# Supporting Pupils with Medical Conditions

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**SUPPORTING PUPILS WITH MEDICAL CONDITIONS**

## 1. Purpose and principles

All Saints C of E Primary and Nursery School is committed to supporting pupils with medical conditions so that they can access education, care, activities and school life as fully as possible. A pupil will not be refused admission, or prevented from taking up a place, because arrangements for their medical condition have not yet been made. The school will work with pupils, parents/carers, staff and relevant healthcare professionals to make appropriate arrangements.

The school will:

- listen to pupils and parents/carers and involve them in decisions, taking account of the pupil's age, understanding and wishes;
- recognise that children with the same condition may have different needs and that support must be individualised;
- ensure relevant staff know what support is required and what to do in an emergency;
- make reasonable adjustments and support participation in lessons, PE, trips, clubs, residential visits and other school activities;
- protect confidentiality and share medical information only with people who need it for the pupil's safety and care, in line with data protection requirements;
- review arrangements when needs change and learn from incidents and near misses.
- This policy applies to the school's pupils, including children attending the nursery, and to staff, volunteers and other adults working with pupils where relevant.

## 2. Legal and guidance framework

This policy follows relevant legislation and Department for Education guidance on supporting pupils with medical conditions in school. It should be read alongside the school's Allergy Safety Policy and other relevant school policies. Both policies will be reviewed regularly to ensure they remain up to date with current guidance and legal requirements.

## 3. Roles and Responsibilities

Supporting pupils with medical conditions is a shared responsibility. We will work closely with parents and carers, healthcare professionals and staff to make sure pupils receive the support they need to stay safe and take part fully in school life.

**The Headteacher**
The Headteacher is responsible for making sure this policy is followed and that appropriate arrangements are in place to support pupils with medical conditions.

**The Medical Conditions Lead**
The school will identify a member of staff to coordinate support for pupils with medical conditions. This includes helping to arrange Individual Healthcare Plans, keeping relevant information up to date and ensuring staff know what to do when a pupil needs support.

**School staff**
Staff will follow this policy and any relevant Individual Healthcare Plan. Staff who are trained to administer medication or provide medical support will receive appropriate training and guidance. All staff should know how to respond if a pupil becomes unwell or has a medical emergency.

**Parents and carers**
Parents and carers should provide accurate, up-to-date information about their child's medical needs, supply prescribed medication and equipment where required, and inform the school of any changes. They should work with the school and healthcare professionals to agree the support their child needs.

**Pupils**
Where appropriate to their age and understanding, pupils will be encouraged to take part in decisions about managing their medical needs and to develop independence safely.

**Healthcare professionals**
Healthcare professionals may advise the school and family on a pupil's medical needs, provide relevant information and help inform Individual Healthcare Plans where needed.

**The Governing Body**
The Governing Body has overall oversight of the school's arrangements for supporting pupils with medical conditions.

## 4. Identifying pupils and Individual Healthcare Plans

At admission and whenever a parent/carer reports a medical need, the school will gather relevant information and decide, in consultation with the family and healthcare professionals where appropriate, what support is needed. An IHP will be prepared where the pupil's condition or treatment requires individual arrangements, particularly where the condition is complex, long-term, fluctuating or may require emergency intervention.

An IHP should, as relevant, record:

- the pupil's condition and individual needs, including symptoms, triggers and signs of deterioration;
- medication, dose, method, timing and storage/access arrangements;
- what staff should do in routine circumstances and in an emergency, including when to call 999;
- the level of support the pupil can safely manage independently;
- staff training and named roles required, including cover arrangements;
- arrangements for lessons, food, PE, trips, clubs, residential visits and other activities;
- parent/carer and relevant healthcare contact details, review date and information-sharing permissions.

IHPs will be developed with the pupil where appropriate, parent/carer, designated school staff and relevant healthcare professionals. The school will keep a central record of all IHP's on Arbor.
IHPs will be reviewed at least annually and sooner if the pupil's needs, medication, treatment, emergency plan or school arrangements change, or following a relevant incident. Parents/carers must notify the school promptly of changes. The school may seek additional clinical advice where necessary before confirming a plan.

## 5. Staff training and cover

Staff who administer medication or support pupils with specific medical needs will receive appropriate training. The school will make sure that staff know what to do in an emergency and that suitable cover arrangements are in place when trained staff are absent.

## 6. Administering medication

Medication will be administered at school only where there is a clear need and appropriate written authorisation and instructions are in place, except where emergency action is required under the pupil's plan or applicable guidance.

The school will use a written parental consent form and, where appropriate, the IHP or clinician's instructions. Any telephone authorisation in exceptional circumstances must be recorded promptly and followed by written confirmation in line with the school's approved procedure.

