Supporting Pupils with Medical Conditions

This policy is prescribed by The Good Shepherd Trust and all reference to 'the Trust' includes all Trust schools, the central team and subsidiary organisations.

Date adopted:	July 2019	Last reviewed:	03/09/2026
Review cycle:	Annually or earlier	Is this policy statutory?	Yes
Approval:	Trust Board	Author:	Head of Safeguarding
Local approval*:	Head Teacher	Local author*:	Head Teacher

Next review date of template policy: 01/09/2027

*Local approval will either be the local committee, the head teacher, or the CEO (refer to policy schedule)

Revision record

Minor revisions should be recorded here when the policy is amended in light of changes to legislation or to correct errors. Significant changes or at the point of review should be recorded below and approved at the level indicated above.

Revision No.	Date	Revised by	Approved date	Comments
1	18/03/21	Jo Cambra	n/a	No change
2	27/08/22	Alex Clark	n/a	No change
3	20/03/24	Liz Tedbury	28/03/24	Complete re-write in line with statutory guidance and adapting The Key template
4	31/03/25	Liz Tedbury	30/04/25	Parent edited to parent/carer throughout
5	23/04/25	Liz Tedbury	30/04/25	Appendices 2-4 added (forms) and minor changes shown in blue (please revert to black text when publishing) in 3.2, 4 and 14.
6	03/09/2026	Liz Tedbury	1/10/2026	Minor changes to ensure compliance and alignment with DfE guidance

1. Introduction

It is the intention of the trust that this policy reflects our vision of "Flourishing Together" and our values of kindness, integrity and resilience.

1. INTRODUCTION 1

2. AIMS 2

3. LEGISLATION AND STATUTORY RESPONSIBILITIES 2

4. ROLES AND RESPONSIBILITIES 2

5. EQUAL OPPORTUNITIES 4

6. BEING NOTIFIED THAT A CHILD HAS A MEDICAL CONDITION 4

7. INDIVIDUAL HEALTHCARE PLANS (IHPS) 4

8. MANAGING MEDICINES 5
9. EMERGENCY PROCEDURES 7
10. TRAINING 7
11. RECORD KEEPING 7
12. LIABILITY AND INDEMNITY 7
13. COMPLAINTS 8
14. MONITORING ARRANGEMENTS 8
15. 14. LINKS TO OTHER POLICIES 8
16. APPENDIX 1: BEING NOTIFIED A CHILD HAS A MEDICAL CONDITION 9

2. Aims

This policy aims to ensure that:

- Pupils, staff and parent/carers understand how our school will support pupils with medical conditions
- 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 headteacher will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupils' conditions, 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
- Developing and monitoring individual healthcare plans (IHPs)

This policy also aims to set out procedures for developing, reviewing and managing Individual Healthcare Plans (IHPs), managing medicines safely within school, and ensuring pupils with medical conditions feel safe, supported and included within the school community.

The named person with responsibility for implementing this policy is Mrs. Jennie Ratcliff.

3. Legislation and statutory responsibilities

This policy 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 (DfE)'s statutory guidance on supporting pupils with medical conditions at school.

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

4. Roles and responsibilities

4.1 The trust board

The trust board has ultimate responsibility to make arrangements to support pupils with medical conditions. The trust board delegates to the school's local committee the responsibility to ensure that the

headteacher has implemented their responsibilities to ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

4.2 The headteacher

The headteacher will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- Ensure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development of IHPs
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way (see 11, below)
- Contact the school nursing service in the case of 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
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date
- Manage cover arrangements during staff absence or turnover;
- Ensure supply staff are appropriately briefed;
- Approve risk assessments for visits and activities involving pupils with medical conditions.

4.3 Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.

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.

4.4 Parent/carers

Parent/carers will:

- Provide the school with sufficient and up-to-date information about their child's medical needs
- Be involved in the development and review of their child's IHP and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times
- Provide evidence of appropriate prescriptions where medication is to be administered
- Provide written consent for administration of medicines

4.5 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 IHPs. They are also expected to comply with their IHPs.

4.6 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 IHP.

