

CAMBRIAN

Nurturing Growth - Inspiring Minds



St John's



CE ACADEMY

Supporting Pupils with Medical Conditions

School Procedures

Last reviewed: February 2025

This document applies to all academies and operations of Cambrian Learning Trust.

www.cambrianlearningtrust.org

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In this document:

'The Trust', 'We' and 'Our' refers to the Cambrian Learning Trust.

Parent refers to:

- Any person who has parental responsibility for a child / young person
- Any person who has care of a child / young person (i.e. lives with and looks after the child/young person)

1. Aims

This policy aims to ensure that:

- Pupils, staff and parents understand how our school will support pupils with medical conditions
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities

The governing board will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupils' conditions, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- Providing supply teachers with appropriate information about the policy and relevant pupils
- Developing and monitoring individual healthcare plans (IHCPs)

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 Department for Education (DfE)'s statutory guidance on [supporting pupils with medical conditions at school](#)

3. Roles and responsibilities

3.1. The Parent is responsible for

- Notifying the school that their child has a medical condition. Wherever possible this should be done before the child starts at our school or when new needs arise.
- Providing the school with sufficient and up-to-date information about their child's medical needs including letting the school know in writing of any changes to the prescription, its administration or to the support required (see Appendix C: Template for Parental Agreement to Administer Medicine)
- Liaising with the Named Person (see below) to agree the school's role in helping to meet their child's medical needs
- Contributing to the development and review of their child's Individual Healthcare Plan with other relevant professionals
- Carrying out any actions they have agreed to as part of its implementation, e.g. providing medicines and equipment or ensuring they or another nominated adult are contactable at all times
- Ensuring their child is well enough to attend the school
- Informing the school on the first day that their child is absent
- Providing a medical certificate in all cases where absence exceeds one week
- Where possible arranging with their doctor for medication to be administered outside of school hours
- Supplying written information about the medication their child needs to take in the school
- Where possible, arranging for a separate supply of medication for use in the school
- The disposal of medication

It only requires one parent to agree to or request that medicines are administered.

Where parents have difficulty supporting or understanding their child's medical conditions, the school will refer to the appropriate agency.

It is very important for the school to have sufficient information about the medical condition of any child with a long-term medical need at the earliest point possible. Parents have a duty to contribute such information at the formulation of a child's Individual Healthcare Plan.

3.2. The pupil is responsible

- Managing their own health needs and medicines, where they are judged competent to do so and parents agree.
- Being fully involved in discussions about their medical support needs and contributing as much as possible to the development of, and comply with, their Individual Healthcare Plan.

3.3. The school's Named Person responsible for pupils with medical conditions is Sandy Morris-Hornby (Inclusion Lead). In her absence please contact Kerry Cottrell (Head of School.) They can be contacted through the school office.

3.4. This person is responsible for

- Managing the overall implementation and operation of these procedures in the school
- Informing relevant staff of medical conditions
- Administering a training schedule for identified staff, identifying training needs if there is a change in staff, and maintaining training records
- Ensuring that staff are aware of the need to communicate necessary information about medical conditions to supply staff and where appropriate, taking the lead in communicating this information
- Ensuring risk assessments for school visits and other activities outside of the normal timetable are undertaken by the relevant personnel
- Working with parents, pupils, healthcare professionals and other agencies to develop, monitor and review Individual Healthcare Plans, and ensure these are reviewed annually.

3.5. This school nurse is responsible for

- Notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible this should be done before the child starts at our school
- Providing support for staff on implementing a child's Individual Healthcare Plan and providing advice and liaison including with regard to training

3.6. This Local Governing Committee (LGC) is responsible for

- Overseeing the school's procedures and ensuring that arrangements are in place to support pupils with medical conditions
- Many of the medical conditions that require support at school will affect quality of life and may be life-threatening. Some will be more obvious than others. The LGC will therefore ensure that the focus is on the needs of each individual pupil and how their medical condition impacts on their school life
- Ensuring that its arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions in school. The arrangements should show an understanding of how medical conditions impact on a child's ability to learn, as well as increase confidence and promote self-care

Children and young people with medical conditions are entitled to a full education and have the same rights of admission to school as other children. This means that no child with a medical condition can be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made. However, in line with their safeguarding duties, the LGC should ensure that pupils' health is not put at unnecessary risk from, for example, infectious diseases. They therefore do not have to accept a child in school at times where it would be detrimental to the health of that child or others to do so.

