



Sidcot  
Live Adventurously

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**Supporting Students with Medical Conditions and Disabilities**

**Policy Number: 4.2**

**Date: September 2024**

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## **1. Introduction**

1.1 The Governing Body and Senior Leadership Team of Sidcot School fully recognise their responsibilities to support students with medical conditions and disabilities.

1.2 This policy sets out to clarify the management, care and support students with medical conditions, and disabilities whilst at Sidcot School.

## **2. Aims**

2.1 In keeping with the Quaker ethos and philosophy, and its obligations as a responsible educational establishment Sidcot School aims to foster an environment that supports the integration and wellbeing of all students with medical conditions, and disabilities.

2.2 Sidcot School aims to support all students with medical conditions, and disabilities to achieve their very best in all areas of the school life and the curriculum.

## **3. Objectives of the Policy**

- To outline the commitment of the School in supporting students with medical conditions and disabilities, so that as far as possible, they have full access to education, including physical education and educational visits, After School Care, Arts Centre events and Boarding, thereby supporting social inclusion for all students;
- To comply fully with the Equality Act 2010 for students who may have disabilities or other medical conditions
- To ensure full integration, equal treatment and an absence of discrimination for all students
- To ensure that students are supported to reach their academic potential
- To respond sensitively, discreetly and quickly to situations where a child with a medical condition or disability requires support
- To foster good communication between students, parents, educational guardians, school and healthcare professionals to develop and manage a holistic, individual healthcare plans that fully identify and support the needs of students with medical conditions or disabilities
- To ensure that all school staff directly involved in the care of children with medical conditions or disabilities are fully informed and adequately trained by a professional, in order to deliver care/support or administer prescribed medication, with clear arrangements for training of new and supply staff
- To maintain, monitor and review appropriate records to ensure best practice
- To help children be in the best possible state of health

## **4. Scope**

4.1 This policy applies to all children receiving education at Sidcot School, EYFS, the Junior School and Senior school (including sixth form and boarding).

4.2 Other students will have medical conditions or disabilities which, if not properly managed, could limit their access to education. Such students are regarded as having medical needs.

Most children with medical needs are able to attend school regularly and, with some support from the School, can take part in the full range of school activities.

4.3 Support for students may be wide ranging, including: administering medication, making reasonable adjustments and considering social and emotional implications of the condition on the student's wellbeing. Some children with medical conditions may be considered disabled under the definition set out in the Equality Act 2010. Where this is the case, the governing body complies with duties under that Act. Some children may also present with special educational needs (SEN). In this instance the school complies with the requirements as outlined in the SEND Code of Practice 2014. Please refer to policies 6.4.

**4.4 The Term Medical conditions** includes all chronic health conditions including, but not limited to Diabetes, Epilepsy, and Cystic Fibrosis (for Asthma see Asthma Policy 4.3, for Anaphylaxis see medical policy 4.1)

**4.5 Disabilities** includes all disabilities from birth or occurring from illness or accident.

4.6 This policy applies wherever staff or volunteers are working with students, even where this is away from the school, for example on an educational visit.

In this policy; the term "guardian" refers to educational guardian.

The term parent refers to all those with parental responsibility for the child

The terms 'child', 'children', and 'student' may be used interchangeably to refer to all those in our care.

4.7 This policy is available on the school website, a hard copy can be provided free of charge from Sidcot School in additional formats if required

## **5. Admissions**

Please refer to the admissions policy 3.3.

5.1 Parents must inform the School when submitting a Registration Form of any health conditions or disabilities relating to their child which may affect their child's performance in the admissions process, and their ability to fully participate in the education provided by the School.

5.2 When the School becomes aware of a student's medical condition or disability, a member of the admissions team will consult with the school nurses, teachers, and boarding house staff, as appropriate, and with parents, to consider what reasonable adjustments could be made to enable a student, if he/she is able, to satisfy the admission requirements.

5.3 Although Sidcot School will always look at ways to support a student with a medical condition or disability, there may be occasions when the school is unable to reasonably make adjustment or safely meet a child's individual needs. If, after due consideration, the School considers that it cannot make suitable provision, or appropriately meet the student's needs, parents will be informed of its decision and the reasons for it.

