



# Supporting Pupils with Medical Conditions

2024-25

'...these three remain: faith, hope & love; and the greatest of these is love.' 1 Cor 13:13

Rooted in faith, family & friendship.  
Growing in hope & aspiration.  
Flourishing in love.

friendship ★ hope ★ compassion ★ forgiveness ★ trust ★ thankfulness



# SUPPORTING PUPILS WITH MEDICAL CONDITIONS

## 1. DEFINITIONS

Pupils' medical needs may be broadly summarised as being of two types:

- Short-term affecting their participation at school because they are on a course of medication.
- Long-term potentially limiting access to education and requiring on-going support, medicines, or care while at school to help them to manage their condition and keep them well, including monitoring and intervention in emergency circumstances.

It is important that parents/carers feel confident that the school will provide effective support for their child's medical condition and that pupils feel safe. Some children with medical conditions may be considered disabled. Where this is the case local governing bodies must comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEN) and may have a statement or Education, Health, and Care Plan (EHCP). Where this is the case, this policy should be read in conjunction with the SEND Code of Practice (2015), the St Anne's Primary School SEN policy, and school SEN Information Report.

## 2. APPLICATION OF THIS POLICY

The policy is applicable to all employees (permanent and temporary) of St Anne's Primary School. Where applicable, it is also applicable to all volunteers supporting St Anne's Primary School.

The above definitions are included for reference purposes for both school and Governing Board staff to enable clarity and transparency when applying this policy.

## 3. RELATIONSHIP WITH ST ANNE'S PRIMARY SCHOOL VALUES

The application of this policy must be always applied in a way that reflects the values of St Anne's Primary School and its Christian Ethos.

## 4. ASSOCIATED POLICIES AND DOCUMENTS

Children and Families Act 2014  
Equalities Act 2010  
Health and Safety (First Aid) Regulations 19814  
First Aid in schools, early years, and further education (DfE)  
St Anne's Primary School Health & Safety Policy

## 5. VERSION CONTROL

Prepared by: Elizabeth Hindmarsh  
Approved by:  
Date of approval: October 2024  
Date of review: October 2025  
This policy will be reviewed annually.

## 6. PURPOSE AND SCOPE

The purpose of the policy is to ensure that:

- Pupils, staff, and parents/carers understand how St Anne's Primary School will support pupils with medical conditions.
- Pupils with medical conditions are supported to allow them to access the same education as other pupils, including trips and sporting activities.

## 7. POLICY STATEMENT

This policy has been drawn up in accordance with the DfE guidance Supporting Pupils at Schools with Medical Conditions (Dec 2015) to ensure arrangements are made for children with medical conditions to receive proper care and support whilst meeting our legal responsibilities.

St Anne's Primary School will:

- Provide guidance to all teaching and non-teaching staff members, ensuring staff are fully supported in carrying out their role to support pupils with medical conditions, including the procedure in an emergency.
- Identify the areas of responsibility and roles to all parties involved in the arrangements made to support pupils at school with medical conditions, including pupils, parents/carers, staff, healthcare professionals, the Headteacher, Local Governing Body and Local Authority
- Ensure procedures are followed to limit the impact of pupils' educational attainment, social and emotional wellbeing that can be associated with medical conditions, both on site and during off site trips.

## 8. KEY ROLES AND RESPONSIBILITIES

### 8.1 The Local Authority (LA) is responsible for:

- Promoting co-operation between relevant partners regarding supporting pupils with medical conditions.
- Providing support, advice /guidance and training to schools and their staff to ensure Individual Healthcare Plans (IHP) and Educational Health Care Plan (EHCP) are effectively delivered.
- Working with schools to ensure pupils attend full-time or make alternative arrangements for the education of pupils who need to be out of the school for fifteen days or more due to a health need and who otherwise would not receive a suitable education.

