Equality Act 2010	
Southampton City Council Guide for Pupils with Medical Needs	
DfE Supporting Pupils at school with Medical Conditions	

Our school policies are designed to meet with our information and communication sharing protocols in that they should be ‘meaningful and manageable’. All policies have a similar format, designed to fulfil a specific purpose and answer a simple question:

- **Rationale – why do we need this policy?**
- **Aim – what is the main purpose of this policy?**
- **Objective – how will we achieve the aim?**
- **Proactive: how do we work proactively, planning and designing our work?**
- **Reactive: how do we react to situations that are new or when change has occurred?**
- **Best practice: when working most effectively, what does our policy look, sound and feel like?**
- **Who to speak to regarding this policy: Which members of staff, teams or governors are linked to this policy?**

Policies are supported by:

- **Other school policies**
- **Government documents**
- **Local Authority documents**
- **Our school produced documents**

This Policy relates to Article 2, 3, 12 and 28, Convention on the Rights of the Child



Rationale:

We believe that 'the child is at the centre of all that we do' (Our Ethos and Vision). Both of our schools are committed to the principle of inclusion. In an environment where our children's personal story, culture and history matter, we recognise that some children require provision which is 'additional to' and 'different' from what is provided for other children of the same age. A child is considered to have a medical condition if their physical or mental health needs are such that, without reasonable adjustments, their attendance at school or access to the curriculum and other school activities would be compromised

The purpose of the Supporting Children with Medical Needs Policy is to show how we follow the rules and laws and describe how we provide and support children with medical needs.

Aim:

Our overall aims ensure that:

- The dignity, rights and wellbeing of children are safeguarded
- Children with medical needs are not discriminated against
- Medical care is carried out by staff, in line with any agreed plans
- Making staff aware of pupils' conditions, where appropriate
- Parents are assured that staff are knowledgeable about medical care and the needs of their children are provided for
- Developing and monitoring individual healthcare plans (IHCPs)
- Staff carrying out medical care do so within the guidelines
 - Health and safety
 - Manual handling
 - Safeguarding

Objective:

To realise our aim, we work to:

- Co-produce plans and procedures with all stakeholders
- Build effective partnerships between home and school
- Include all children
- Adapt provision
- Provide routines to allow for medical care to take place
- Train our teaching staff in relevant procedures

Proactive:

At Mount Pleasant Federation of Schools, co- production with parent to develop a plan suited to the child's personal needs is essential. The process will look as follows:

Seeking parental permission:

- For children who need routine or occasional medical care, parents will be asked to sign a consent form
- For children with more complex needs, an Individual Health Care Plan (IHCP) will be created in consultation with parents

Creating an Individual Health Care Plan (IHCP):

- Are co-produced between parents, school and child (when possible) and any health professionals
- Plans will be developed with the child's best interests in mind and will set out:
 - What needs to be done
 - When

- By whom
- The school will work with parents and take their preferences on board to make the process of medical care as comfortable as possible
- Information will be shared with parents as needed to ensure a consistent approach
- Parents will also need to share relevant information regarding medical care
- The plan will be reviewed annually or earlier if there is evidence that the pupil's needs have changed

Training of staff:

- Training in the specific types of medical care they undertake
- Up to date First Aid training for all First Aiders
- Regular safeguarding training
- Awareness of medical needs throughout school if necessary

Managing Medicines:

- Prescription and non-prescription medicines will only be administered at school:
 - When it would be detrimental to the child's health or school attendance no to do so and
 - Where we have parents' written consent
- Children under 16 will not be given medicine containing aspirin unless prescribed by a doctor
- Anyone giving medicine will first check the maximum dosages and when the previous dosage was taken
- Parents will always be informed
- The school will only accept prescribed medicines that are:
 - In-date
 - Labelled
 - Provided in the original container, as dispensed by the pharmacist; and include instructions for administration, dosage and storage
- All medicines will be stored safely either in a drawer in a child's classroom, or in the medical cupboard in the school office
- Medicines will be returned to parents to arrange for safe disposal when no longer required

Reactive:

At times, we will need to work reactively to meet medical needs of the child. This support may look like:

- When a new medical diagnosis is given
- Arrange support and a plan within two weeks of notification of admission to hospital or diagnosis
- Transitional arrangements between schools, for example:
 - Hospital Schools
- Consultation and liaison between external health professionals
- Support and arrangements for a formal reintegration plan back into school, for example:
 - Reduced timetable
 - Occasional medication form

Best Practice:

We create a welcoming environment for all our children. As a school we:

- Have strong relationships with our families
- Build open and honest relationships between our parents and staff
- Have developed a strong induction process for new children
- Explore the Protected Characteristics through our WISE curriculum
- Have a shared understanding of the Protected Characteristics
- Are a Rights Respecting School

Who to speak to regarding this policy:

If you are concerned that this policy applies to your child, or you are concerned about your child's education contact:

1. Your child's class teacher
2. Look at the Intimate Care Policy and other related policies on our website
3. Pastoral Lead Officer, Miss Naomi Hanspal
4. The SENDCo, Mrs Helen Brennan
5. Head of Inclusion, Miss Amy Warbey
6. SEND Governor, Miss Hayley Sheath
7. Southampton City Council Guidance for pupils with medical needs: [SCC Guidance Pupils with Medical Needs V3 2024-25 FINAL \(1\).pdf](#)