



Supporting pupils with medical conditions policy

Updated December 2025

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At All Saints Academy, it is our vision to provide the ‘good soil’ for every member of our community to develop deep roots and **flourish** as a unique individual and achieve their full potential. With the highest of expectations, we nurture and develop each individual so that they can explore who they are and make a positive contribution to our local community and the wider world.



A loving place where we all care, learn and grow together.

Our vision and values are central to all that we do. They are promoted through our curriculum, they run through our policies and they inform our day to day decision making.

Content

1. Aims	3
2. Legislation and statutory responsibilities	3
3. Roles and responsibilities	3
4. Equal opportunities	5
5. Being notified that a child has a medical condition	5
6. Individual healthcare plans (IHPs)	5
7. Managing medicines.....	6
8. Emergency procedures.....	7
9. Training.....	7
10. Record keeping.....	8
11. Liability and indemnity	8
12. Complaints.....	8
13. Monitoring arrangements	8
14. Links to other policies.....	9
Appendix 1: Being notified a child has a medical condition	10
Appendix 2: Procedures for children who are sick or infectious	11

1. Aims

At All Saints Academy we understand that medical conditions requiring support at school can affect quality of life and may be life-threatening.

Our school will support pupils with medical conditions so that they have full access to education, including school trips and physical education.

This policy aims to:

- › Make sure that pupils, staff and parents/carers understand how our school will support pupils with medical conditions
- › Set out the roles and responsibilities for everyone in the school community in regard to pupils with medical conditions
- › Set out the procedure for creating, reviewing and managing individual healthcare plans
- › Set out how we will manage medicines in school
- › Reassure parents/carers that the school will help their child feel safe, supported and included

The named person with responsibility for implementing this policy is Catherine Green (Headteacher).

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 statutory guidance on [supporting pupils with medical conditions at school](#) and the Early Years Foundation Stage statutory framework from the Department for Education (DfE).

3. Roles and responsibilities

3.1 The Local School Board

The Local School Board has ultimate responsibility for making arrangements to support pupils with medical conditions.

The Local School Board will:

- › Review this policy in a timely manner, in line with the relevant legislation and requirements
- › Make sure that the policy sets out the procedures to be followed whenever the school is notified that a pupil has a medical condition
- › Monitor practice, and staff training, in regards to pupils with medical conditions, in line with this policy

The Local School Board delegates the day-to-day implementation of this policy to Catherine Green (Headteacher).

3.2 The Headteacher

The headteacher will:

- › Make sure all staff are aware of this policy and understand their role in its implementation

- › Make sure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans, including in contingency and emergency situations
- › Make sure that all staff who need to know are aware of a child's condition
- › Take overall responsibility for the development and monitoring of individual healthcare plans
- › Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- › Manage cover arrangements in the case of staff absence or turnover, to make sure a suitable staff member is always available, and supply staff are briefed appropriately about pupils' medical needs
- › Approve risk assessments for school visits and school activities outside the normal school timetable that involve provision for pupils with medical conditions
- › 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
- › Make sure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date
- › Implement systems for obtaining information about a child's needs for medicines and keeping this information 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/carers

Parents/carers will:

- › Provide the school with sufficient and up-to-date information about their child's medical needs
- › Provide evidence of appropriate prescription and written permission for medicines to be administered by staff
- › Be involved in the development and review of their child's individual healthcare plan
- › Carry out any action they have agreed to as part of the implementation of the individual healthcare plan, 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 fully involved in discussions about their medical support needs and contribute as much as possible to the development of their individual healthcare plans. They are also expected to comply with their individual healthcare plan.

3.6 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 individual healthcare plan.

Healthcare professionals, such as GPs, paediatricians and specialist consultants, will liaise with our school nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing individual healthcare plans.

4. Equal opportunities

The school will adhere to the legal responsibilities under the Equality Act 2010 and will not unlawfully discriminate against any pupils. 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/carers 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 in Appendix 1 will be followed to decide whether the pupil requires an individual healthcare plan.