### 8.2. St Anne's Primary School Governing Board is responsible for:

- Ensuring this policy clearly identifies roles and responsibilities and is implemented effectively.
- Ensuring arrangements are in place to support pupils with medical conditions
- Ensuring that the Supporting Pupils with Medical Conditions Policy does not discriminate on any grounds including, but not limited to protected characteristics: ethnicity/nationality/origin, religion or belief, sex, gender reassignment, pregnancy & maternity, disability, or sexual orientation.
- Ensuring the policy covers arrangements for pupils who are competent to manage their own health needs.
- Ensuring that all pupils with medical conditions can play a full and active role in all aspects of school life, participate in school visits/trips/sporting activities, remain healthy and achieve their academic potential.

- Ensuring the policy sets out procedures in place for emergency situations.
- Ensuring the level of insurance in place reflects the level of risk.

### **8.3. The Local Governing Body is responsible for:**

- Handling complaints regarding this policy as outlined in the school's Complaints Policy.

### **8.4. The Headteacher is responsible for:**

- Ensuring staff to have access to information, resources, and materials.
- Ensuring records are kept of all medicines administered to pupils.
- Ensuring that relevant training is delivered to staff who will have responsibility to support children with medical conditions and that they are competent to do so.
- The day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and Procedures of the school.
- Liaising with healthcare professionals regarding the training required for staff.
- Identifying staff who need to be aware of a child's medical condition.
- Oversight of developing Individual Healthcare Plans (IHPs).
- Ensuring enough trained members of staff are available to implement the policy and deliver IHPs in normal, contingency, and emergency situations.
- If necessary, facilitating the recruitment of staff for the purpose of delivering the promises made in this policy.
- Ensuring more than one staff member is identified, to cover holidays/absences and emergencies.
- Ensuring continuous two-way liaison with medical staff and school staff in the case of any child who has or develops an identified medical condition. confidentiality and data protection.
- Assigning appropriate accommodation for medical treatment/care.

### **8.5. Staff members are responsible for:**

- Taking appropriate steps to support children with medical conditions and familiarizing themselves with procedures which detail how to respond when they become aware that a pupil with a medical condition needs help. Knowing where controlled drugs are stored and where the key is held.
- Taking account of the needs of pupils with medical conditions in lessons.
- Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, with specialist training if they have agreed to undertake a medication responsibility.
- Allowing inhalers, adrenalin pens and blood glucose testers to be held in an accessible location, following DfE guidance.
- Ensuring pupils are unable to access medication brought in by staff for staff use.

### **8.6. Other Healthcare Professionals:**

- Other healthcare professionals, including GPs, paediatricians, and mental health professionals, may communicate with schools when a child has been identified as having a medical condition that will require support at the school. They may provide advice on developing individual healthcare plans (IHP) on the following ways:
  - Specialist local health teams may be able to provide support in schools for children with conditions (e.g., asthma, diabetes, epilepsy).
  - Developing and collaborating in the writing of an IHP in anticipation of a child with a medical condition starting school.

- Notifying the school when a child has been identified as requiring support in an school due to a medical condition at any time in their school career. Supporting staff to implement an IHP and then participate in regular reviews of the IHP. Giving advice and liaising on training needs.
- Liaising locally with lead clinicians on appropriate support.
- Assisting the Headteacher in identifying and training needs and suitable providers of training.

### **8.7. Parents and carers are responsible for:**

- Keeping the school informed about existing or new medical conditions or changes to their child/children's health.
- Participating in the development and regular reviews of their child's IHP.
- Completing a parental consent form to administer medicine or treatment before bringing medication into the school.
- Providing the school with the medication their child requires and keeping it up to date including collecting leftover medicine.
- Carrying out actions assigned to them in the IHP with emphasis on, they or a nominated adult, being always contactable.

### **8.8 . Pupils are responsible for:**

- Where appropriate and possible in line with age related expectations:
- Providing information on how their medical condition affects them.
- Contributing to their IHP.
- Complying with the IHP and self-managing their medication or health needs, including carrying medicines or devices, if judged competent to do so by a healthcare professional and agreed by parents.