Medicines must normally be supplied in their original packaging with the medical leaflet, clearly labelled with the pupil's name, medicine name, dose, instructions and expiry date. The school will not change prescribed doses based on a parent's request alone; any discrepancies will be checked with the prescriber or pharmacist.

Before administration, staff will check the pupil, medicine, dose, route, time, expiry date and written instructions, and check when the last dose was given where relevant.

Each administration will be recorded promptly, including medicine, dose, date, time, staff member and any relevant observations. Errors, omissions, adverse reactions or refusals will be recorded and escalated as appropriate.

A child who refuses medication will not be forced to take it. Staff will follow the IHP or instructions, record the refusal, assess any immediate risk and inform the parent/carer and appropriate lead/senior member of staff promptly.

No child under 16 will be given a medicine containing aspirin unless prescribed by a doctor.

**Prescription and non-prescription medicines**
The school's agreed procedure for non-prescription medicines, including pain relief and antihistamines. Staff will only give a medicine when appropriate written consent and clear instructions are in place, and after checking the dose, timing and any previous dose. The school will confirm before approval whether it will hold any medicines for general or emergency use and will document the arrangements for their safe use.

**School-held medicines**
All Saints keeps a school supply of paracetamol and Piriton (an antihistamine). These will only be given in line with the school's agreed procedure and with prior written and or verbal consent from a parent/carer. Staff must check the child's suitability for the medicine, the correct dose and timing, any previous dose and any relevant instructions, and record each administration. Piriton must not be used as a substitute for adrenaline where anaphylaxis is suspected.

The school also keeps spare adrenaline auto-injectors for emergency use. Their storage, checks, staff training and use are set out in the separate Allergy Safety Policy. Spare devices do not replace a pupil's

own prescribed auto-injectors; pupils at risk of anaphylaxis must have their own prescribed devices available in school.

**Controlled drugs**
Controlled drugs prescribed for a pupil will be stored securely and administered by authorised staff in line with the prescription and the pupil's healthcare plan. Staff will record doses given and ensure the medication remains accessible when needed.

**Emergency medicines and emergency response**
Pupils' emergency medication must be readily available wherever they are in school or taking part in school activities. Staff must follow the pupil's healthcare plan and their training. If a serious medical emergency is suspected, staff will call 999, provide appropriate emergency support and contact the parent/carer as soon as possible. The use of spare adrenaline auto-injectors is covered in the school's Allergy Safety Policy.

## 7. Storage, access and disposal of medication

The school will ensure that medicines are stored safely and in accordance with the label and manufacturer's instructions.

1. Medicines will be stored securely and in a way that permits prompt access when required.
2. Medicines requiring refrigeration will be kept in a designated, monitored location.
3. Emergency medicines and devices must be available without avoidable delay. They must accompany the pupil or responsible trained adult during relevant activities and visits.
4. Medicines will not be stored in first-aid boxes.
5. Medicines must be kept separate from food and inaccessible to unauthorised pupils, while ensuring that pupils can access their emergency treatment immediately.
6. The school will normally accept only medicines that meet its labelling, packaging, expiry and instruction requirements, except where a specific clinically appropriate arrangement is documented.
7. Parents/carers are responsible for replacing medicines and equipment before expiry and collecting medicines when they are no longer required or at the end of the agreed period. The school will remind families where practicable.
8. Unused or expired medicines will be returned to the parent/carer for safe disposal or disposed of through an appropriate pharmacy route.
9. The designated medical conditions lead will ensure that expiry dates and storage arrangements are checked at appropriate intervals.

| Item | All Saints' arrangements |
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| Routine medicine storage location(s) | School Main Office |
| Refrigerated medicines | Designated lockable medical fridge in staff room |
| Emergency medication access | Children's emergency medication is kept in clearly labelled bags or boxes in their classrooms, with each child's photograph to help staff identify it quickly. Emergency medication is taken with the children on school trips and must remain readily accessible throughout the school day and during all activities. |
| Person responsible for expiry checks | Allergy Lead |

**8. Educational visits, PE, clubs and other activities**

The school will make reasonable and appropriate arrangements so that pupils with medical conditions can participate in the full curriculum and wider school life.

A pupil will not be excluded from a visit or activity simply because they have a medical condition.

Planning will consider:

- Medication and medical equipment.
- Food and drink requirements.
- Triggers and potential risks.
- Supervision and staffing.
- Emergency access and response.
- Staff training.
- Transport arrangements.
- Overnight arrangements for residential visits.

The visit leader will consult the IHP and parents/carers as necessary and ensure that additional controls are documented in the visit risk assessment. Medication and equipment will travel with the pupil or a responsible, trained adult as specified in the plan.

