



Inspiring Futures through Learning

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Supporting Pupils in School with Medical Conditions

September 2023 - September 2025



Policy name:	Supporting Pupils in School with Medical Conditions
Version:	V6
Date relevant from:	September 2023
Date to be reviewed:	September 2025 <i>This policy will be reviewed every two years unless legislation dictates otherwise. Recent changes in Legislation will need to be read and used to review this Policy.</i>
Role of reviewer:	Head of Safeguarding, Health, Children & Families. Head of Quality Assurance.
Statutory (Y/N):	Y
Published on website*:	2C

Policy level**:	1
Relevant to:	All employees through all IFtL schools and departments
Bodies consulted:	Employees Trade unions School / department governance bodies
Approved by:	IFtL Board of Trustees
Approval date:	29 th August 2023

Key:

*** Publication on website:**

IFtL website		School website	
1	Statutory publication	A	Statutory publication
2	Good practice	B	Good practice
3	Not required	C	Not required

**** Policy level:**

1. Trust wide:
 - This one policy is relevant to everyone and consistently applied across all schools and Trust departments with no variations.
 - o *Approved by the IFtL Board of Trustees.*
2. Trust core values:
 - This policy defines the values to be incorporated fully in all other policies on this subject across all schools and Trust departments. This policy should therefore form the basis of a localised school / department policy that in addition contains relevant information, procedures and / or processes contextualised to that school / department.
 - o *Approved by the IFtL Board of Trustees as a Trust Core Values policy.*



- *Approved by school / department governance bodies as a relevantly contextualised school / department policy.*
3. School / department policies
- These are defined independently by schools / departments as appropriate
 - *Approved by school / department governance bodies.*
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Vision

At IFtL Trust Schools, we are relentlessly driven by our pursuit of excellence and high expectations of learning, behaviour, and respect for every member of our community. We are inclusive in our schooling of children with medical conditions and support them to have full access to the curriculum and wider school life.

Aspirations

We will always strive to include children with medical conditions fully into the whole life of the school and offer direct support for their medical needs but also consider any associated social, emotional or academic needs due to their condition. Our aim is to make them feel safe and allow them to flourish, embracing their strengths and developing their talents.

Core Values

We believe in the importance of open, honest and ongoing collaboration and an open partnership between staff, health care professionals, parents and pupils to ensure we are fully able to support pupils with medical conditions and have a deeper understanding of their needs. To ensure that the medical needs of pupils are met, they feel safe, looked after and happy and to ensure they are able to play a full and rewarding role in school life. We also believe that all schools should have clear plans, procedures and systems in place to care for and protect the pupils, the staff and all members of the school community.

Success indicators

All schools within the trust will implement the following indicators:

- 1) We collaborate fully with healthcare professionals, parents, pupils and other staff and take on board advice to meet the needs of the whole child fully.
- 2) We adhere to and closely follow all recommendations within the Statutory Documentation of Supporting Pupils at School with Medical Conditions (2015) to ensure high standards of care and practice.
- 3) We have clear school medical needs policies that outline all recommendations in the above statutory guidance but are pertinent and bespoke to each IFtL school.
- 4) We have clear plans (including Individual Healthcare Plans) and procedures (including emergency procedures) in place which are shared with all staff to respond appropriately to the medical needs of the pupil and with managing or administering medicines within school.



- 5) We plan how we can support access to the whole curriculum, including day trips, residential visits and sporting activities so children can have a full and active role in school life.
- 6) Everyone takes responsibility in our schools, and we ensure there is appropriate training and relevant insurance in place.
- 7) We use Individual Health Care Plans to support the child in managing their condition and overcoming barriers.

Guidance

All IFtL schools follow the guidance laid out under [Section 100 of the Children and Families Act 2014](#) as well as the DfE statutory guidance on [supporting pupils with medical conditions at school](#). As well as this, we follow any relevant guidance issued by NHS England, as well as Local Authority guidance relevant to this policy.

Inclusion

Pupils with medical needs will be fully supported in our schools to access the full curriculum in ways that are appropriate to their needs. This includes actively supporting pupils with medical needs to access day trips, residential visits and sporting activities. Schools will make reasonable adjustments to ensure that trips are fully inclusive.

Our schools are mindful that as well as considering medical needs, pupils may have additional social, emotional or educational needs because of their medical condition and these will be planned for accordingly.

Where appropriate, individual risk assessments will be carried out to identify measures to support pupils with medical conditions to access trips, visits and activities.

Collaboration

Our IFtL schools work in partnership with healthcare professionals to ask for advice, support and further understanding of best practice to meet pupils' needs. We also understand the importance of the views of parents/ carers, and pupils themselves, when writing plans and discussing how needs will be best met within the school.

Schools will also collaborate with parents/carers and ensure that parents/carers are aware of their responsibility to notify the school of any relevant medical condition, to provide any appropriate medication and to ensure that an in-date supply of medication is provided to the school.

In the unlikely event that parents/carers are dissatisfied with communication, or the meeting of needs for their child, complaints should be directed to the school Headteacher. Should this need to be escalated, complaints can be made directly to the Trust. Please refer to the Trust's Complaints Procedure for further guidance.

We understand collaboration with the school nursing team is also paramount. Our schools ensure that they use this resource for support and advice before the pupil starts school as well as during their time at the school including advice, training and signposting/seeking additional support where appropriate.



