



# Gilbertstone Primary School

## Supporting pupils with medical conditions

### 1. Aims

This policy aims to ensure that:

- › Pupils, staff and parents 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 governing body 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)

**The named person with responsibility for implementing this policy is The Head Teacher.**

### 2. 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 bodies 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](#).

### 3. Roles and responsibilities

#### 3.1 The governing body

The governing body has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing body will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

#### 3.2 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
- › 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

### **3.3 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.

### **3.4 Parents**

Parents 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 and another nominated adult are contactable at all times
- › Ensure that any medication brought into school is in date and prescribed medication is labelled correctly by the pharmacy (see section 7.1 and 7.2)
- › Collect any medication from the school office e.g. when the course of medication is complete, an expiry date is reached or the child is leaving school. No medication will be given to a child to take home.
- › Bring all medication directly to the school office with the completed and signed medicines consent form (available from the school office or the school website).

## **4. 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.

The school will consider what reasonable adjustments need to be made to enable these pupils 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 parents and any relevant healthcare professionals will be consulted.

## **5. 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.

## **6. Individual healthcare plans (IHPs)**

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions.

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 parents 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, parents 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 SEND but does not have an EHC plan, the SEND 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. This will be determined by the medical professionals and may include:

- › 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 parents 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/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

## 7. Managing medicines

### 7.1 Prescribed medication

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 parents'/carers' written consent
- › Are prescribed 4 times a day (medication prescribed 3 times a day should be administered before school, after school and evening)

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 and when the previous dosage was taken. Parents will always be informed.

The school will only accept prescribed medicines that are:

- › In-date

- Labelled with name of child, name of medication, strength of medication, dosage, expiry date
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage
- Need to be administered 4 times a day or at set times as per the child's prescription

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

## 7.2 Non-prescribed medication

Non-prescribed medicines can be administered by school at the discretion of the head teacher if parents / carers provide written consent in line with the manufacturer's instructions, is in date and has the child's name on the container.

## 7.3 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.

All controlled drugs are kept in a secure cabinet 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.

## 7.4 Emergency medication

### Salbutamol Inhalers

Emergency inhalers are available for when a child's prescribed inhaler is not available. The emergency inhaler will only be given to a child who has an inhaler prescription.

The emergency inhaler is taken on trips, swimming and other off-site activities when children with asthma are participating in these activities.

### Adrenaline Auto Injectors

Emergency injectors are available for when a child's prescribed injector is not available.

The emergency injector will only be given to a child who has an injector prescription.

The emergency injector pen is taken on trips, swimming and other off-site activities when children requiring this medication are participating in these activities.

## 7.5 Refusal of medicine

If a child spits out or refuses the dose then this will be recorded and parents contacted as soon as possible.

## 7.6 Storage of medication

All medicines will be stored safely. 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.

Sharps boxes should always be used for the disposal of needles or glass ampoules.

Collection and disposal of the boxes should be arranged in accordance with the child's care plan

# 8. 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 arrives or accompany the pupil to hospital by ambulance.

## **9. Other considerations regarding medical conditions**

### **9.1 School Trips, Visits and Sporting Activities**

Staff should carry and administer medication as necessary

Parental consent forms cover administration of medication on and off school site

A copy of any medical care plans and information on medical conditions will be taken on visits and included on risk assessments

Prescribed inhalers are kept in the class medicine bag and taken outside for PE, Forest School, any after school clubs

All afterschool activity registers will indicate a medical need and details of medical needs and medication will be attached.

The Medical Needs Co-ordinator will meet with the leader of the activity to go through all medical conditions and medication. Both will sign the register as a record that the meeting took place and the leader understands the medical needs of the pupils in their care.

All pupils who attend an afterschool activity must take their inhalers to the location and return the inhaler to the school office after the session. Inhalers will be returned to the classroom the following morning.

All afterschool activity leaders staff are made aware that school hold an emergency inhaler and its location.

### **9.2 Hub Club Afterschool Provision**

Hub Club are provided with medical alert cards as held within school.

At least one member of staff in hub club is first aid trained.

The Medical Needs Co-ordinator will explain all medical needs and the medication of children who attend Hub Club. A register of these needs is given to the Hub Club manager and updated as required.

Hub Club hold an emergency inhaler.

Parents should request an additional inhaler for school so that children can access their own inhaler at before or after school club

## **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. 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 as required to meet specific medical needs.

## **11. Record keeping**

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

School will keep a record of when medication has been administered – what, how, and how much was administered, when and by whom.

Any side effects of the medication to be administered at school will be documented in school.

This information is available for parents should they request it.

Records of administration are held by school for 25 years in line with statutory guidelines

An electronic register of medical needs is securely stored on the school network.

A list of all children in a class with any known medical conditions is shared

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

## **12. Complaints**

Parents with a complaint about their child's medical condition should discuss these directly with the headteacher in the first instance. If the headteacher cannot resolve the matter, they will direct parents to the school's complaints procedure.

## **13. Monitoring arrangements**

This policy will be reviewed and approved by the governing body annually. The implementation of the policy will be monitored by the link governor for Health and Safety.

## **14. Links to other policies**

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality statement
- First aid
- Health and safety
- Safeguarding
- Special educational needs information report and policy

Agreed and Adopted by the Governing Body 22 November 2024 (Delegated to Head Teacher)

Reviewed and adopted October 2025

Due for annual review October 2026

## Appendix 1: Being notified a child has a medical condition

