



Supporting children with medical conditions policy

Last Review	Spring 2026
Next Review	Spring 2027

The named members of school staff responsible for this medical conditions policy and its implementation is:

NAME: Victoria Mowbray and Kelly Wall

ROLE: Co-Head Teachers

DfE guidance

Governing bodies should ensure that all schools develop a policy for supporting pupils with medical conditions that is reviewed regularly and is readily accessible to parents and school staff.

Governing bodies should ensure that the arrangements they set up include details on how the school's policy will be implemented effectively, including a named person who has overall responsibility for policy implementation.

Details should include:

- who is responsible for ensuring that sufficient staff are suitably trained,
- a commitment that all relevant staff will be made aware of the child's condition,
- cover arrangements in case of staff absence or staff turnover to ensure someone is always available,
- briefing for supply teachers,
- risk assessments for school visits, holidays, and other school activities outside of the normal timetable,
- monitoring of individual healthcare plans.

St. Bartholomew's school is an inclusive community that supports and welcomes pupils with medical conditions.

- St. Bartholomew's is welcoming and supportive of pupils with medical conditions. It provides children with medical conditions with the same opportunities and access to activities (both school based and out-of-school) as other pupils. No child will be denied admission or prevented from taking up a place in this school because arrangements for their medical condition have not been made.
- Staff will listen to the views of pupils and parents/carers.
- It is our intent that pupils and parents/carers feel confident in the care they receive from this school and the level of that care meets their needs.
- Staff understand the medical conditions of pupils at this school and that they may be serious, adversely affect a child's quality of life and impact on their ability and confidence.
- All staff understand their duty of care to children and young people and know what to do in the event of an emergency.
- The whole school & local health community understand and support the medical conditions policy.
- This school understands that all children with the same medical condition will not have the same needs. Our school will focus on the needs of each individual child.
- The school recognises its duties as detailed in Section 100 of the Children and Families Act 2014. (Other related legislation is referenced in DfE guidance p21). Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case, this school complies with their duties under that Act. Some may also have special educational needs (SEN) and may have an Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For children with SEN, this policy should be read in conjunction with the Special educational needs and disability (SEND) code of practice.

This policy is drawn up in consultation with a wide range of local key stakeholders within both the school and health settings.

- Stakeholders will always include pupils, parent/carers and school staff and may include the school nurse and relevant local health specialist services.

The medical conditions policy is supported by a clear communication plan for staff, parent/carers/carers and other key stakeholders to ensure its full implementation.

This policy is regularly reviewed, evaluated and updated. Updates are produced every year. In evaluating this policy the school seeks feedback from key stakeholders including pupils, parents/carers and school staff. Should parents and pupils be dissatisfied with the support provided they should discuss these concerns with the Head teacher.

Designated Staff

The named members of school staff responsible for this medical conditions policy and its implementation are: Kelly Wall & Vic Mowbray (Head Teachers) and Kelly Wall (SENCO). Kelly Wall and Vic Mowbray will be responsible for ensuring that sufficient staff are suitably trained in First aid. In addition Kelly Wall is responsible for ensuring that Individual Healthcare plans are kept up to date and that relevant information is available to all staff.

In the case of children who need daily medication, several members of staff are to be made aware of the child's needs to ensure any staff absences are covered. This may include the regular class teacher and T.A. and midday supervisors.

Copies of plans are available in the class medical file and supply teachers are to be notified of details of children who may require medical assistance.

Training and Individual Healthcare plans

All staff understand and are trained in what to do in an emergency for children with specific medical conditions at our school (they have access to health care plans).