In line with guidance issued to schools by the NHS Clinical Commissioning Group, schools should not insist on parents receiving a prescription from a GP for items that are readily available over the counter (OTC).

Schools should accept OTC medicines, subject to the same stipulations as prescribed medicines regarding original packaging, labelling with the pupils name and clear dosage instructions.

Following NHS guidance, the use of nonprescribed medicines should usually be short-term (24-48 hours) and should generally only be accepted in exceptional circumstances.

Procedures and Individual Healthcare Plans (IHPs)

IFtL Schools ensure that IHPs are put in place as soon as they are notified of a medical condition. We do not wait for the formal diagnosis to put plans and procedures in place, however we do amend them when a formal diagnosis is given and take all advice from the health care professionals.

Headteachers will ensure that IHPs are implemented, that trained staff are available to implement and support these plans and that all staff that need to be aware of an IHP are made aware, kept up to date with any changes, and know who to contact for assistance and support, should it be required.

All our schools are required to have clear and comprehensive plans, procedures and systems in place to ensure their policy and the statutory guidance that Individual Healthcare Plans are properly, effectively and sensitively implemented. Schools must have a named person holding overall responsibility for overseeing that medical needs are being met.

Any member of staff may be asked to provide support for pupils with medical conditions, but they cannot be forced to do so. IFtL schools should ensure that sufficient staff are willing, available and sufficiently trained to support pupils where required.

All staff with day to day contact with a pupil with medical needs must know what to do, how to respond, and who to contact should the pupil require help.

Individual Healthcare Plans should be developed, in mutual agreement with the school, healthcare professionals, parents/ carers and, where appropriate, with the pupil themselves.

In our schools, these plans are detailed, and it is the responsibility of Headteachers to ensure that these are in place and followed, fully utilising advice from healthcare professionals.

IHPs are used by our schools to assess and manage risk to children's education, health and social wellbeing. All IHPs must include appropriate emergency procedures.

If a child has an Education Health Care Plan (EHCP) then the Individual Healthcare Plan should be identified and linked to the EHCP. IHPs should be regularly reviewed at least annually, or sooner if the pupil's needs have changed.

The information that must be included in an Individual Healthcare Plan is outline in the statutory guidance; [Supporting Pupils in Schools with Medical Conditions](#)



Training

Headteachers will ensure that suitable training is given to staff by an appropriate professional for supporting pupils and administering medicines. Training must be commissioned, and provided, prior to the child starting school. If a new diagnosis is received then any necessary training should be carried out within two weeks of diagnosis.

This training is to fulfil statutory requirements to provide all staff with appropriate knowledge and skills to support all children.

Training to address specific medical needs of pupils, including asthma, anaphylaxis, diabetes, eczema and epilepsy should be implemented as required.

There will be a number of staff in each school who have received general first aid training that allows them to appropriately and confidently deal with some more common medical conditions and also minor injuries that may be sustained in school.

Insurance

All IFtL schools are covered by the DfE's Risk Protection Arrangement (RPA) which is an alternative to commercial insurance.

The RPA provides full cover as required by statutory guidance and is arranged and managed by the Trust.

School Policy

All IFtL schools are required to follow this Trust-Wide policy and should set their own local procedures which describe how they implement this policy within their own individual setting.

Trust policy will be reviewed in line with the schedule stated in this policy. Local school procedures should be reviewed annually, or sooner if circumstances dictate.

Medication

Medication will only be administered in IFtL schools where not administering medication would be detrimental to a pupil's health or school attendance.

Parental consent is required before any medicines can be administered and this must be provided in writing with the details of the medication and the dosage.

If a pupil has been issued medication without parental knowledge (subject to the pupil being old enough to be responsible for their own personal data), parental consent will not be required. (This generally applies to pupils over the age of 13. If this circumstance should arise, advice must be sought from the Trust).

Pupils under 16 will not be given any medication containing aspirin unless this is prescribed by a doctor.

All medicines must be provided in their original container, they must be in-date and labelled with the child's name and class details.

All medicines will be stored securely, and pupils will be informed of the location of their medicine and the name of the person responsible for administering it.



Pupils will not be prevented or delayed when requiring access to medication and staff should be aware of the severity of need for certain medications, such as EpiPens or inhalers, with immediate access available at all times.

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

Full and detailed records of medicines administered must be kept and must include the date, time and dosage. Records must be consulted prior to administering medicines to ensure that a previous dose has not been issued by another person.

Unless schools have a dedicated school nurse managing the administration of medicines, it is good practice to ensure 2 people check that the correct medication is being given to the correct pupil to reduce the likelihood of human error.

Should any pupil require controlled drugs as defined under the [Misuse of Drugs Regulations 2001](#), these should be kept within a 'double locked' system, for example in a locked box kept inside a locked cupboard. This is to reduce the risk of human error, should a cupboard be left unlocked by mistake.

Should controlled drugs need to be in possession of the pupil, an individual assessment will need to be undertaken to determine the competency of the pupil to retain the substance on school premises and the risk associated with doing so. This assessment will always be undertaken on an individual basis in consultation with the Trust.

Unacceptable Practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, 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
- 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 IHPs
- If the pupil becomes ill, send them to the school 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 in order to manage their medical condition effectively

Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupil, 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

