



# Supporting pupils with medical conditions policy

This policy is applicable to all regardless of gender, sexuality, religious belief or none, culture, ethnicity, ability or disability, individuals with protected characteristics and those with none; it does not determine to discriminate against any individual whilst ensuring the smooth operation of our school.

Approved by Barbara Turner	
Date:	September 2023
Review Date:	September 2024

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## 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 board will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupil's condition, 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 **Raluca Preda**

## 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 boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education's statutory guidance: [Supporting pupils at school with medical conditions](#).

## 3. Roles and responsibilities

### 3.1 The governing board

The governing board has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing board 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
- 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
- Contact the health visitors 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 health professionals
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

### 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 or another nominated adult are contactable at all times

### 3.5 Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be included in discussions about their medical support needs (as appropriate to their age and developmental level) and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

### 3.6 Other healthcare professionals

Healthcare professionals 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 the child's IHP.

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

## 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 and outdoor play, and not prevent them from doing so.

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, including outdoor play.

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.

The forms attached as Appendices need to be completed before a parent will be able to leave the child on site. The school will also need to have all necessary medication for the child. If staff training is necessary to manage the child's condition, then the parent will be asked to remain on site until staff have received this training.

## 6. Individual healthcare plans

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to **Raluca Preda**

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 not a 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 SEN but does not have a statement or 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 governing board and the headteacher, 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, need for rest periods or additional support in catching up with learning, support with personal, social and emotional development
- The level of support needed, including in emergencies
- 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
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school day 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

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' written consent

**The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents.**

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a pupil any medication 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
- 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 and their parents will be informed about where their medicines are at all times and they should be available for immediate access. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available and not locked away. **Raluca Preda** will check the expiry dates for all medication stored at the school each term (i.e. three times a year.) She will check that all medication is clearly labelled with the child's name and that all of the relevant paperwork required for administration of the medication is complete.

Medicines will be returned to parents to arrange for safe disposal when no longer required. If parents/carers do not pick up out-of-date medication, it is taken to a local pharmacy for safe disposal.

### 7.1 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.

All controlled drugs are kept in a secure cupboard in the Headteacher's 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.

### 7.2 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 parents and it will be reflected in their IHPs.

Pupils, dependent on age and developmental stage, will be allowed to carry their own medicines and relevant devices wherever possible. Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered, if necessary.

### 7.3 Unacceptable practice

School staff should use their discretion and judge each case individually 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 parents
- 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, leave them unaccompanied or with someone unsuitable
- 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 parents, 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 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 parents to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

### 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.

In the case of children who are ill or infectious, children will be isolated (with a staff member supervising) in a separate space until a parent can collect them.

### 9. 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.

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.

## **10. Record keeping**

The governing board 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 child has been unwell at school.

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

Medicine must only be administered to a child where written permission for that particular medicine has been obtained from the child's parent and/or carer. The school will keep a written record each time a medicine is administered to a child, and inform the child's parents and/or carers on the same day, or as soon as reasonably practicable. The recording forms are available as an Appendix.

## **11. Liability and indemnity**

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

The details of the Employer's Liability Insurance are: Risk Management Partners Limited  
Policy Number: Y096816QBE0121A  
Insurance Expiry: 31 March 2023