## **6. Parents**

6.1 Following the admission acceptance, the School will discuss the information provided in greater detail with parents/guardians and, if necessary, the School will seek advice and guidance from a range of sources, including the child's GP and other healthcare professionals, to support the development of a healthcare plan. It is very important that school and parents/guardians work in partnership, in an open and transparent manner, so that the students' needs can be most effectively met within the school environment.

6.2 Parents and guardians are expected to notify the School of any new diagnoses and treatment plan in order that arrangements to support the students' needs in school can be put in place. Parents and guardians are also expected to update the School if a student's condition or care requirements change.

6.3 Where a student is undergoing medical investigation, it is not necessary to wait for a formal diagnosis before providing support to a student. In cases where a child's medical condition is unclear, or where there is a difference of opinion, support will be based on medical evidence and consultation with the parent/guardian. It is essential for the right support to be put in place.

6.4 All student medical conditions, allergies and intolerances (unless deemed confidential) are listed and available for all staff working with students, supporting the management of health and wellbeing within school.

## **7. Absence from School**

7.1 Sidcot School will do all it can, in partnership with the child and parents/guardians, to limit the impact on the child's educational attainment and emotional and general wellbeing when they have periods of absence from school due to their health needs.

7.2 Where a student is not well enough to attend school, but is able to continue studies at home, under parent/guardian supervision, teachers will provide resources and work to support the student's ongoing studies to the best of the school's abilities.

7.3 The School will work with parents/guardians and healthcare professionals to support a smooth reintegration back into school when students are ready to return, this may include a well-planned, supportive phased return.

7.4 There may be times when students with health needs are away from school for medical appointments (which can often be lengthy). In such cases, students will be supported to ensure that they do not fall behind in their studies due to these absences.

## **8. Individual Healthcare Plans**

8.1 The care of students with disabilities or specific health conditions, is tailored to the child's individual requirements as set out in their individual healthcare plan.

8.2 Students with a diagnosis of Asthma have an individualised asthma plan using the 'Asthma + Lung UK' care plan, which will be completed with parents/guardians.

8.3 Students with a diagnosis of anaphylaxis will have an individual care plan, specific to the type of auto injector they use, ie EpiPen, Jext or Emerade using 'The British Society for Allergy and Clinical Immunology' allergy action plan.

8.4 Individual healthcare plans provide clarity about what needs to be done, when and by whom, to support a student with a chronic medical condition or disability that may require a moderate level of care and/or support, where the medical condition is long-term and/or complex, where their condition may fluctuate or where there is a high risk that emergency intervention may be needed.

8.5 Not all children with a medical diagnosis will require an individual healthcare plan.

8.6 The care of students with chronic health conditions or disabilities is managed by the health centre, under direction by teams from the NHS or private hospitals, who will coordinate and oversee the development and implementation of an individual healthcare plan.

8.7 Where full information is provided prior to a student starting at Sidcot School, and parents/healthcare professionals can liaise in the time frame available, a student's individual healthcare plan will be made available and implemented for a student when they start at the School. There are occasions where information from healthcare professionals or parents may be delayed, in which case where possible an interim healthcare plan will be put into operation with the support of the student's GP (for boarding students from overseas with the support of the School Doctor. If there is not enough information to ensure the safety and wellbeing of the student in school, there will need to be a delay in their start date to give time to put the individual healthcare plan into place.

8.8 Individual healthcare plans (and their review) may be initiated, in consultation with the parent or guardian, by a member of school staff or a healthcare professional involved in providing care to the student.

8.9 The Health Centre Nursing team will co-ordinate and oversee the development and implementation of the individual healthcare plan in partnership with school staff, parents, the student (whenever appropriate) and healthcare professionals.

8.10 Wherever possible, students with medical conditions are fully involved in discussions about their medical support needs and contribute as much as possible to the development of their individual healthcare plan. The School recognises that students with medical conditions are best placed to provide information about how their condition affects them and how they would like their care and treatment to be managed.

8.11 A student's individual healthcare plan outlines diagnosis, medication and treatment, special considerations; including specific support for the student's educational, social and emotional needs, precautions or management strategies; identifying the level of support needed (some children will be able to take responsibility for their own health needs), activity restrictions, triggers or warning signs (if applicable) and an agreed action plan and emergency procedures.