Staff must know how to obtain help and respond to an emergency. Pupils must not be required to participate when they are unwell or contrary to medical advice. Staff should also consider whether symptoms, fatigue, concentration difficulties or absence may be linked to a medical condition. Where a pupil is struggling to access learning, the school will consider appropriate adjustments and involve the SENCO where relevant.

**9. Inclusion, attendance and the school environment**

The school will:

1. Make reasonable adjustments to support access to the physical environment, learning, meals, toilet breaks, hydration, rest and activities where required by the pupil's condition.
2. Ensure that pupils are not penalised for absence related to their medical condition or medical appointments. Attendance concerns will be considered individually and sensitively.
3. Make staff aware of possible bullying, stigma or social isolation associated with medical conditions and allergies. Concerns will be addressed under the school's relevant behaviour and anti-bullying procedures.

4. Support participation in school trips, sports, clubs and other activities. Any restrictions must be based on the pupil's individual needs and supported by appropriate advice and risk assessment.
5. Ensure that pupils are not routinely sent home, left unsupervised or excluded from normal school activities solely because of their medical condition.
6. Consider the needs of pupils with medical conditions when planning the physical environment, social activities, lessons and school events.

Where appropriate, the school may use PSHE, science lessons, assemblies and suitable learning resources to help pupils understand medical conditions and promote a positive and inclusive environment.

**10. Information sharing and confidentiality**

Medical information will be handled sensitively and in accordance with the school's data protection and privacy arrangements.
Information will be shared with staff and other relevant people only to the extent needed to keep the pupil safe and provide agreed support.
Parents/carers will be told how information is used and shared. The school will seek and record appropriate permissions where required, while recognising that necessary information may need to be shared in an emergency or where another lawful basis applies.
Staff must not discuss a pupil's medical information in public or with people who do not need to know.
Records will be stored securely and retained in accordance with the school's data retention arrangements.

**11. Incidents, errors, refusals and near misses**

All significant medical incidents, medication errors, missed doses, adverse reactions, refusals with potential clinical consequences and near misses must be recorded promptly using Arbor.
The designated medical conditions lead and headteacher will be informed in accordance with the seriousness of the event.
Emergency services and parents/carers will be contacted where appropriate.
Following an incident, the school will review what happened and consider whether changes are needed to:

- The pupil's IHP.
- Staff training.
- Access to medication.
- Communication with parents/carers.
- Risk assessments.
- Storage or administration arrangements.

Actions taken will be documented.
Allergy incidents and near misses must also be recorded, reviewed and reported in accordance with the separate Allergy Safety Policy and current statutory guidance.

## 12. Unacceptable practice

It is generally unacceptable to:

1. Prevent a pupil from accessing their prescribed emergency medicine or equipment promptly.
2. Assume pupils with the same condition have identical needs.
3. Disregard the pupil's or parent/carer's views without proper consideration.
4. Ignore relevant medical advice or the pupil's IHP.
5. Ask an untrained member of staff to undertake a task requiring training.
6. Send a pupil home or exclude them from ordinary school activities solely because of a medical condition, unless an individual plan or immediate safety need justifies a specific action.
7. Send an unwell pupil to the office or medical room unaccompanied when this would be unsafe.
8. Penalise a pupil for medical-condition-related absence.
9. Prevent necessary access to food, drink, toilet breaks or rest required to manage a medical condition.
10. Routinely require a parent/carer to attend school to administer medication or provide support that the school should reasonably arrange.
11. Create unnecessary barriers to participation in trips, PE, clubs or other aspects of school life.
12. Administer medication without appropriate authority, training where required, or a safe record of what was given.

## 13. Complaints

Parents/carers or pupils who are concerned about the support provided should raise the matter with the headteacher or designated medical conditions lead in the first instance.
If the concern is not resolved, it may be pursued through the school's formal Complaints Policy.
Urgent safety concerns should be raised immediately and will be acted on without waiting for a formal complaint.

## 14. Monitoring, review and publication

The headteacher and designated medical conditions lead will monitor:

- Implementation of this policy.
- Staff training and competency records.
- IHP preparation and review dates.
- Medication administration records.
- Incidents, errors and near misses.
- Feedback from pupils, parents/carers, staff and relevant healthcare professionals.

This policy will be reviewed at least annually and sooner following a significant incident, a change in law or guidance, or a material change in school arrangements.
The separate Allergy Safety Policy must also be reviewed and publicised at least annually in accordance with current statutory requirements.
The approved policy will be made available to staff and parents/carers and published on the school website in line with the school's publication arrangements.