## **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 a named governor every year.

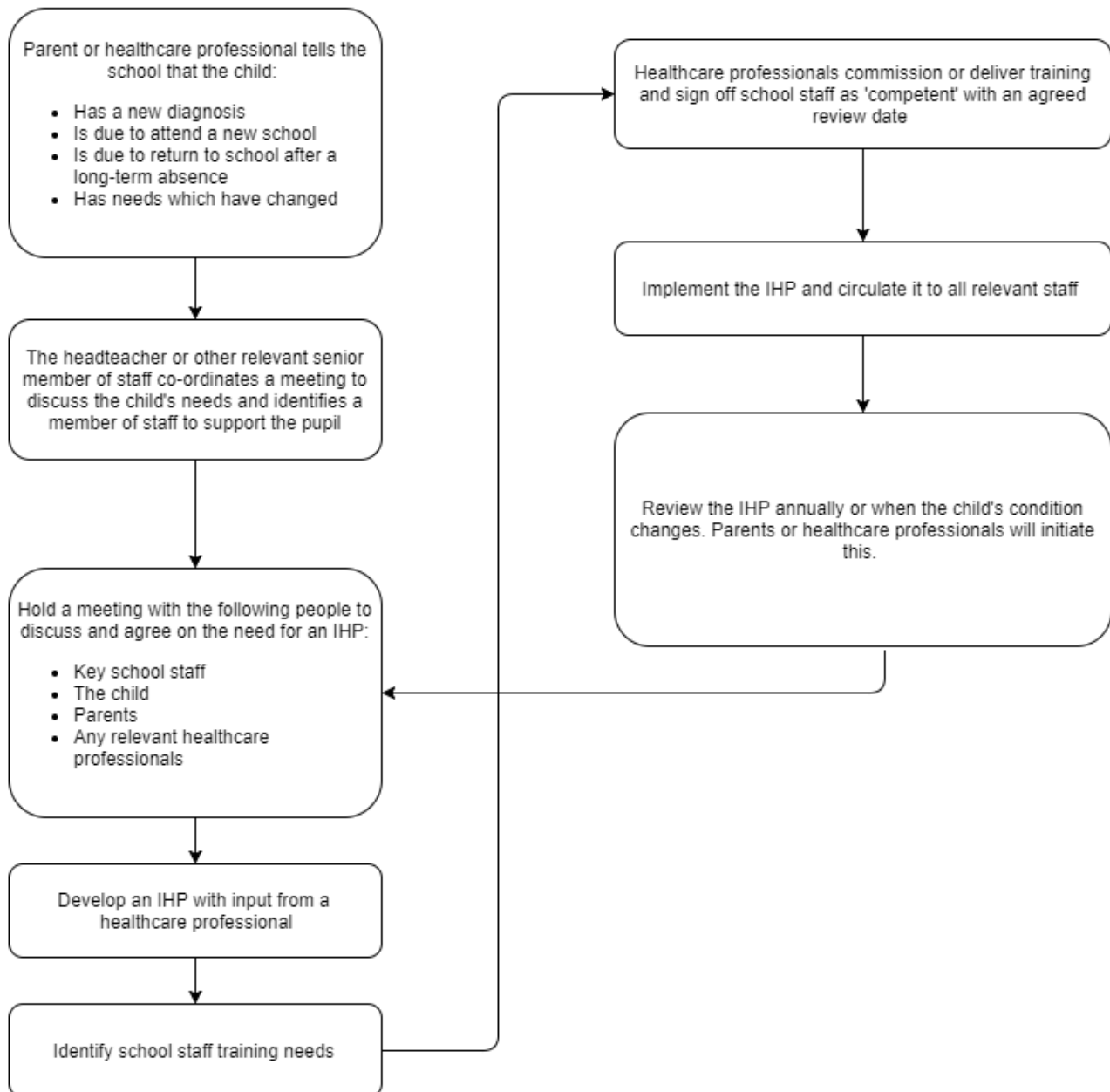
## **14. Links to other policies**

This policy links to the following policies:

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



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







**Individual Medication Accountability Form**

Child's Name: \_\_\_\_\_ Keygroup: \_\_\_\_\_

Date and Time	Medication Given	Dosage Administered	Reason	Staff Member's Signature	Parent Consent Form Date

Sign off weekly – Date: \_\_\_\_\_  
Staff Name and signature: \_\_\_\_\_ / \_\_\_\_\_  
Parent Name and signature: \_\_\_\_\_ / \_\_\_\_\_



# ASTHMA MEDICATION CONSENT FORM

Name of Pupil: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Please initial box

1. I confirm that I have supplied the school with a reliever inhaler and spacer device for my child.

2. I consent for my child to use the school's salbutamol inhaler and spacer in an emergency situation

Situations in which medication should be administered. (What are the signs your child may be experiencing difficulty breathing?) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dosage Instructions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of Parent/Carer

Date

Signature

\_\_\_\_\_

Name of Keyworker

Date

Signature

\_\_\_\_\_

Name of Headteacher

Date

Signature



# MEDICATION CONSENT FORM

Name of Pupil: \_\_\_\_\_ Keygroup: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Please initial box

I confirm that I have supplied the school with medication prescribed  
By a medical professional for my child named above.

Yes

No

The medication is \_\_\_\_\_

For the treatment of \_\_\_\_\_

\_\_\_\_\_

The expiry date is: \_\_\_\_\_

Yes

No

I will ensure the medication is renewed in a timely manner.

The dosage instructions are:

Reason to administer: \_\_\_\_\_

Amount: \_\_\_\_\_

Frequency: \_\_\_\_\_

Instructions and process for administering the medication:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Yes

No

I give consent for a staff member to administer the  
Medication in accordance with the dosage instructions.