3.7. This Headteacher is responsible for

- Making sure all staff are aware of this policy and understand their role in its implementation
- Overseeing the management and provision of support for pupils with medical conditions
- Ensuring that sufficient trained numbers of staff are available to implement these procedures and deliver Individual Healthcare Plans, including to cover absence and staff turnover
- Ensuring that all staff who need to know are aware of a child's condition
- Ensuring that school staff are appropriately insured and are aware that they are insured (Headteacher to get relevant insurance details from the Trust's Central Team)
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

3.8. Teachers and Support Staff are responsible for

- The day to day management of the medical conditions of pupils they work with, in line with training received and as set out in the Individual Healthcare Plans
- Working with the named person to ensure that risk assessments are carried out for school visits and other activities outside of the normal timetable
- Providing information about medical conditions to supply staff who will be covering their role where the need for supply staff is known in advance

NB. Any teacher or support staff member may be asked to provide support to a child with a medical condition, including administering medicines. However, no member of staff can be required to provide this support

4. Training

Staff should not give prescription medicines or undertake health care procedures without appropriate training (updated to reflect Individual Healthcare Plans at all times) from a healthcare professional. A first-aid certificate does not constitute appropriate training in supporting students with medical conditions

Relevant training for specific pupils will be undertaken by staff as required. This will be delivered by the relevant healthcare professionals coordinated by the Inclusion Lead/SENDCo.

Asthma inhalers will be kept in medical cupboards in the individual pupil's classroom along with their Asthma Care Plan. During PE Sessions or trips offsite the inhaler will be carried by the class teacher.

See Appendix F: Template for Staff Training Record – Administration of Medicines

5. Procedure for Informing Supply Staff

Supply staff are made aware of relevant pupil's medical conditions on arrival. However, any medical needs are undertaken by school staff familiar with the child's needs.

6. Procedure when notification received by school about a pupil medical condition

The Named Person will liaise with relevant individuals, including as appropriate, parents, the individual pupil, health professionals and other agencies to decide on the support to be provided to the child (See Appendix G: Template for Letter Inviting Parents to Contribute to Individual Healthcare Plan Development

Where appropriate, an Individual Healthcare Plan will be drawn up

Appendix A describes the process for developing an Individual Healthcare Plan

7. Individual healthcare plans (IHCPs)

The headteacher has overall responsibility for the development of IHCPs for pupils with medical conditions. This has been delegated to Sandy Morris-Hornby (Inclusion Lead.)

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 IHCP. It will be agreed with a healthcare professional and the parents when an IHCP 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 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.

IHCPs will be linked to, or become part of, any education, health and care plan (EHCP). If a pupil has special educational needs (SEN) but does not have an EHC plan, the SEN will be mentioned in the IHCP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The LGC, Head of School and Inclusion Lead, will consider the following when deciding what information to record on IHCPs:

- 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, 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 and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil 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 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.

8. Managing medicines

Staff must not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect requirements within Individual Healthcare Plans).

Medicines and medical equipment are located at:

- Medicines are located in the Medical Room.
- Inhalers and Epipens are located in the designated medical cupboard in the child's classroom.
- Nellie Irvine, Vanessa Clarke, Anna Godfrey, Sandy Morris-Hornby, Kerry Cottrell and Vanessa Hope have access to the key for the medical room.