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.

5.1 Obtaining information about medical conditions and/or medicines

We will:

- For new starters, send a form to all parent/carers of pupils after their place at the school has been confirmed, but before their first school year starts, to confirm any medicine(s) their child needs. Where a pupil has a new diagnosis and/or a pupil has moved to the school mid-term, we will send a form and put arrangements in place within 2 weeks
- Send a letter to parents/carers at the start of each year as a reminder to update any medical information.

We ask that parents/carers proactively inform us by either phone call to the school office or an email if their child's medical needs change during the school year. Parents/carers can also update this information themselves via Arbor. If changes are made by parents/carers, a notification will be sent to the head teacher.

6. Individual healthcare plans

The headteacher has overall responsibility for the development of individual healthcare plans 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 individual healthcare plan. It will be agreed with a healthcare professional and the parents/carers when an individual healthcare plan 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.

Individual healthcare plans will be linked to, or become part of, any education, health and care (EHC) plan.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The local school board and the headteacher, will consider the following when deciding what information to record on individual healthcare plans:

- › 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.
- › 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 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 or 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 we have parents/carers' written consent (Appendix C)

The person administering the medicine will keep a written record. For 'as and when needed' medication, parents/carers will always be informed on the same day the medicine has been administered, or as soon as reasonably possible.

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 recommended and maximum dosages for the pupil's age, and when the previous dosage was taken.

The school will only accept prescribed medicines that are:

- › In-date

- › Labelled with the official prescription sticker with the child's name
- › Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

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 and not locked away.

Medicines will be returned to parents/carers to arrange for safe disposal when no longer required or out of date.

7.2 Pupils managing their own needs

Where appropriate, pupils may be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents/carers and it will be reflected in their individual healthcare plan.

7.3 Unacceptable practice

Although school staff will use their discretion and judge each case on its merits with reference to the pupil's individual healthcare plan, they will keep in mind that it is not generally acceptable practice to:

- › 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
- › 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 individual healthcare plan
- › Send an ill pupil to the school office unaccompanied or with someone unsuitable (e.g. a fellow pupil who is not old or responsible enough)
- › Penalise pupils for their attendance record if their absences are related to their diagnosed medical condition, e.g. hospital appointments. However, school may ask for appointment evidence.
- › Prevent pupils from drinking, eating or taking toilet or other breaks in order to manage their diagnosed medical condition effectively
- › Require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support for their child, 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.
- › 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' individual care plans 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.

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 individual healthcare plans.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the headteacher or SENDCo (as appropriate). 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 individual healthcare plan
- Help staff to have an understanding of the specific medical conditions they are being asked to support 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 are aware of this policy and understand their role in implementing it – for example, with preventative and emergency measures so that they can recognise and act quickly when a problem occurs. This policy will be provided for new staff during their induction.

10. Record keeping

The school will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school.

Individual healthcare plans are kept in a readily-accessible place that all staff are aware of (folder in SLT office and inside the stock room door in each classroom).

10.1 Recording information about medical needs

We will:

- Enter each pupil's medical need in the school's system (Arbor)
- Update our records when parents/carers of pupils inform us of changes to their child's needs. Parents/carers also have the ability to update their child's records as needed via Arbor.
- Keep a record of changes, labelling the most recent record for each child
- Make sure that all staff have access to records so that they are informed about pupils' medical needs
- Securely hold this information digitally

11. Liability and indemnity

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

We will ensure that we are a member of the DfE's risk protection arrangement (RPA).

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 the headteacher in the first instance. If the headteacher cannot resolve the matter, they will direct parents/carers to the Trust's complaints procedure.

13. Monitoring arrangements

This policy will be monitored by the headteacher.

It will be reviewed and approved by the Local School Board every two years.