Name of Parent/Carer

Date

Signature

\_\_\_\_\_

Name of Keyworker

Date

Signature

\_\_\_\_\_

Name of Headteacher

Date

Signature

\_\_\_\_\_

Does medical training need to be arranged Yes / No (Headteacher/SENCO to arrange)

**Accident/Incident Report Form**

**DATE:** \_\_\_\_\_



Name of Child: \_\_\_\_\_

Group: \_\_\_\_\_

Area where accident/incident happened: \_\_\_\_\_

Time accident/incident occurred: \_\_\_\_\_

Brief description of accident/incident: \_\_\_\_\_

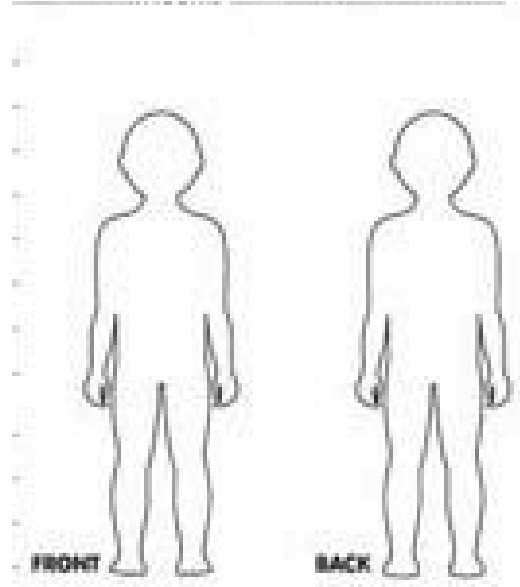
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Which staff were present at the time:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe injury/incident:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Please mark a cross on the image above to show position on injury. For Head injury please complete details over page and make parents aware of the head injury information.

Action Taken/Treatment administered:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of person/s dealing with the incident/taking action/giving treatment: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Parents notified: by face to face chat  telephone  email

This form must be completed and copied - please make sure a signed copy is given to the parents and one is placed in the pupils file. Make sure a record is made in the black medical folder for tracking purposes.

Record on CPOMS - Signed Copy to parents / Signed Copy on Pupil File / Scan copy on CPOMS

Staff signature: \_\_\_\_\_ Name: \_\_\_\_\_ title: \_\_\_\_\_

SLT signature: \_\_\_\_\_ Name: \_\_\_\_\_ title: \_\_\_\_\_

Parent signature: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_

For additional information please write on the back of this form.

Accident/Incident Report Form Head Injury and additional information

Head Injury information

Head injury yes/no

If you have been informed that today your child has sustained a knock to the head, please note the following information.

Due to the inconsistent nature of knocks to the head, children who have received what may seem to be only a slight bump, should still be kept a close eye on for 24 hours. Often a cause for concern may not occur for several hours after a knock, or even until the next day. Please keep a close eye on your child.

Should you see any of the following symptoms please seek medical attention immediately.

- Abnormal drowsiness
- Nausea and/or vomiting
- Mental confusion/disorientation/incoherent speech
- Lack of normal movement
- Unequal eye size
- Prolonged or increasingly severe headache

If you see any of the following, dial 999

- Loss of consciousness
- Stiffness of the neck
- Convulsion
- Slowing of pulse
- Drainage of blood or clear fluid from the nose or ear

I understand the information and information I have been given

Parent signature: \_\_\_\_\_

Addition notes/ important information section if required

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Staff signature: \_\_\_\_\_ Name: \_\_\_\_\_



## Individual healthcare plan

Name of school/setting	Lea Nursery, Wexham, Slough
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition:	
Date	
Review date	
<b>Family Contact Information</b>	
Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
<b>Clinic/Hospital Contact</b>	
Name	
Phone no.	
<b>G.P.</b>	
Name	
Phone no.	





Individual healthcare plan continued...

Who is responsible for providing support in school	All staff/ First Aider Chantal August
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Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

**See Medical Consent Form for:** Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision details.

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

Arrangements for school visits/trips etc

Other information



Individual healthcare plan continued...

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*)

All Staff at Lea Nursery while child is under our care  
Education off site visits: Parents may be required to accompany their child and take responsibility.

Plan developed with

Staff training details:

Form copied to

Scan to CPOMS - Pupils Records  
Key Worker - to be kept with medication  
Medical Folder - to ensure staff can check details if needed  
All kept confidentially and securely.

SLT signature: \_\_\_\_\_ Name: \_\_\_\_\_ title: \_\_\_\_\_

Parent signature: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_