Medicines will only be administered at the school when it would be detrimental to a young person's health or school attendance not to do so

Written consent from parents must be received before administering any medicine to a child at school (See Appendix C: Template for Parental Agreement to Administer Medicine)

Medicines will only be accepted for administration if they are:

- Prescribed
- In-date
- Labelled

- Provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage
- The exception to this is insulin which must be in date but will generally be available inside an insulin pen or pump, rather than in its original container

Medicines should be stored safely. Pupils should know where their medicines are at all times

Written records will be kept of all medicines administered to pupils (See Appendix D: Template for Record of Medicine Administered to An Individual Child, and Appendix E: Template for Record of Medicine Administered to all Children)

The school does not advocate any student bringing in any medication to school without prior permission from the school

Pupils who are competent to manage their own health needs and medicines, after discussion with parents will be allowed to carry their own medicines and relevant devices or will be allowed to access their medicines for self-medication

8.1. Controlled Drugs

[Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

A pupil who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another pupil to use. All other controlled drugs are kept in a secure cupboard in the school office and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

9. Refusing to take medication

If a pupil refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the Individual Healthcare Plan. Parents should be informed.

In the event that the parents are not contactable, a named health professional known to the pupil should be contacted and in the event that the refusal has a detrimental impact as identified in the Individual Healthcare Plan emergency procedures, such as calling 999, should be implemented. All the above steps and actions should be recorded.

10. Hygiene and infection control

All staff should be aware of basic hygiene precautions for avoiding infection, such as washing and drying hands before and after the administration of medication.

Staff should have access to protective, disposable gloves and take extra care when dealing with spillages of blood or other bodily fluids and when disposing of dressings or equipment.

Where needles are used, a sharps container and adequate arrangements for collection and incineration should be in place.

11. Disposal of medicines

Medicines should not be flushed down the sink or the toilet.

School staff should not dispose of medication. This is the responsibility of parents. When no longer required, medicines should be returned to the parent to arrange for safe disposal. This should be done at least at the end of every term with advice sought from the local pharmacist as to disposal of uncollected medicines.

Sharps boxes should always be used for the disposal of needles. These can be obtained by parents on prescription from the young person's GP or paediatrician. Collection and disposal of the boxes should be arranged with the Local Authority's environmental services.

12. Emergency Procedures

A copy of this information will be displayed in the school office.

Request an ambulance – dial 999 and be ready with the information below. Speak slowly and clearly and be ready to repeat information if asked:

- The school's telephone number
- Your name
- Your location
- Provide the exact location of the patient
- Provide the name of the child and a brief description of their symptoms and any known pre-existing medical conditions
- Inform ambulance control of the best entrance to use and state that the crew will be met and taken to the patient

Ask office staff to contact premises personnel to open relevant gates and doors for entry

Contact the parents to inform them of the situation

A member of staff should stay with the pupil until the parent arrives. If a parent does not arrive before the pupil is transported to hospital, a member of staff should accompany the child in the ambulance.

13. Sporting Activities

The school will ensure that the necessary adjustments will be made for students with medical conditions to participate in the PE curriculum or school-organised sports activities. Some pupils may need to take precautionary measures before or during exercise and may need to have immediate access to their medication.

Staff supervising sporting activities will be aware of the relevant medical conditions, medication requirements and emergency procedures through access to their Individual Healthcare Plan.

Restrictions on physical activity and implications of involvement in physical activities will be recorded in the Individual Healthcare Plan.

Risk assessments will be carried out to determine whether the student can safely participate in physical activities and specialist equipment will be provided where this is deemed reasonable. Designated members of staff assisting the student will be trained in safe manual handling.

14. Activities beyond the usual curriculum

Reasonable adjustments will be made to enable pupils with medical needs to participate fully and safely in day trips, residential visits, sporting activities and other activities beyond the usual curriculum.

When carrying out risk assessments, parents, pupils and healthcare professionals will be consulted where appropriate.

15. Unacceptable practice

The following items are not generally acceptable practice with regard to pupils with medical conditions, although the school will use discretion to respond to each individual case in the most appropriate manner.