8.14 After discussion with parents/guardians and/or healthcare professionals, students with specific medical conditions, who are competent, are encouraged to take responsibility for

managing their own medication and medical procedures. This is reflected within the individual healthcare plans. Please refer to medical policy 4.1 for details of how competency is assessed, and medicine is administered, stored and recorded.

8.15 Students who can take their medication or manage procedures themselves will receive an appropriate level of supervision from the School Nurse team. If it is not appropriate for a child to self-manage, then the School Nurse team, or other relevant staff (with appropriate training) will help to administer medicines and manage procedures for them in line with the student's individual healthcare plan.

8.16 If a student refuses to take medication or carry out a necessary treatment procedure as per their individual healthcare plan, staff should not force them to do so. Parents/guardians (and the School Doctors for boarding students) should be informed as soon as possible so that alternative options can be considered.

8.17 For further guidance on medication management and record keeping in school please refer to the School's Medical Policy

8.18 Where the student has a health condition or disability which requires an individual healthcare plan, and also has special educational needs identified in a statement of SEN arrangements, both plans are linked to ensure tailored support across the curriculum. The Nursing team and SENCO will work in partnership to support the needs of the child.

8.19 For further guidance on medication management and record keeping in school please refer to the School's Medical Policy

Healthcare plans undergo regular review which is at least annually, please refer to a sample health plan – [Appendix A: Sidcot School Individual Healthcare Plan](#)

## **9. Confidentiality**

9.1 The criteria for circulation of health information and the student's individual healthcare plan are agreed with the student (where he/she has the necessary competence as defined in the School Medical policy and parents/guardians). In the case of overseas students, the student's educational guardian may be the first point of contact, with the students' consent, particularly where the parents' first language is not English. In addition, endeavours will be made to advise the parents of medical issues.

9.2 Whilst preserving confidentiality, where agreed, individual healthcare plans will be made accessible to all staff who need to refer to them in order to effectively support the student. If the student or parents/guardians withhold information from staff which affects the management of the child's care, those staff members are unable to provide medical assistance. Procedures need to be put in place to ensure the student's care needs are adequately met. Where school staff are unable to meet these needs, parents/guardians may need to make care provision. The same arrangements for sharing information will apply for supply staff who work with students with medical conditions

## **10. Intimate or Invasive Treatment**

10.1 Staff will do all that they can to protect the dignity of students with medical conditions or disabilities, even in emergencies.

10.2 The school nurse will carry out treatment required for the student if it is within their remit, during opening hours. If treatment is required out of hours, boarding staff will be trained appropriately.

## **11. Staff Training**

11.1 Relevant (need to know) staff will be aware of individual students' medical conditions and the individual healthcare plan that is in place to support them, including what to do in an emergency.

11.2 All staff involved in the provision of care and support to students with medical conditions and requiring treatment/medication will receive full training from a School Nurse or other healthcare professional and be assessed as competent prior to delivering treatment or medication as per a student's individual healthcare plan.

11.3 A First Aid certificate does not constitute appropriate training in supporting students with medical needs.

[See Appendix B: Training Record – Treatment and Administration of Medicines](#)

11.4 Where there are staff changes/staff turnover, the school nursing team will oversee a smooth transition of care and support, ensuring staff are fully trained to meet the individual student's needs.

11.5 All staff at Sidcot School receive annual Asthma and anaphylaxis training (please refer to the Asthma policy 4.3 and medical policy 4.1)

11.6 Training of health care staff to support the individual needs of students with medical conditions is carried out by healthcare professionals who manage the student's condition, together with parents who care for the child on a daily basis.

## **12. Offsite Activities:**

### **Sports fixtures, Day and Overnight Educational Visits & Excursions**

12.1 All students are encouraged to participate in all school activities, within their own abilities and where necessary, with reasonable adjustments, unless medical evidence states that this is not possible.

12.2 School staff will meet with/communicate with the student, parent/guardians, the school nursing team and other health care professionals where relevant, prior to any offsite activity, to make a plan for any extra care requirements that may be needed to support a student with a medical condition to participate safely and as fully as possible in the offsite activity.