Healthcare professionals, such as GPs and paediatricians, will liaise with the school's nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

5. Equal opportunities

Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The school will consider what reasonable adjustments need to be made to enable pupils with medical conditions to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parent/carers and any relevant healthcare professionals will be consulted.

The school will adhere to the legal responsibilities under the Equality Act 2010 and will not unlawfully discriminate against any pupils.

6. 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 IHP.

The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

See Appendix 1.

7. Individual healthcare plans (IHPs)

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to the Pastoral and Safeguarding lead.

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
- By whom

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parent/carers when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parent/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.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The Pastoral and Safeguarding lead, will consider the following when deciding what information to record on IHPs:

- 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 parent/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/carer/pupil, the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency, including who to contact, and contingency arrangements

8. 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 parent/carers' written consent

The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parent/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 for the pupil's age and when the previous dosage was taken. The person administering medication will keep a written record. Parents/carers will always be informed on the same day medication has been administered, or as soon as reasonably possible.

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

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 parent/carers to arrange for safe disposal when no longer required.

8.1 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. 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.

8.2 Pupils managing their own needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parent/carers and it will be reflected in their IHPs.

Pupils will be allowed to carry relevant devices wherever possible. IHPs will include procedures for staff to follow if a pupil refuses to carry out a necessary procedure or take medication.

8.3 Unacceptable practice

School staff will use their discretion and judge each case on its merits with reference to the pupil's IHP, 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 parent/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 IHPs
- If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable (for example fellow pupil who is not old or responsible enough)
- 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 parent/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupil, including with toileting issues. No parent/carer should have to give up working because the school is failing to support their child's medical needs
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parent/carers to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

9. Emergency procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHPs 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.

10. Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Headteacher / Pastoral and Safeguarding lead. Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
- Fulfil the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of 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.

11. Record keeping

The headteacher will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parent/carers will be informed if their pupil has been unwell at school.

IHPs are kept in a readily accessible place which all staff are aware of (Arbor).

The Trust Board will receive assurances of the quality of record keeping process by the central team.

12. Liability and indemnity

The trust board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

The Trust's insurance arrangements, including membership of the Risk Protection Arrangement (RPA), provide appropriate cover for staff providing support to pupils with medical conditions, including administration of medication and approved medical procedures undertaken within the scope of their training.

13. Complaints

Parent/carers with a complaint about the school's actions in regard to their child's medical condition should discuss these directly with the Headteacher / Pastoral and Safeguarding lead in the first instance. If the Headteacher / Pastoral and Safeguarding lead cannot resolve the matter, they will direct parent/carers to the school's complaints procedure.

14. Monitoring arrangements

The Headteacher will monitor implementation of this policy and report concerns or significant issues to the Local Committee and Trust as appropriate.

This policy will be reviewed and approved by the trust board every year.