- Preventing pupils from easily accessing their inhalers and medication and administering their medication when and where necessary.
- Assuming that every pupil with the same condition requires the same treatment
- Ignoring the views of the pupil or their parents; or ignoring medical evidence or opinion (although this may be challenged)

- Sending pupils with medical conditions home frequently or preventing them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans
- If the pupil becomes ill, sending them to the school office or medical room unaccompanied or with someone unsuitable
- Penalising pupils for their attendance record if their absences are related to their medical condition e.g. hospital appointments
- Preventing pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Requiring parents, or otherwise making 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
- Preventing pupils from participating, or creating unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child

16. Complaints procedure

- An individual wishing to make a complaint regarding the school's actions in supporting a pupil with medical conditions should discuss this with the school in the first instance in line with the schools complaints policy.
- If the issue is not resolved, the parent should follow the steps on the school's complaints procedure which can be found on the school website.

17. Equal Opportunities

Our school is clear about the need to actively support pupils with medical conditions to participate in all school activities, including trips and visits, or in sporting activities, and not prevent them from doing so.

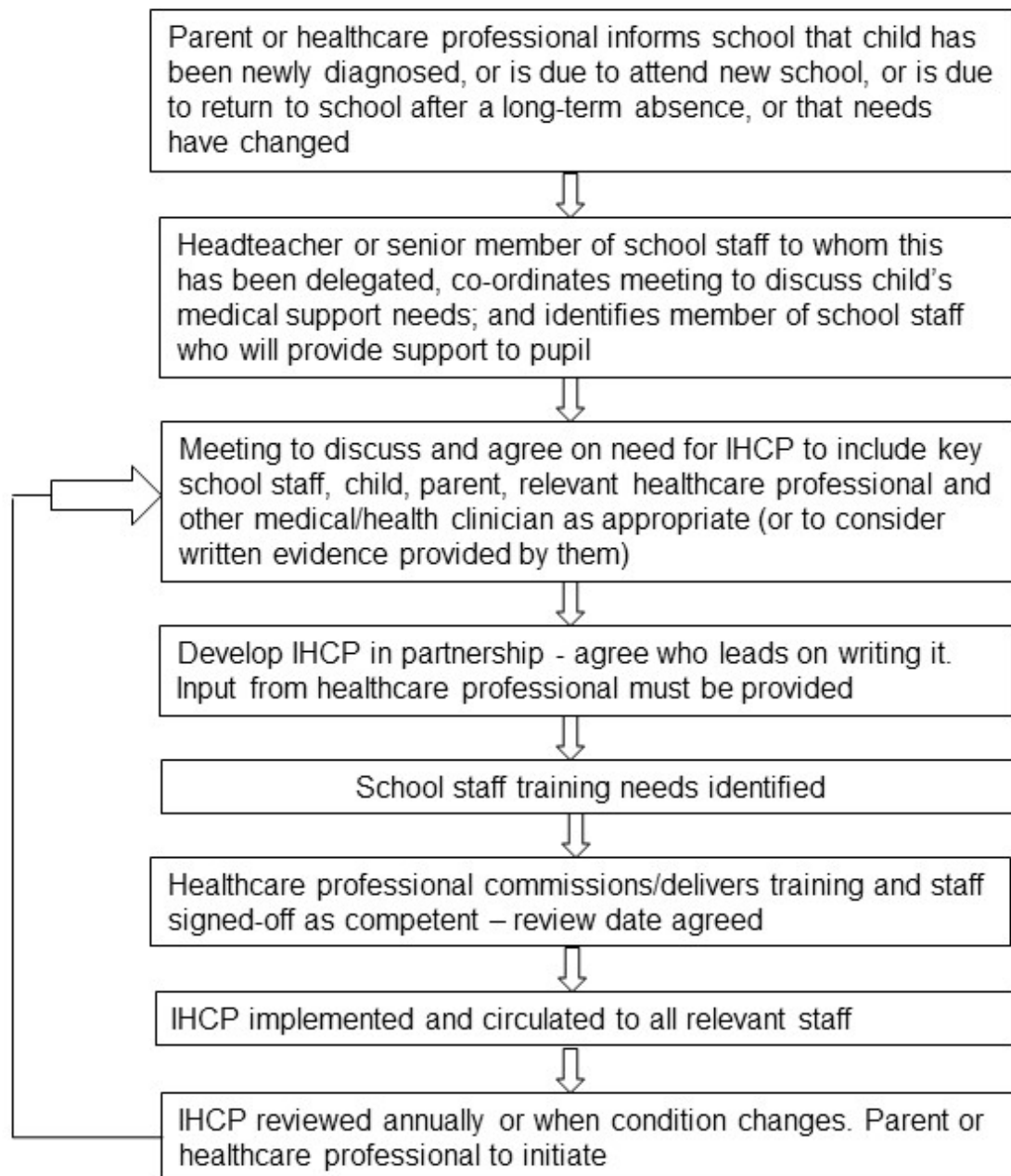
The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