12.3 Information and decisions will be recorded in the student's individual healthcare plan, which may accompany the child on any out of school activities (where appropriate and with consent).

12.4 Risk assessments are carried out on all out of school activities, and any arrangement to support the care of students with medical conditions or disabilities are individually risk assessed.

12.5 Consideration will be given to the staffing/trained adult presence for offsite and overnight excursions to ensure the needs of a student with disabilities or medical conditions are fully met.

### **13. Unacceptable Practice**

It is not acceptable to:

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- Assume that every child with the same condition requires the same treatment;
- Ignore the views of the child or their parents/guardians; or ignore medical evidence or opinion, (although this may be challenged);
- Send children with medical conditions or disabilities home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- If the child becomes ill and it is unsafe to leave them, send them to the school office or Health Centre unaccompanied or with someone unsuitable;
- Penalise children for their attendance record if their absences are related to their medical condition eg. Hospital appointments;
- Prevent students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition or disability effectively;
- Require parents/guardians, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs;
- Prevent children from participating, or create unnecessary barriers to children participating, in any aspect of school life, including school trips, eg by requiring parents/guardians to accompany the child.

### **14. Liability and Indemnity**

14.1 The School's insurance provides full indemnity cover for School Nurses and staff providing medical intervention, support and administering medication to students with medical conditions and disabilities.

### **15. Complaints**

15.1 Should parents/guardians or students be dissatisfied with the support provided they may raise the complaint with the Health Centre or head of year, and may access the complaints policy 2.6.

### **16. Review**

This policy will be reviewed annually, or sooner if incident, practice or changes to policy legislation or guidance so required by the lead school nurse, in conjunction with the Deputy Head Pastoral and by the Board of Governors at their Annual Safeguarding Review

## 17. References

The Children and Families Act 2014  
 The Equality Act 2010  
 Supporting pupils at school with medical conditions December 2017  
 Health Conditions in Schools Alliance <http://medicalconditionsatschool.org.uk/>  
 Keeping Children Safe in Education (September 2023)  
 Special Educational Needs and Disability Code of Practice 2014  
 The Special Education and Disability Act (SENDA) 2001  
 Ofsted Framework for Early Years Foundation Stage 2024  
 Working Together to Safeguard Children DfE 2024  
 RCN toolkit for School Nurses 2019  
 Information Sharing – Advice for practitioners providing safeguarding services to children, young people, parents and carers 2024  
 Mental Health and behaviour in schools March 2018  
 Reasonable adjustments for disabled students 2019  
 National Minimum Standards for Boarding Schools (2022)  
 The Independent Schools Standards Regulations 2019  
 The Regulatory Handbook for the Inspection of Schools – a Commentary 2024

## 18. Supporting Policies

2.1 Safeguarding and Child Protection Policy  
 2.6 Complaints procedure  
 2.11 Equal opportunities Policy  
 3.1 Admissions Policy  
 4.1 Medical Policy  
 4.3 Asthma policy  
 4.4 Mental Health and Wellbeing policy  
 5.4 Anti -bullying  
 6.4 Special Educational needs and disability (SEND)  
 8.1 Health and safety Policy incorporating first aid policy

### Document Change History – document any changes since policy written 08.07.2016.

Date of change	Detail significant changes and any new legislation / guidance taken into account
03.12.2016	Adoption by Board, grammatical and stylistic changes.
07.10.2017	Reviewed and adopted by Board, references updated.

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07.10.2018	Reviewed, references updated. No changes required.
05.10.2019	Reviewed, references updated. No changes required.
05.11.2020	Reviewed by Pastoral Committee, references updated. No changes required
2.11.2021	Reviewed, no changes made
Sept 2023	Reviewed. Additional clause regarding anaphylaxis care plans, removed reference to School Doctor involvement with care plans, revised wording on intimate care treatment outside school hours, removed reference to briefing supply teachers on individual student needs.
10.10.2023	Reviewed and approved by Board
10.06.2024	Reviewed by lead nurse, updated health care plans for asthma and anaphylaxis and removed designated nurse from HCP. Updated reference list dates