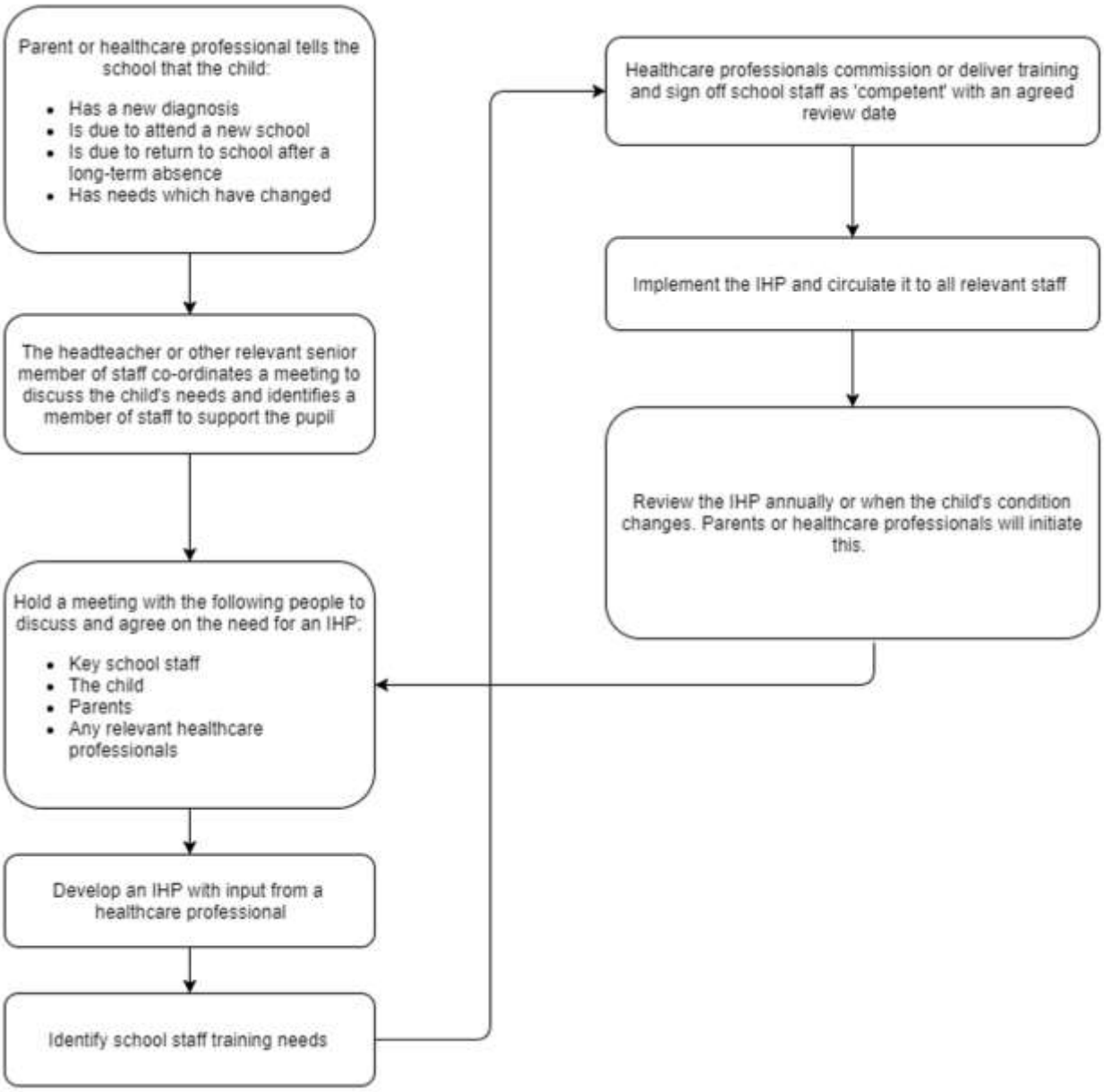
The local committee must ensure that the headteacher has fulfilled their duties as in 3.2, above.

15. 14. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality Information and Objectives
- First Aid
- Health and Safety
- Safeguarding and Child Protection
- Special Educational Needs Information Report and Policy
- Allergy Safety policy

16. Appendix 1: Being notified a child has a medical condition



17. Appendix 2: Parental Agreement for School to Administer *Prescribed Medication* Only

The school will not store or give your child medicine unless you complete and sign this form and return it to the school. Medicine must be in its original container as dispensed by the pharmacy, clearly marked with your child's name, the expiry date and dosage details.

This medicine form should be renewed on a termly basis, if the need for medication is ongoing

Pupil name		Affix photo here
Date of birth		
Class		
Medical condition or illness		

Medicine

Name/type of medicine (as described on the container)	
Expiry date	
Dosage and method (including times)	
Dates to administer medication	From ____/____/____ to ____/____/____ (one term max)
Self-administration?	Yes / No
Special precautions/other instructions.	
Are there any side effects that the school needs to know about?	
Procedures to take in an emergency	

Contact details

Name of adult	
Relationship to pupil	
Contact telephone number/s	
Address	

Agreement

I confirm that I am aware that this medication will be administered by a member of the teaching or non-teaching staff at school, who may not have any first aid or medical training. The above information is, to the best of my knowledge, accurate at the time of writing and I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signed	
Full name	
Date	

Date	Time	Medicine	Measure	Administered by	Witness