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 and any relevant healthcare professionals will be consulted.

18. Monitoring Arrangements

This policy will be reviewed and approved by the governing committee every 2 years.

Appendix A: Process for Developing an Individual Healthcare Plan (IHCP)



Appendix B: Template for Individual Healthcare Plan¹

For identification purposes, attach a photo of the child

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		
Relationship to child		
Phone Numbers	Work	
	Mobile	
	Home	
Relationship to child		
Name		
Relationship to child		
Phone Numbers	Work	
	Mobile	
	Home	
Relationship to child		

Clinic / Hospital Contact	
Name	
Phone no	

GP	
Name	
Phone no	

¹ Additional information may need to be provided for more complex care plans

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 etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (<i>state if different for off-site activities</i>)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

Appendix C: Template for Parental Agreement to Administer Medicine

The school will not give your child medicine unless you complete and sign this form.

Name of school	
Name of child	
Date of birth	
Group / class / form	
Medical condition or illness	

Medicine	
Name / type of medicine (as described on the container)	
Expiry date	
Dosage and method	
Timing	
Special precautions / other instruction	
Are there any side effects that the school / setting needs to know about?	
Self-administration	<input type="checkbox"/> Yes <input type="checkbox"/> No
Procedures to take in an emergency	
NB: Medicines must be in the original container as dispensed by the pharmacy	

Contact Details	
Name	
Daytime telephone no	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[name of agreed member of staff]

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 procedures. 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.

Signature(s) _____ Date _____

Office Use Only

Date for review to be initiated by: _____

Is there an Individual Healthcare Plan?: _____

Appendix D: Template for Record of Medicine Administered to an Individual Child

Name of school / setting	
Name of child	
Date medicine provided by parent	
Group / class / form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Staff signature _____

Signature of parent _____

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

D: Record of medicine administered to an individual child (Continued)

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Appendix E: Template for Record of Medicine Administered to all Children

Name of school/setting	
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Date	Child's name	Time	Name of medicine	Dose given	Any reactions	Signature of staff	Print name

Appendix F: Template for Staff Training Record Administration of Medicines

Name of school	
Name	
Type of training received	
Date of training completed	
Training provided by	
Profession and title	

I confirm that _____ [insert name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated on _____ [insert suggested review date].

Trainer's signature _____

Date _____

I confirm that I have received the training detailed above.

Staff signature _____

Date _____

Suggested review date

Appendix G: Template for Letter Inviting Parents to Contribute to Individual Healthcare Plan Development

Dear PARENT NAME,

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's procedures for supporting pupils at school with medical conditions for your information.

A central requirement of the procedures is for an Individual HealthCare Plan (IHCP) to be prepared, setting out what support each pupil needs and how this will be provided. IHCPs are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although IHCPs are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within IHCPs will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's IHCP has been scheduled for TIME/DATE. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve NAMES. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [OR ANOTHER MEMBER OF STAFF INVOLVED IN PLAN DEVELOPMENT OR PUPIL SUPPORT] would be happy for you contact me [THEM] by email or to speak by phone if this would be helpful.

Yours sincerely

Sandy Morris-Hornby

Inclusion Lead and SENDCo

Attachments:

Supporting Pupils with Medical Conditions – School Procedures

Template for Individual Healthcare Plan