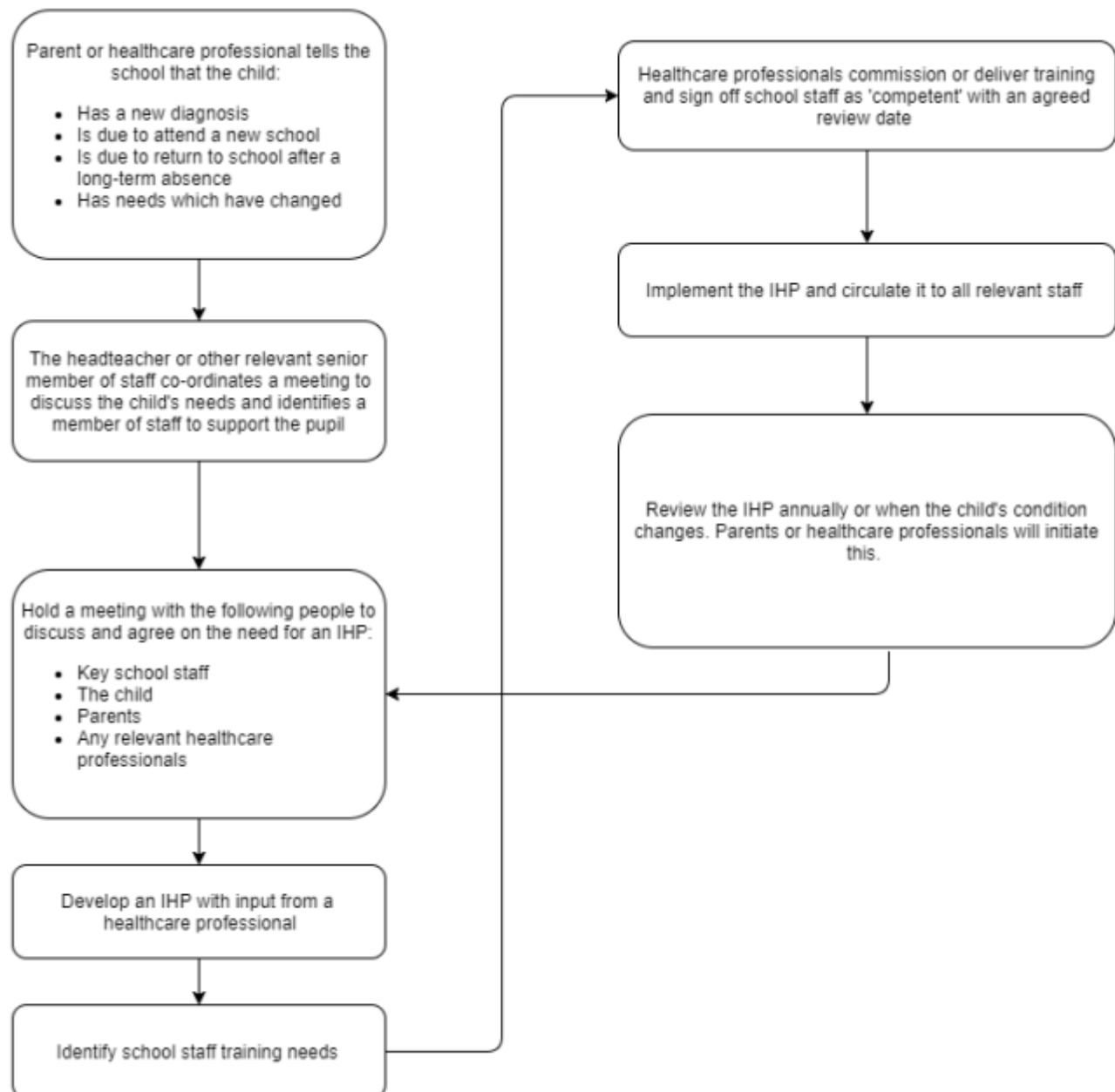
14. Links to other policies

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 A:

Being notified a child has a medical condition



Appendix B:

Procedures for children who are sick or infectious

- › Pupils who have an infectious disease shouldn't attend school/nursery
- › Parents should notify the school if their child has an infectious disease
- › If a pupil becomes unwell during the day – for example, they have sickness or diarrhoea – the parents or carers will be contacted to collect their child
- › Pupils with sickness, diarrhoea or an infectious disease should not attend school/nursery while they are sick. Depending on the sickness, staff may ask parents to take their child to the doctor before they return to school
- › Staff will notify parents if a risk to other pupils exists

Children with specific infectious diseases set out in the [UK Health Security Agency's exclusion table](#) will not be allowed to return to school/nursery until the appropriate exclusion period has passed.

We will take the following steps to prevent the spread of infection:

- › Reducing or eliminating sources of infection through good hygiene practices
- › Good handwashing practice
- › Encouraging and facilitating healthy eating
- › Ensuring that regulated food hygiene standard requirements in the maintenance of food preparation areas and preparation of food are followed
- › Championing and educating staff, parents, carers and pupils on the importance of immunisation as a tool against infection (while recognising the individual's right to choose)
- › Establishing a daily cleaning routines.



Appendix C:

Parental consent for school to administer medicine

THE SCHOOL/SETTING WILL NOT GIVE YOUR CHILD MEDICATION UNLESS THIS FORM IS **FULLY** COMPLETE.

Name of school/setting	All Saints Academy
Date of request	
Name of child	
Date of birth	
Year group	
Medical condition or illness	
Name/type of medicine (as described on the container)	
Prescribed or non-prescribed	
Date dispensed (if prescribed)	
Expiry date of the medication	
Dosage and method	
Timing	
Special precautions/other instructions	
Date the course of medication finishes	
Are there any side effects that the school/setting needs to know about?	
Procedures to take in an emergency	
Name of child's doctors surgery	
Details of parent/carers completing the form	
Name	
Relationship to child	

Contact telephone no.	
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NB:

- Medicines must be in the original container
- If prescribed, it **must** have the prescription label with the child's name on it
- The medication **must** be in date.

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. 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.

I understand that it is the school policy not to force children to take their medication if they refuse to do so. In the event of this occurring, the nominated contact will be notified.

I understand that the school cannot accept responsibility for any adverse reaction my child may suffer as a consequence of being administered the medication on this form at my request.

The information requested will be used for the purpose it is intended only and access to this data will be restricted only to those who are required to process this. It will be retained in accordance with the retention schedule.

Parent/carers signature(s) _____ Date _____

I can confirm that all required checks have been completed before accepting the medication into school.

Medication & form accepted by _____ Date _____

I agree for the medication listed to be administered to the child named within this form by a competent member of school staff.

Headteacher/SLT signature _____ Date _____

Appendix D:

Record of medicine administered to an individual child

Name of child _____

Name of medication _____

Sheet number _____

Date	Time	Dose given	Name of staff member	Witness

*Also use this form to record any refusals

Appendix E:

Checklist for accepting medication into school and administering medication

Accepting the medication into school

- The parent/carer has **fully** completed the parental consent form for the medication (Appendix C).
- An individual healthcare plan is in place for medication that is long-term (over 12 days including weekends).
- The medication is in its original container and the information sheet is included.
- If prescribed, the prescription sticker is visible (on the box or the bottle). The name of the child is on the sticker.
- If not prescribed, the medication is clearly labelled with the child's name and year group.
- The medication is in date.
- For non-prescribed medication, the medication must not contain aspirin.
- Check time of last dosage (if relevant).
- The parental consent form has been signed by the headteacher (or other member of SLT in the headteachers absence).
- The parental consent form is given to the class. These are stored in the class's medication folder.
- Inform any other relevant staff (e.g. breakfast club or after school club).

Administering medication

- Check the prescription label for name or check name label.
- Check dosage information.
- Administer the medication with a witness present.
- Complete the 'Record of medicine administered to an individual child' form (Appendix D)

All medication forms must be kept until the child leaves the setting.