## **9. TRAINING OF NEW STAFF**

- Newly appointed staff will receive training on the 'Supporting Pupils with Medical Conditions Policy as part of their induction.
- The clinical lead for each training area/session will be named on each IHP.
- Medicines should only be administered at school when it would be detrimental to a child's health or their attendance not to do so.
- No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the condition.
- The school will keep a record of medical conditions supported, training undertaken, and a list of teachers trained to undertake responsibilities under this policy.
- Training for specific conditions may be available via external websites for example: [www.asthma.org.uk](http://www.asthma.org.uk) [www.anaphylaxis.org.uk](http://www.anaphylaxis.org.uk) [www.epilepsy.org.uk](http://www.epilepsy.org.uk)

## **10. MEDICAL CONDIIONS REGISTER/LIST**

- The school's admission forms request information on pre-existing medical conditions.
- Parents are asked to inform the school and can do so face to face, over the telephone or in writing or by emailing the school office at any point in the Academic year if a condition develops or is diagnosed.
- The school will consider seeking consent from GPs to have input into the IHP and to share information for recording attendance.

- A medical conditions list or register is kept, updated, and reviewed regularly by the nominated member of staff. Each class should have an overview of the list for the pupils in their care, within easy access.
- Supply staff and support staff should similarly have access on a need-to-know basis. Parents should be assured data sharing principles are adhered to.
- For pupils on the medical conditions list key stage transition points meetings should take place in advance of transferring to enable parents/carers, the school, and health professionals to prepare an IHP and train staff if appropriate.

### 11. INDIVIDUAL HEALTHCARE PLANS (IHPs)

- Where necessary (the Headteacher will make the final decision) an Individual Healthcare Plan (IHP) will be developed by the medical / healthcare professionals in collaboration with the pupil, parents/carers, Headteacher, and Special Educational Needs Coordinator (SENCO).
- IHPs will be easily accessible to all relevant staff, including supply/agency staff, whilst preserving confidentiality. Staffrooms are inappropriate locations under Information Commissioner's Office (ICO) advice for displaying IHP as visitors /helpers etc. may enter. If consent is sought from parents/carers, a photo and instructions may be displayed. More discreet location for storage such as a locked file is more appropriate. However, in the case of conditions with potential life-threatening implications the information should be available clearly and accessible to everyone.
- IHPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.
- Where a pupil has an Education, Health, and Care Plan (EHCP), the IHP will be linked to it or become part of it.
- Where a child is returning from a period of hospital education or alternative provision or home tuition, collaboration between the LA /AP provider and the school is needed to ensure that the IHP identifies the support the child needs to reintegrate.

### 12. ADMINISTERING MEDICINES

- Medicines will only be administered in the school when it would be detrimental to a child's health or attendance not to do so.
- Medicines should not be given on an ongoing basis, unless prescribed by a doctor (see First Aid Policy).
- The school will not administer prescription or non-prescription medicines to any child without parent's written consent.
- Where possible, unless advised it would be detrimental to health, medicines should be prescribed in frequencies that allow the pupil to take them outside of school hours.
- If this is not possible, prior to staff members administering any medication, the parents/carers of the child must complete and sign a parental consent to administration of medicine form.
- The school will support the administration of non-prescription medicines, over the counter medicines (OTC) following prior written permission by the child's parent/carer.
- Medicines must be in date, labelled, and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered.
- Controlled drugs that have been prescribed for a pupil will be securely stored in a non- portable container (the Safe) and only named staff will have access. Controlled drugs should be easily accessible

in an emergency and may be administered by school staff in accordance with the prescriber's instructions.

