

To aspire, endeavour and thrive together

SUPPORTING PUPILS WITH MEDICAL CONDITIONS

Revision	Date	Description of Changes
Draft version	26/10/2023	Updated policy using The Key policy template which uses the most up to date legislation
Agreed at S&R Committee	26/10/2023	
Reviewed for LGB Committee	01/04/2025	Minor changes made after reviewing The Key's latest policy document plus the inclusion of paracetamol guidance (point 7.2). Appendix 3 removed and link provided within body
Addition to emergency procedures section 8.	06/03/26	Where a student is unconscious, or has been unconscious at any point, an ambulance must be called immediately. Any loss of consciousness should be treated as a medical emergency without delay.
Addition to record keeping section 10.	06/03/26	Smartlog register must be completed for any injury sustained within school by the staff member that identifies and deals with the incident.

Approved by:

Local Governing Board

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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 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 (IHCPs)

The person delegated with responsibility for implementing this policy is the Deputy Headteacher – Student Culture. In their absence, another member of the Senior Leadership Team will be assigned.

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 (DfE)'s statutory guidance on [Supporting pupils with medical conditions at school](#).

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

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 (IHCPs), 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 IHCPs
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- 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

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/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 IHCP and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the IHCP, e.g. provide medicines and equipment, and ensure they or another nominated adult are always contactable

3.5 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 IHCPs. They are also expected to comply with their IHCPs.

3.6 School nurses and other healthcare professionals

Our health and welfare assistant 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 IHCP.

Healthcare professionals, such as GPs and pediatricians, 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 IHCPs.

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 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.

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 IHCP.

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 (IHCPs)

The headteacher has overall responsibility for the development of IHCPs for pupils with medical conditions. This has been delegated to the Deputy Headteacher – Student Culture and First Aider.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupils' 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 IHCP. It will be agreed with a healthcare professional and the parents/carers when an IHCP 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/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.

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

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, the Head Teacher, the and the First Aider will consider the following when deciding what information to record on IHCPs:

- 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/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

7. 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 parents/carers have completed the Parental Consent for Administration of Medicine(s). This consent form can be found on the School's website or by following this link: [Parental Consent for Administration of Medicine\(s\)](#)

Parents and/or carers must be registered contacts on the school system to authorise the administration of medication via the school medical consent form. 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 (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

- 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 parents to arrange for safe disposal when no longer required.

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.

A pupil who has been prescribed a controlled drug must store this in the first aid pod and this must be administered under the supervision of a designated first aider, Pupils may have it in their possession if they are competent and medically required to do so, but they must not pass it to another pupil to use. All other controlled drugs are kept in a secure locked cupboard in the First Aid Pod 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 Paracetamol Policy

Most pupils will at some time have a medical condition that may affect their participation in school activities and for many this will be short-term. Other pupils have medical conditions that, if not properly managed, could limit their access to education. Most children with medical needs can attend school regularly and, with some support from the school, can take part in most normal school activities.

As such a procedure for administering paracetamol in school has been written and can be found in [Appendix 2](#).

7.3 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 IHCPs.

Pupils 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 IHCP and inform parents so that an alternative option can be considered, if necessary.

7.4 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHCP, 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/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 IHCPs
- If the pupil becomes ill, send them to an office or medical room 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 manage their medical condition effectively
- Require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupils, 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' IHCPs 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.

Where a student is unconscious, or has been unconscious at any point, an ambulance must be called immediately. Any loss of consciousness should be treated as a medical emergency without delay.

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 IHCPs. Staff who provide support for 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 Head Teacher, the Deputy Headteacher – Student Culture and the First Aider. 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 IHCPs
- Help staff to understand 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/carers will be informed if their pupil has been unwell at school.

IHCPs are attached to the students Bromcom account and are stored in the First Aid drive.

Smartlog register must be completed for any injury sustained within school by the staff member that identifies and deals with the incident.

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 school's insurance policy are:

The school is a member of the Department for Education's Risk Protection Arrangement (RPA). The insurance policy provides liability cover relating to the administration of medication.

