



SCHOOL POLICY

Supporting Pupils with Medical Conditions Policy



Policy Revision Date	22 nd January 2026
Review Frequency	Annual
Role / Author	SBM/Debbie Guy
Governing Body Committee/HT	Full Governing Body
Date of GB Meeting/HT review for approval	FGB 9 th February 2026
Due with Clerk to Governors (where applicable)	7 days prior to GB meeting
Governing Body/HT Approval Date	FGB 9 th February 2026
Status (draft / approved)	Approved
Date Policy Due for review:	Spring 2027

Note:

Please ensure tracked changes are used to highlight changes from the last approved version. The document status should be 'Draft'.

Once the changes have been approved by the Governing Body, the tracked changes can be accepted and the document status changed to 'Approved'.

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Policy Review

The following list must be completed prior to submission to the relevant Governing Body meeting/HT for approval.

Links with other Policies	Health & Safety Policy, Special Educational Needs Policy Safeguarding Policies and Keeping Children Safe in Education KCSiE 2025 Complaints Policy First Aid Policy
Model or Locally Produced	Model Policy which is no longer available through Hampshire. DfE Guidance has not changed.
Are changes to model policy or previous policy clearly identified (e.g. track changes)	Track changes has been used to highlight any amendments.
In the view of the HT is the policy related to High, Medium or Low Risk activity to the school	High risk – Safeguarding issues around pupil safety & well-being
What are the likely consequences to school of non-compliance	Harm to children, risk of children being unsafe Exposure to litigation, loss of reputation
Are the governors/SLT accountabilities clearly identified	Yes
Are other accountabilities clearly identified	Yes
Are there any particular issues/risks associated with implementation/operation of policy	Costs associated with staff training Reduction in office personnel
How will policy effectiveness be evaluated	H&S Monitoring Programme
How will HT report to governors on effectiveness and when	HT reports in line with Governors' Planner
When will the policy next be due for renewal (for statutory compliance)	Spring 2027
Does the policy impact on available resources	

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Please note: Elson Junior School is a totally nut free school

In line with the duty, which came into force on 1st September 2014, to support pupils at school with medical conditions we are committed to ensuring that all children with medical conditions, in terms of both physical and mental health, are properly supported at Elson Junior School so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

We recognise that some children have medical conditions which could impact upon their education. We aim to minimise any disruption and ensure each individual child with a medical need is able to access and enjoy the same opportunities in school and on educational trips and visits as any other child.

The prime responsibility for a child's health lies with the parent who is responsible for the child's medication and should supply the school with information from medical professionals. We will ensure that pupils' health is not put at unnecessary risk from, for example, infectious diseases therefore we will not accept a child in school at times where it would be detrimental to the health of that child or others to do so.

This policy will be reviewed annually and it is readily accessible to parents/carers and school staff.

Procedure to be followed when notification is received that a pupil has a medical condition

The Headteacher is responsible for ensuring that whenever the school is notified that a pupil has a medical condition:

- sufficient staff are suitably trained;
- all relevant staff will be made aware of the child's condition;
- cover arrangements are made in case of staff absence or staff turnover to ensure someone is always available;
- supply teachers are suitably briefed;
- risk assessments are conducted for school visits, holidays, and other school activities outside the normal timetable; and
- individual healthcare plans are monitored at least annually.

When our school is notified that a pupil has a medical condition we will:

- make arrangements for any staff training or support
- make every effort to ensure that arrangements are put in place within two weeks
- not wait for a formal diagnosis before providing support to pupils

Individual healthcare plans

When we are informed by a parent or medical practitioner that a pupil has a medical condition a meeting will be convened at the earliest opportunity with parents/carers and where necessary medical practitioners. The purpose of the meeting will be to ensure that we have all relevant information relating to the medical condition and fully understand our role in supporting the pupil. Any parent reporting that their child has an ongoing medical condition such as asthma, epilepsy, diabetes or more complex medical condition will be asked to complete an Individual Healthcare Plan (IHCP). It is a legal requirement that this is updated annually. At our school we will ensure that plans are reviewed at least annually, or earlier if evidence is presented that the

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child's needs have changed. We will assess and manage risks to the child's education, health and social wellbeing, and minimise disruption.

Our IHCP requires information about:

- 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 (NB If a child is self-managing their medication, this should 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 child'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 child'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;**
- arrangements or procedures required for **school trips** or other school activities outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments;
- **what to do in an emergency**, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

The IHCP will be kept in the child's office paper folder, on their online Arbor account profile for staff to access, in the 'Children with Medical Conditions' folder in the Medical Room and in the classroom information folder (available to classroom staff and support teachers). A sign in the staff room directs staff to the medical room to access this information.

The plan will state roles and responsibilities. The responsible person will normally be the class teacher and/or teaching assistant.

Children who manage their own health needs are encouraged to do so and are supported and accompanied by our school staff. This could be while they use inhalers or inject themselves as part of managing diabetes. The child is always consulted as to how they would like to be supported and this becomes part of the health care plan.

Complaints are dealt with in line with our Complaints Policy.

Staff training and support

Staff are supported in carrying out their role to support pupils with medical conditions through appropriate training. Training needs are assessed regularly and training will be accessed through HTLC.

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Any member of school staff providing support to a pupil with medical needs will have received suitable training.

No member of staff will give prescription medicines or undertake healthcare procedures without appropriate training or instruction (updated to reflect requirements within individual healthcare plans).