- All school staff are aware of the medical conditions at this school and understand their duty of care to pupils in an emergency.
- All staff receive training in what to do in an emergency and this is refreshed at least once a year.
- All children with medical conditions that are complex, long-term or where there is a high risk that emergency intervention are required to have an individual healthcare plan (IHP)¹, which explains what help they need in an emergency. The IHP will accompany a pupil should they need to attend hospital. Parental permission will be sought and recorded in the IHP for sharing the IHP within emergency care settings.
- This school makes sure that all staff providing support to a pupil have received suitable training and ongoing support to ensure that they have confidence to provide the necessary support and that they fulfil the requirements set out in the pupil's IHP. This is provided by the school nurse. The school nurse will confirm their competence and this school keeps an up to date record of all training undertaken and by whom.
- This school does hold an emergency salbutamol inhaler for use by pupils.

¹ An example template for an IHP has been produced by Dfe - see template A.

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

- All staff, including temporary or supply staff should be aware of the content of this policy, know what action to take in an emergency and receive updates at least yearly. The school nurse provides annual training for common conditions e.g. asthma, allergies, epilepsy and diabetes.²
- If a pupil needs to attend hospital, a member of staff (preferably known to the pupil) will stay with them until a parent/carer arrives, or accompany a child taken to hospital by ambulance. They will not take pupils to hospital in their own car.

Care, support and administering medication at school

- This school understands the importance of medication being taken and care received as detailed in the pupil's IHP. This care may include having access to drinks, snacks or frequent toilet breaks to manage their condition more effectively. Staff will be informed to allow these conditions.
- Medication will only be administered when it would be detrimental to a child's health or school attendance not to do so.
- This school will make sure that there are sufficient members of staff who have been trained to administer the medication and meet the care needs of an individual child. This includes ensuring that a child who becomes ill is supervised at all times. In the event that escort staff for home to school transport is necessary, these staff should also be made aware of the child's IHP, especially in respect of emergency situations
- This school will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent
- When administering medication, for example pain relief, this school will check the maximum dosage and when the previous dose was given. Parents/carers will be informed and the dosage and time recorded of any medication given in school.
- Trip leaders will make sure that a trained member of staff is available to accompany a pupil with a medical condition on an off-site visit, including overnight stays.
- Parents/carers at this school understand that they should let the school know immediately if their child's needs change.

Storage of medication and equipment at school

- This school makes sure that all staff understand what constitutes an emergency for an individual child and makes sure that emergency medication/equipment, e.g. asthma inhalers, epi-pens etc. are readily available wherever the child is in the school and on off-site activities, and are not locked away. Medication is kept in the classroom cupboard (in a box known by the child).
- Pupils know exactly where to access their medication. Those pupils deemed competent to carry their own medication/equipment with them will be identified and recorded through the pupil's IHP in agreement with parents/carers.
- Staff will make sure that all medication is stored safely, and that pupils with medical conditions know where they are at all times and have access to them immediately. Under no circumstances will medication be stored in first aid boxes or book bags.
- This school will only accept medication that is in date, labelled and in its original container including prescribing instructions for administration. The exception to this is insulin, which though must still be in date, will generally be supplied in an insulin injector pen or a pump.
- Parents/carers/carers are asked to collect all medications/equipment at the end of the school term, and to provide new and in-date medication at the start of each term.

² For pupils requiring insulin injections/insulin via pumps or blood glucose monitoring in schools the Paediatric Diabetes Team will provide this level of training and education.

Record keeping

- As part of the school's admissions process and annual data collection exercise parents/carers are asked if their child has any medical conditions. These procedures also cover transitional arrangements between schools.
- Where necessary an IHP to record the support an individual pupil needs around their medical condition. The IHP is developed with the pupil (where appropriate), parent/carers, designated named member of school staff, specialist nurse (where appropriate) and relevant healthcare services. Where a child has SEN but does not have a statement or EHC plan, their special educational needs are mentioned in their IHP if this is relevant to their condition. Appendix 2 is used to identify and agree the support a child needs and the development of an IHP.
- This school has a centralised register of IHPs; Kelly Wall has the responsibility for this register.
- IHPs are regularly reviewed, at least every year or whenever the pupil's needs change.
- The pupil (where appropriate) parents/carers, specialist nurse (where appropriate) and relevant healthcare services hold a copy of the IHP. Other school staff are made aware of and have access to the IHP for the pupils in their care.
- A pupil's confidentiality is protected and the school will seek permission from parents/carers before sharing any medical information with any external agency.
- This school keeps an accurate record of all medication administered, including the dose, time, date and supervising staff.

Inclusion and school visits

- This school is committed to making sure that pupils with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at school as any other child, and that appropriate adjustments and extra support are provided. The staff and governing body are committed to ensuring that the whole school environment is inclusive and favourable to pupils with medical conditions and pupils/parents are consulted to ensure this accessibility. No child will be prevented from staying for normal school activities, including lunch, unless this is specified in their IHP.
- Staff make sure the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities, extended school activities and residential visits. This includes after school clubs and team sports. This may include medication, equipment or additional food. Risk assessments will be conducted as part of the planning process to take account of any additional controls required for individual pupil needs.
- All staff are aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside the school's anti bullying policy, to help prevent and deal with any problems. They use opportunities such as PSHE and science lessons to raise awareness of medical conditions to help promote a positive environment.
- This school understands that all relevant staff are aware that pupils should not be forced to take part in activities if they are unwell. They should also be aware of pupils who have been advised to avoid/take special precautions during activity, and the potential triggers for a pupil's medical condition when exercising and how to minimise these.
- All school staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition. So, a pupil will not be penalised for their attendance if their absences relate to their medical condition. In addition, the

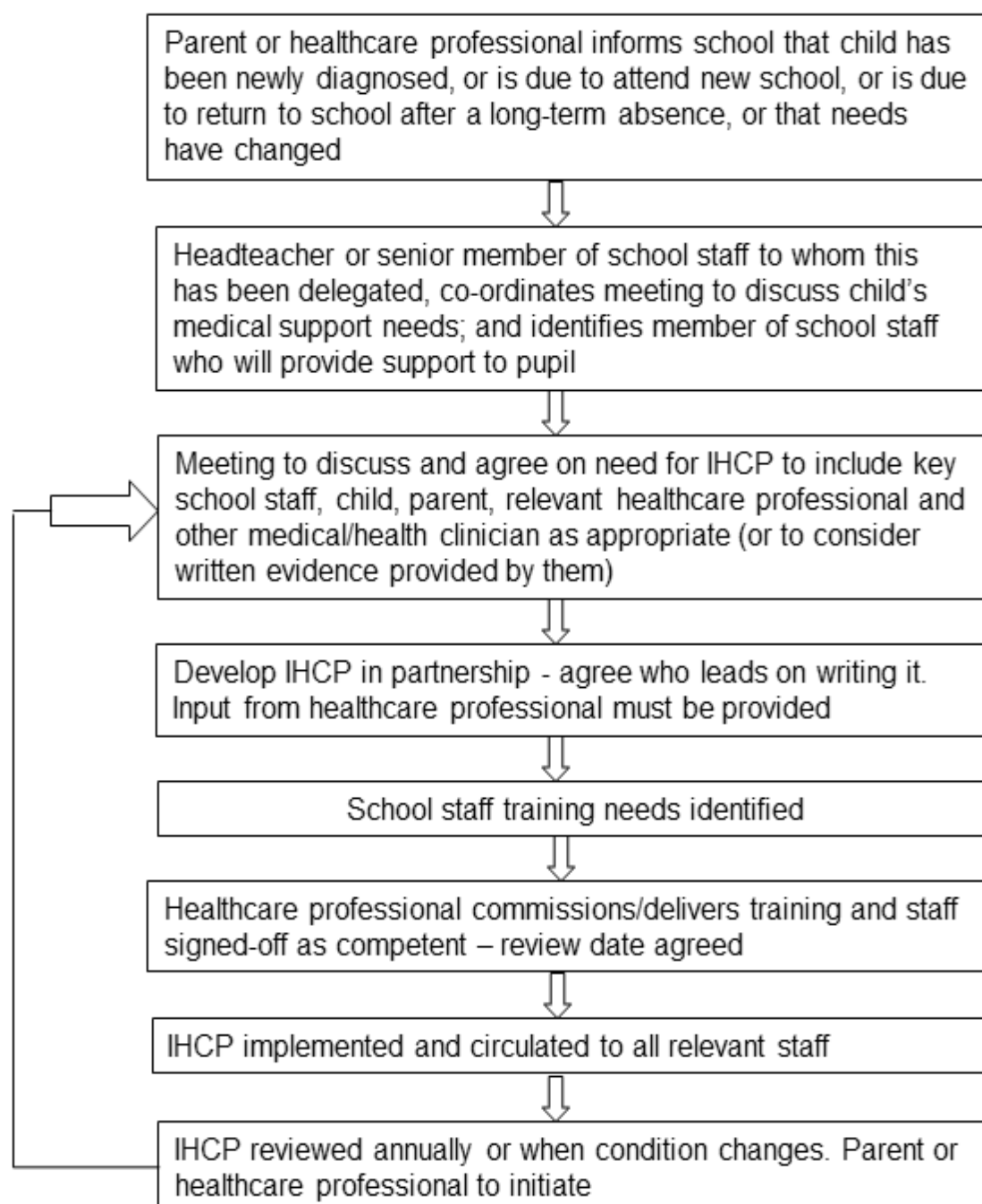
class teacher will refer pupils with medical conditions who are finding it difficult to keep up educationally, to the SENCO who will liaise with the pupil (where appropriate) or parent/carer and the pupil's healthcare professional.

Reducing triggers

- This school is committed to identifying and reducing triggers both at school and on out-of-school (e.g. on visits).
- The IHP details an individual pupil's triggers and details how to make sure the pupil remains safe throughout the whole school day and on out-of-school activities. Risk assessments are carried out on all out-of-school activities, taking into account the needs of pupils with medical needs.
- This school reviews all medical emergencies and incidents to see how they could have been avoided, and changes school policy according to these reviews.

Appendix 1

Process for developing individual healthcare plans



Appendix 2

Roles and responsibilities

Governing bodies – must make arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed and implemented. They should ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. Governing bodies should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. They should also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

Headteacher – should ensure that their school's policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. Headteachers should ensure that all staff that need to know are aware of the child's condition. They should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. Headteachers have overall responsibility for the development of individual healthcare plans. They should also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way. They should contact the school nursing service in the case of any child 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.

School staff – any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach. School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

School nurse – every school has access to school nursing services. They are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they will do this before the child starts at the school. They would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with medical conditions, but may support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training. School nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs - for example, there are good models of local specialist nursing teams offering training to local school staff, hosted by a local school. Community nursing teams will also be a valuable potential resource for a school seeking advice and support in relation to children with a medical condition.

Other healthcare professionals - including GPs, paediatricians, nurse specialists/community paediatric nurses – should notify the school nurse and work jointly when a child has been identified as having a medical condition that will require support at school. They may provide advice on

developing healthcare plans. Anyone dealing with the medical care of a pupil in school should contact the named school nurse for that school to ensure a coordinated approach.

Pupils – with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other pupils will often be sensitive to the needs of those with medical conditions.

Parents/carers – should provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents/carers are key partners and should be involved in the development and review of their child's individual healthcare plan, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Individual Healthcare Plan

Name of school/setting

Child's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Clinic/Hospital Contact

Name

Phone no.

G.P.

Name

Phone no.

Who is responsible for providing support in school

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Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues

Medication:

- Name
- Dose
- Method of Administration
- Side Effects
- Administered by / self administered / with / without supervision

Daily Care Requirements:

Arrangements for School Visits / Trips etc.

Other Information:

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When to Seek Medical Assistance:

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Who is Responsible in an Emergency (*state if different for off-site activities*)

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Plan Developed with

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Staff Training needed/undertaken – who, what, when

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Form copied to

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