12. Complaints

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

13. Monitoring arrangements

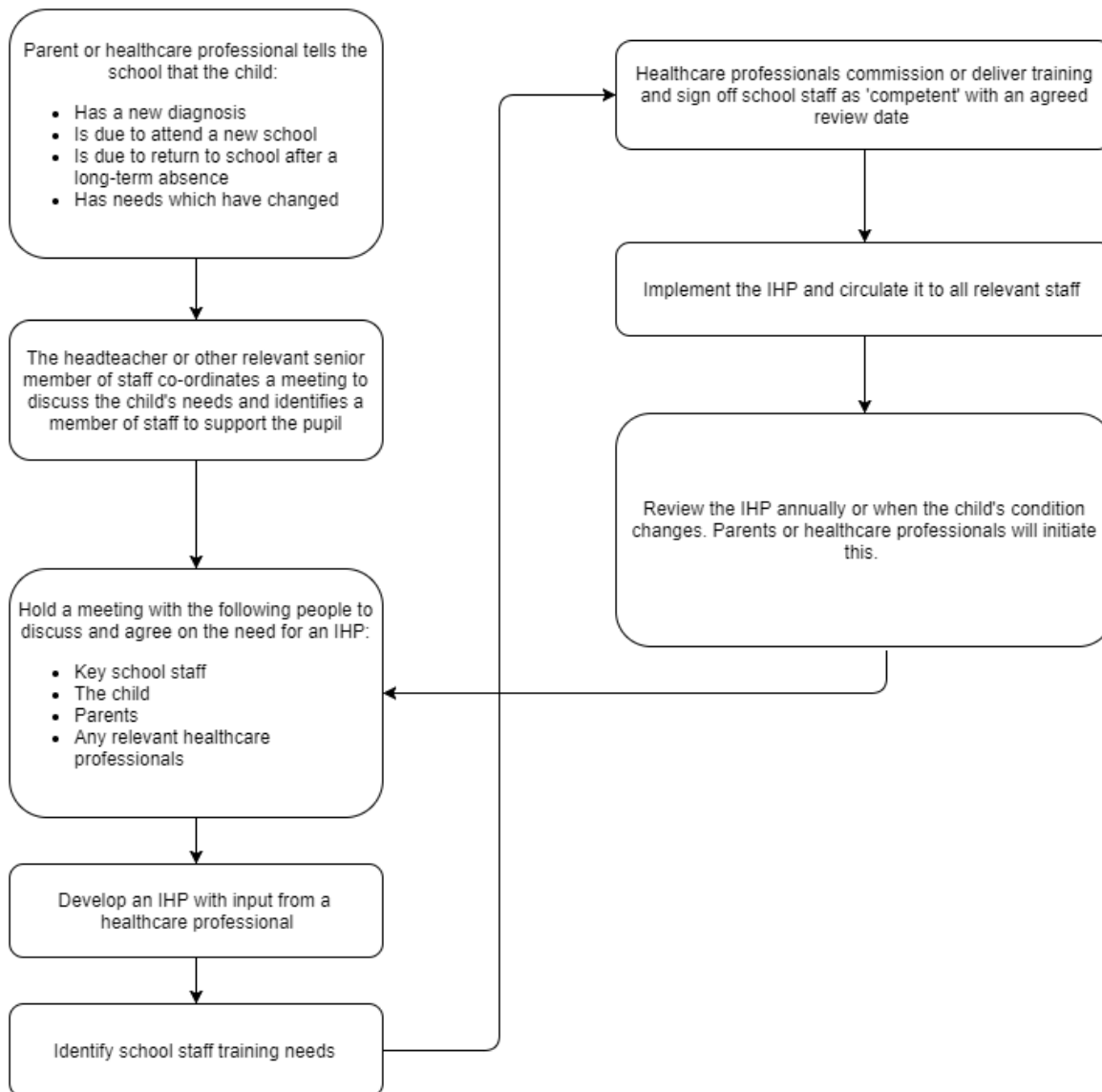
This policy will be reviewed and approved by the governing board every year.

14. Links to other policies

This policy links to the following policies:

- [First aid](#)
- Health and safety
- Complaints Policy (TLP)
- Child Protection & Safeguarding Policy
- SEND Policy
- Accessibility Policy
- Equality Diversity & Inclusion Policy (TLP)

Appendix 1: Being notified a child has a medical condition



Appendix 2: Administering paracetamol - procedure for secondary school pupils only

Rationale

Most pupils will at some time have a medical condition that may affect their participation in school activities and for many this will be short-term. Other pupils have medical conditions that, if not properly managed, could limit their access to education. Most children with medical needs can attend school regularly and, with some support from the school, can take part in most normal school activities.

Aim

By administering paracetamol to secondary pupils in school, we aim to aid pupils in staying in school longer so that their education is not limited by a medical condition which can be treated with paracetamol.

Principles

This procedure sets out the circumstances in which we may administer medicines within school, and the procedures that we will follow.

Processes

The school will keep its own stock of paracetamol tablets and a liquid form of paracetamol to reduce the risk of pupils carrying medicines and avoid confusion over what can be administered.

Pupils who frequently require paracetamols will be asked to provide their own tablets which will be kept securely labelled in the First Aid Pod. Parents will be contacted by the first aider in these circumstances.

For school to administer paracetamol to pupils, the written consent of parents/carers is required. The school can accept permission via a Form which can be found on the school website and filled in online or by following [this link](#).

The school will hold a supply of 500mg paracetamol and liquid paracetamol securely in a locked medicine cabinet. Following consent, paracetamol may be administered by members of staff who have received the required first aid training in the event of a headache, toothache, period pain or any type of mild to moderate pain.

Parents/carers will be contacted by phone before any paracetamol is given to obtain verbal consent and to confirm whether any medicines have been taken before attending school. Paracetamol will not be issued without written and verbal consent.

When a pupil is given medicine, a written record of it will be kept in school. This record will include: the name of the medicine, dose given, pupil's name, time and date and signature of the person administering.

Before giving paracetamol

1. The pupil should be encouraged to get some fresh air and have a drink or something to eat and paracetamol is only considered if these actions do not work.
2. There must be written parental consent with verbal consent from the parent/carer on the day. If verbal consent cannot be obtained, then paracetamol will not be given.
3. Only standard paracetamol may be given, not combination drugs which may contain other drugs.

Administering paracetamol

1. Pupils can only be given one dose of paracetamol during the school day. If this does not work, contact the parent/carer again.
2. The responsible member of staff must witness the pupil taking the paracetamol and make a record of it.

Paracetamol must not be given

1. Following a head injury
2. Where a pupil has taken medicine containing paracetamol within the last four hours.

Monitoring, Assessment & Evaluation

The procedure will be monitored to ensure that the processes described within it fit the practice of administering paracetamol.