- Medicines will be stored in a secure location. Medication that needs to be stored in a cool fridge should be kept in a separate fridge in the Office.
- Any medications left over at the end of the course will be returned to the child's parents, including sharps in sharps boxes.
- Records will be kept in the medical folder in the office of any medication administered to children, including what, how, how much was administered, date and time and by whom. Parents will be informed of any side effects. Pupils will never be prevented from accessing their medication.
- When available general posters about medical conditions (diabetes, asthma, epilepsy etc.) will be displayed for example in staff rooms.
- The school cannot be held responsible for side effects that occur when medication is taken correctly.
- Staff will not force a pupil to take medicines or, force a pupil who refuses to comply with their health procedure, e.g., physio. The resulting actions will be clearly written into the IHP which will include informing parents.

### 13. RECORD KEEPING

Records of all medicines administered to individual children will be recorded in the medical folder detailing what, how and how much was administered, when and by whom.

These accurate records offer protection to staff and children, whilst providing evidence that agreed procedures have been followed. Parents will be informed when their child has been unwell at school.

- Signed written records of parental agreement for setting to administer medicine will be kept (see template B).
- Signed written records of staff training regarding administration of medicines will be kept (see template C).

### 14. DISPOSAL OF MEDICINES

Staff should not dispose of medicines. Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. They should also collect medicines held, at the end of each term.

### 15. OFF-SITE PROCEDURES

The school will assess what reasonable adjustments can be made to enable pupils with medical needs to participate fully and safely during off-site trips. Wherever possible arrangements will be put in place to ensure that all children with medical conditions can access all school activities unless it is not safe or advisable for them to do so in which case medical advice will be sought.

All staff members should be aware of how the pupil's individual medical condition will impact their participation but should allow enough flexibility for pupils to participate according to their own abilities unless evidence from a GP or other medical professional states otherwise.

A risk assessment will be carried out by a member of the Senior Leadership Team prior to the off-site trip, to ensure pupils with medical conditions can participate safely. This will require consultation with parents and pupils and advice from the relevant healthcare professionals.

Parents will be consulted where necessary in addition to the normal IHP requirements for the school day.

### 16. EMERGENCIES

Where a child has a healthcare plan it will clearly state what constitutes an emergency for that child and steps to take.

If a pupil needs to go to hospital a member of staff should go with them and remain with them until a person with parental responsibility arrives.

### 17. AVOIDING UNACCEPTABLE PRACTICE

The following behaviour is unacceptable in the school

- Preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- Assuming that pupils with the same condition require the same treatment.
- Ignoring the views of the pupil and/or their parents/carers or ignoring medical evidence or opinion. Sending pupils home frequently or preventing them from taking part in activities at school.
- Sending the pupil to the medical room or school office alone or with an unsuitable escort if they become ill.
- Penalising pupils with medical conditions for their attendance record where the absences relate to their condition, please refer to the Attendance Policy
- Making parents feel obliged or forcing parents to attend school to administer medication or provide medical support, including toileting issues.
- Creating unnecessary barriers to children participating in school life, including trips. (Although if parents wish to and can accompany their child they may be encouraged to do so.)
- Refusing to allow pupils to eat, drink or use the toilet when they need to to manage their condition.

### 18. INSURANCE

St Anne's Primary School is a member of the Department for Education's Risk Protection Arrangement (RPA).

### 19. COMPLAINTS

Should parents or pupils be dissatisfied with the support St Anne's Primary School has provided, the initial concern should be raised with the Headteacher. If the concern cannot be resolved with the school directly, a formal complaint can be made via the St Anne's Primary School complaints procedure, which is accessible from the school website or on request from the school office.



**APPENDIX I – DEVELOPING INDIVIDUAL HEALTHCARE PLANS (IHP)**

When deciding whether an IHCP is appropriate and proportionate, schools should follow the steps below:

**Stage 1: Gathering the information**

- The Headteacher or senior member of staff co-ordinates a meeting between the school, healthcare professional and parent to discuss the medical support needs of the pupil.
- Pupils should be involved when possible
- The meeting should ascertain whether an IHCP is appropriate, as not all children will require one.
- All parties should agree, based on the evidence, as to whether an IHCP would be suitable. However, the Headteacher is best placed to take the final view if consensus cannot be reached.
- The decision should be based on:
  - o whether there is a high risk that emergency intervention will be needed.
  - o whether the medical condition is long-term and/or complex.
  - o whether the child is returning to school following a period of hospital education or alternative provision (including home tuition).
  - o whether medical conditions are likely to fluctuate.
- A member of the school staff will be identified as being the person who will provide support to the pupil.