Managing medicines on school premises

At our school:

- If they have indicated that their child has a medical condition on their registration form, parents/carers will be asked to complete a medical health form when their child starts school to inform us of any health problems or allergic conditions that affect the child and these will be updated regularly.
- Parents/carers are urged to regularly check the expiry dates on medicine e.g. epipens and capsules for inhalers.
- Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so. Parents/carers should be aware that this is a voluntary role on the part of the school and that staff are only permitted to administer medicines prescribed by a medical practitioner.
- No child will be given prescription or non-prescription medicines without their parent's written consent.
- We will never give medicine containing aspirin unless prescribed by a doctor.
- Medication will never be administered without first checking maximum dosages and when the previous dose was taken.
- where clinically possible, we will expect that medicines will be prescribed in dose frequencies which enable them to be taken outside school hours.
- we will only accept prescribed medicines if they are:
 - **are in-date**
 - **are labelled with the child's name**
 - **are provided in the original container as dispensed by a pharmacist**
 - **include instructions for administration, dosage and storage.** *(NB The exception to this is insulin, which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container)*
- All medicines will be stored safely.
- Children will know where their medicines are at all times and will be able to access them immediately. Where relevant, they will know who holds the key to the storage facility. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will be always readily available to children and not locked away, including when pupils are outside the school premises, e.g. on school trips.
- When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes will always be used for the disposal of needles and other sharps.
- School staff will administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines will do so in accordance with the prescriber's instructions.
- **We will keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school will be noted in school.**



Record keeping

We will ensure that written records are kept of all medicines administered to children. We recognise that records offer protection to staff and children and provide evidence that agreed procedures have been followed. Parents/carers will be informed if their child has been unwell at school.

Emergency procedures

Our school's policy sets out what should happen in an emergency situation.

When a child becomes unwell at school they will be attended in the first instance by one of the school's trained first aiders. These people are detailed on the school's safeguarding posters in class rooms and key areas in the school.

Parents/carers will be contacted should the child be considered to be too unwell to be at school or to make them aware of a significant injury sustained during the school day e.g. a bumped head during playtime. A bumped head letter to the parents/carers and sticker for the child will be issued on all occasions.

If a child is seriously unwell or injured staff will call 999 to seek emergency medical help whilst another member of staff also contacts a child's parent.

Supporting Children with Asthma

As with other medication, parents/carers will need to complete a form authorising the medication to be administered. Normally this would involve the child self-administering with the supervision of a member of staff.

We require any asthma medication to be available at all times. Asthma inhalers are kept in the classroom in individual yellow drawstring bags, clearly named with the medical instructions given on the label.

Staff are instructed to make sure that they take asthma medication for individual children with them whenever they take that child out of school.

School Emergency Inhalers

From 1st October 2014 the Human Medicines Regulations 2014 allow schools to keep a salbutamol inhaler for use in emergencies. This is entirely voluntary, and the Department of Health has published a protocol which provides further information. As a school we have agreed to purchase and keep emergency inhalers.

The emergency Salbutamol inhaler will only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or have been prescribed an inhaler as a reliever medication.

The inhaler can only be used if the pupils inhaler is not available e.g. because it is empty or broken. This inhaler is kept in the school medical room alongside a register of pupils whose parents/carers have given permission for its use.

School Emergency Epi Pen



From 1 October 2017 the Human Medicines (Amendment) Regulations 2017 will allow all schools to but adrenaline auto-injector (AAI) devices without a prescription for emergency use in children who are at risk of anaphylaxis but their own device is not available or not working (e.g. because it is broken or out-of-date).

The school's spare AAI will only be used
On instruction from emergency services following a 999 call.

Roles and Responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with any relevant person or agency providing effective support for the child.

The Governing Body

- Must make arrangements to support pupils with medical conditions and ensure this policy is developed and implemented
- Must ensure sufficient staff receive suitable training and are competent to support children with medical conditions

The Headteacher

- Should ensure all staff are aware of this policy and understand their role in its implementation
- Should ensure sufficient numbers of staff are trained to implement the policy and deliver IHCPs, including in an emergency and contingency situations, and they are appropriately insured

School Staff

- Any staff member may be asked to provide support to pupils with medical conditions although they cannot be required to do so
- Any staff member should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help
- A named staff member will be responsible for the administration of medicines and on the rare occasions that person is absent, the parent will retain this responsibility

Parents/Carers

- Must provide the school with sufficient and up to date information about their child's medical needs
- Are the key partners and should be involved in the development and review of their child's IHCP
- Should carry out any action they have agreed as part of the IHCP implementation

Day trips, residential visits and sporting activities

We always actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

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For residential and day trips, the school will carry liquid paracetamol (for children) and antihistamines. Prior to a trip, parents/carers will be contacted with medicine information e.g. brand, ingredients, etc. and consent will be asked for. Parents/carers will be informed if their child required use of these medications.

The following practice is considered not acceptable:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents/carers; or 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 individual healthcare plans;
- if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise children 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/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs;**
or
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents/carers to accompany the child

Liability and indemnity

Maintained schools and academies with a SLA with HCC will be insured as long as all appropriate training and risk assessment has taken place

Proprietors of academies should ensure that either the appropriate level of insurance is in place or that the academy is a member of the Department for Education's Risk Protection Arrangement (RPA).