**Stage 2: Developing an IHCP**

The purpose of an IHCP is to capture steps which the school will take to help the child manage their condition and overcome any potential barriers to getting the most from their education.

Once the decision has been made to create an IHCP the outlined process should be followed: See appendix [A] for St Anne's Primary School's IHCP pro-forma.

1. Develop IHCP in partnership – agree who leads on writing it. Input from healthcare professional must be provided.
2. School staff training needs to be identified.
3. HEALTHCARE PROFESSIONAL commissions / delivers training and staff signed-off as competent – review date agreed
4. IHCP reviewed annually or if the pupil's condition changes. Parent or healthcare professional to initiate.
5. IHCP implemented and circulated to all relevant staff



Template A: Individual Healthcare Plan

Name of Academy/setting

Child's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

Form with 8 empty rows for personal and medical details.

Family Contact Information

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Form with 12 empty rows for family contact information.

Clinic/Hospital Contact

Name

Phone no.

Form with 2 empty rows for clinic/hospital contact.

G.P.

Name

Phone no.

Form with 2 empty rows for G.P. contact.

Who is responsible for providing support in academy

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

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

Daily care requirements

Specific support for the pupil's educational, social, and emotional needs

Arrangements for academy 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





## SUPPORTING PUPILS WITH MEDICAL CONDITIONS

Date \_\_\_\_\_

Review Date \_\_\_\_\_

Parent's Signature \_\_\_\_\_

Date \_\_\_\_\_

Head Teacher's Signature \_\_\_\_\_

Date \_\_\_\_\_

This will be reviewed at least annually or earlier if the child's needs change.

**Template B: Model Letter inviting Parents to contribute to Individual Healthcare Plan Development**

Dear Parent/Carer

**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 pupils 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 pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents/carers, pupils, 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 most 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 on 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 [INSERT DATE]. I hope that this is convenient for you, and I would be grateful if you could confirm whether you are able to attend.

The meeting will involve [the following people]. 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 another member of staff involved in plan development or pupil support] would be happy for you to contact me [them] by email



## SUPPORTING PUPILS WITH MEDICAL CONDITIONS

### Template C: Parental agreement for setting to administer medicine

The school/setting will not give your child medicine unless you complete and sign this form



## PARENTAL CONSENT FORM FOR ADMINISTRATION OF MEDICINE

This form must be completed in full and signed. The completion of this form does not act as a guarantee that the school will administer medication and the school may refuse to administer medication at any time. Any medication to be administered must have been administered previously by the parent to minimise the risk of adverse of allergic reaction to any new medication. All medication must be stored in its original container and be clearly labelled with the child's name.

<b>ESSENTIAL INFORMATION</b>	Name of Child		
	Date of Birth		
	Class		
	Medical Condition/Illness		
	Name of Medication/s		
	Prescribed ( <i>please tick</i> )		Over the Counter
	Special Precautions <i>e.g. take after eating</i>		
	Are there any side effects?		
	Dosage		
	Time of Dosage		
	Start Date		
	End Date		
Any other information			

<b>EMERGENCY CONTACT</b>	Name		
	Relationship to Child		
	Mobile Telephone		
	Work Telephone		
	Place of Work		

<b>PARENT DECLARATION</b>	The above information is, to the best of my knowledge, accurate and I hereby give permission for the staff of St Anne's Primary School to administer the above medication.		
	I confirm the medication is in its original container indicating the contents, dosage and child's full name and is within its expiry date		
	Signed:		Date: