



ASPIRE LEARNING  
PARTNERSHIP OF SCHOOLS

# Supporting Children with Medical Needs

<b>Date of Approval:</b>	<b>28 January 2026</b>
<b>Date of Next Review:</b>	<b>January 2027</b>
<b>Signed: Executive Headteacher</b>	<b>M Talbot</b>
<b>Signed: Chair of Governors</b>	<b>M Hall</b>

## Document History

Date	Change Reference	Summary of Change
27 October 2023	Page 4	Change of location for the storage of asthma inhalers.
23 September 2025	Page 4	Additional information regarding administering medicines in school.
19 January 2026	Pages 4,5 & 6	This policy has been updated with further details from our Medicines and Substance Misuse Policy as this has now been disbanded and a section added regarding administering medicines to EYFS children.
19 January 2026		Merged to an ALPS policy

## **Supporting Children with Medical Needs Policy**

### **The Role of the Governing Board**

The governing board has overall responsibility for ensuring arrangements are in place to support pupils with medical conditions. They must ensure that sufficient staff are suitably trained and competent and that appropriate insurance is in place.

### **Legislation and Statutory Responsibilities**

This policy complies with:

- Section 100 of the Children and Families Act 2014
- DfE Guidance (2015) Supporting Pupils with Medical Conditions at School
- Equality Act 2010 (reasonable adjustments)
- SEND Code of Practice 2014

### **Definitions of Medical Conditions:**

Pupils' medical needs may be broadly summarised as being of two types:

- Short term affecting their participation in school activities because they are on a course of medication.
- Long term potentially limiting their access to education and requiring extra care and support (deemed special medical needs).

### **Our Aims**

To ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

- To ensure that parents feel confident that we will provide effective support for their child's medical condition and that their child feels safe.
- To ensure we fully consider advice received from healthcare professionals; listen to and value the views of parents and pupils.
- To ensure successful reintegration into school for children who have had a long term absence, so that they can be supported to fully engage with their learning and do not fall behind when they are unable to attend.
- To effectively manage short term and frequent absences, including those for appointments connected with a pupil's medical condition and to ensure appropriate support is put in place to limit the impact on the child's educational attainment and emotional and general wellbeing.
- To ensure that where children with medical conditions are disabled school complies with their duties under the Equality Act 2010.
- To ensure that children with medical conditions who also have special educational need are supported in accordance with the SEND code of practice 2014.
- To ensure reasonable adjustments are made to enable children with medical needs to participate fully and safely on visits, sporting activities and other school activities.

### **Procedures to be followed when notification is received that a pupil has a medical condition**

We will ensure that the correct procedures will be followed whenever we are notified that a pupil has a medical condition. The procedures will also be in place to cover any transitional arrangements between schools, the process to be followed upon reintegration or when pupil's needs change and arrangements for any staff training or support.

For children starting at the school, wherever possible arrangements will be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or children moving to the school, we will make every effort to ensure that arrangements are put in place within as soon as practicably possible.

At our school, we will make sure that no child with a medical condition is denied admission or prevented from attending school because arrangements for their medical condition have not been made. However, in line with our Safeguarding duties, we will ensure that pupils' health is not put at unnecessary risk from, for example infectious diseases. We will therefore not accept a child in school at times where it would be detrimental to the health of that child or others.

At this school, in line with national guidelines, we will not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be made about what support to provide based on the available evidence. This would normally involve medical evidence and consultation with Parents/Carers. Following the discussions an Individual healthcare plan will be put in place.

### **Management of medication within the school**

There may be occasions where parents/carers are advised that their child may return to school while still needing to take medicines. When medication has been prescribed, we will encourage parents/carers to ensure that their child's medication is taken out of school hours wherever clinically possible.

- Staff must have appropriate training before giving prescription medication and/or carrying out healthcare procedures. There is no legal or contractual duty on school staff to administer medicine or to supervise a pupil taking it. This is a purely voluntary role and is recognised as such by the DFE. While teachers have a general legal duty of care to their pupils, this does not extend to a requirement to routinely administer medicines. Governors will fully support any member of staff who does not wish to administer medicines or who feels that they are being unfairly pressurised to do so.
- School will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. Insulin 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. The parent must complete the necessary paperwork before medication can be administered.

- Over the counter medicines can be given to pupils. They must be in-date, provided in the original container and include instructions for administration, dosage and storage.
- Parents/carers must complete the necessary paperwork before medication can be administered. They must also confirm that the medicine has previously been administered with no adverse effect. We will not administer eye, ear drops or cream; these require self-administration or parental administration.
- All medicines should be stored safely. Children should know where their medicines are at all times and where appropriate know which adult holds the key to a locked storage facility. Inhalers and Epipens are kept accessible to the child in an appropriately labelled storage container in their shared areas. Medicines stored in designated areas that are inside a locked box.
- School must keep a written record each time a medicine is administered. If we are holding a medicine that is to be given to a child on an ad-hoc basis, school must notify the parent/carer on the same day.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens are always readily available to children and not locked away. This is particularly important to consider when outside of school premises e.g. on educational visits.
- During educational visits, the first aid trained member of staff/member of staff in charge of first aid will carry all medical devices and medicines required. They must ensure they have received written parental confirmation just the same as if the medication was being administered in school. If staff provide a non-prescribed medicine to pupils, they should make a record for each pupil, explaining what medicine has been administered and when and inform the pupil's parents/carers. The school may include non-prescription medicines in our first-aid kit, but only if, the medicine has been purchased from a reliable source, prior consent from parents/carers has been obtained and the child's allergens are checked against the medication before giving it.
- When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles.
- A child under the age of 16 should not be given medicine containing aspirin unless prescribed by a doctor.
- School must date check medicines each time they are administered to ensure they are in date.
- Members of staff may need to bring their own medication into school. This should be safely locked away. It does not need to be stored with pupils' medicine, but must not be kept in classrooms or in any area to which children have access.

## Medicines in Early Years

The same procedures apply for administering medicines in Early Years Foundation Stage (EYFS) as they do for children in Key Stage 1 and 2:

- School will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. Insulin 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. The parent must complete the necessary paperwork before medication can be administered.
- Over the counter medicines can be given to pupils. They must be in-date, provided in the original container and include instructions for administration, dosage and storage.
- Parents/carers must complete the necessary paperwork before medication can be administered. They must also confirm that the medicine has previously been administered with no adverse effect. We will not administer eye, ear drops or cream; these require self-administration or parental administration.
- All medicines should be stored safely. Inhalers and EpiPens are kept accessible to the child in an appropriately labelled storage container in their shared areas. Medicines stored in designated areas that are inside a locked box.
- School must keep a written record each time a medicine is administered. If we are holding a medicine that is to be given to a child on an ad-hoc basis, school must notify the parent/carer on the same day.

## Individual Healthcare Plans

On the advice of and in conjunction with health professionals we will create individual healthcare plans for pupils with significant medical needs. The purpose of this is to identify the level of support that a pupil requires in school. It is a written agreement that clarifies for staff, parents and pupils the help that school can provide and receive.

- Each pupil's healthcare plan will have a regular review date with parents, pupil and a member of staff and/or health worker.
- Each plan clearly states what information may be shared and with whom.
- These plans are kept in the classroom and in the main office.
- Individual healthcare plans will be written and reviewed by the SENCO and class teacher but it will be the responsibility of all members of staff supporting the individual children to ensure that the plan is followed.
- Where a child has SEN but does not have an EHC plan, their SEN should be mentioned in their Individual Healthcare plan.
- Where the child has a SEN identified in an EHC plan, the Individual Healthcare Plan should be linked to or become part of that statement or EHC plan.
- Where a child of sufficient understanding has a significant medical need that requires an Individual Healthcare plan, the child will be invited to participate in drawing up and agreeing the plan.
- The school will ensure that Individual Healthcare plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed.

### **Each Individual healthcare plan should include:**

- 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/noisy conditions.
- Specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete tests, use of rest periods or additional support in catching up with lessons, the level of support needed, (some children will be able to take responsibility for their own health needs), including in emergencies.

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, following written permission from Parents/Carers 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 visits 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.
- Where confidentiality issues are raised by the Parents/Carers or child, the designated individuals to be trusted with information about the child's condition.

Appendix A is a template for the Individual Healthcare Plan and the information needed to be included.

### **Confidentiality**

Whilst, medical and health information will be treated confidentially, in some cases in the interests of the pupil's safety, information about their condition and treatment will need to be shared. In these cases, we will ensure that important information about particular health needs will only be communicated to relevant teaching and support staff following consent from parents/carers and pupils. Specific health needs of individual pupils will only be shared with peers after consent from parents and pupil. Sometimes it will be appropriate for a photograph to be kept with the child's Individual healthcare plan. Normally these will be displayed in areas where pupils have restricted access. This will be discussed with parents/carers and pupils as appropriate.

### **Emergency procedures**

Where a child has an Individual Healthcare Plan, this will clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other pupils in school should know what to do in general terms, such as informing a teacher immediately if they think help is needed.

### **Where it is clear that a child requires urgent medical attention, an ambulance will be called.**

- The caller will provide details of the child's known condition and symptoms.
- Where possible, they will give the name and date of birth of the child.
- Where urgent medication is required, the school will endeavour to administer the medication and call for an ambulance simultaneously.
- The caller will give their name and provide details of the school's location to aid the Ambulance Service.
- Parents/carers will be contacted as soon as possible where emergencies arise.
- Any pupil taken to hospital by ambulance will be accompanied by a member of staff who will remain with the pupil until a parent arrives.

### **Staff Development**

All staff who deals with specific issues or specific health needs will receive appropriate training from health professionals. The school will keep a record of who delivered the training and who received the training and a date for review of further training will be agreed at the first training session. At our school, we recognise that a first-aid certificate does not constitute appropriate training in supporting children with medical conditions. Healthcare professionals, including School Nursing, will provide training and subsequent confirmation of the proficiency of staff in a medical procedure, or in providing medication. If a serious medical incident occurs in school, a debriefing session will be arranged in school.

### **Equality of opportunity**

Pupils with special medical needs have the same right of admission to school as other children and will not be refused admission or excluded from school on medical grounds alone.

If a child is deemed to have a long-term medical condition, we will ensure that arrangements are in place to support them. In doing so, we will ensure that such children can access and enjoy the same opportunities at school as any other child.

The school, health professionals, Parents/Carers and other support services will work together to ensure that children with medical conditions receive a full education, unless this would not be in their best interests because of their health needs. In some cases this will require flexibility and involve, for example, programmes of study that rely on part time attendance at school in combination with alternative provision arranged by the Local Authority and health professionals. Consideration will also be given to how children will be reintegrated back into school after long periods of absence.

### **School visits and residential visits**

We will make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not

possible. Risk assessments will be carried out, provision will be made in Individual Healthcare Plans and staff will receive suitable training.

### **Sporting activities**

Our PE curriculum and provision of sporting activities enables all pupils to take part in ways which are appropriate to their abilities. Any restrictions on a particular pupil's ability to participate in PE will be clearly identified and incorporated into the pupil's individual healthcare plan.

### **Parents/Carers**

- Parents/carers are asked to provide the school with full information about their child's medical condition and any treatment or special care needed at school and to keep us informed of any new or changing needs
- Whilst we encourage regular school attendance, children who are acutely unwell should not be sent to school
- Parents/carers should try to ensure that their child's medication is taken out of school hours wherever possible.

### **Where pupils are required to take medication during school time, parents/carers must complete medicine consent form**

- Parents/carers should ensure that they provide the school with emergency contact(s) where they or a nominated person can be contacted should their child become ill.
- If there are any special religious and/or cultural beliefs which may affect any medical care that the pupil needs, particularly in the event of an emergency, parents/carers need to inform school and confirm this in writing
- Parents should regularly check the expiry date of medicines. It is the parent's responsibility to collect and dispose of any out of date medicines.
- Where a pupil has a significant medical need and health professionals advise that an Individual Healthcare Plan is required, parents/carers will be asked to provide information in relation to the medical condition and to agree and sign the plan.
- Parents/carers should inform the school as soon as possible of any changes in their child's condition or treatment.

### **The Child's Role in managing their own Medical Needs**

- If it is deemed, after discussion with the Parents/Carers that a child is competent to manage their own health needs and medicines, the school staff will encourage them to take responsibility for managing their own medicines and procedures. This will be reflected within Individual Healthcare Plans.
- Children will have access to medicines for self- medication quickly and easily. Children who can take their medicines themselves or manage procedures will be supervised by an adult.
- If a child refuses or is unable to take medicine or carry out a necessary procedure, staff should not force them to do so but instead follow the procedure agreed in the Individual Healthcare Plan. Parents/Carers should be informed, outside of the review, so that alternative options can be considered.

- We acknowledge that a child with a medical condition will often be best placed to provide information about how their condition affects them. Alongside their parent / carer, the children will be involved in their Individual Healthcare Plan at an age appropriate level. After discussion with parents, children who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be reflected within their Individual Healthcare Plans.
- Whilst we encourage regular school attendance, children who feel very unwell before leaving home in the morning should ensure that they tell their parent/carer, who can then decide whether they are well enough to attend school.
- All medicine needs to be handed in person by the parent to a member of staff who will ensure it is stored safely.

### **Record Keeping**

Records offer protection to staff and children and provide evidence that agreed procedures have been followed.

The school will keep records of the following:

- A register of all pupils at the school who have significant medical needs.
- Individual Healthcare Plans.
- Medication administered or supervised.
- Notification from parents/carers giving consent regarding medication issued.
- Training records
- Emergency form.

### **Management of support for children with medical conditions**

The overall management responsibility for support for children with medical conditions within the school lies with the Head Teacher.

The Head Teacher will ensure that:

- All staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation.
- All staff who need to know are aware of the child's condition
- Sufficient trained numbers of staff are available to implement the policy and deliver the individual healthcare plans, including in contingency and emergency situations.
- Staff receive sufficient and suitable training to achieve the necessary level of competency before they take on responsibility to support children with medical conditions.

The SENCO has responsibility for:

- The day to day coordination of support for children with medical conditions
- Ensuring effective liaison with parents and the child and appropriate agencies
- Working with the head teacher to arrange staff training
- Ensuring that arrangements are in place to inform supply staff of a child's medical condition
- Monitoring that risk assessments are completed for school visits and other activities outside the normal time table.
- Making referrals to the school nurse service when a medical condition is identified.

- Monitoring and reviewing Individual Healthcare Plans in collaboration with other professionals.

#### **School Staff have responsibility for:**

- Any member of school staff may be asked to provide support to children with medical conditions, including the administering of medicines. (NB teaching staff are not required to do so as stated in their contracts)
- 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.

All new members of staff will be inducted into the arrangements and guidelines set out in this Policy.

#### **Liability and Indemnity**

The Governing Body will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk and covers staff providing support to pupils with medical conditions.

Insurance policies provide liability cover relating to the administration of medication, but individual cover may need to be arranged for any health care procedures.

Any requirements of the insurance such as the need for staff to be trained should be made clear and complied with.

#### **Unacceptable Practice**

Although staff should use their discretion and judge each case on its merits with reference to the child's individual healthcare plan, it is not generally acceptable practice to:

- 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
- Send children with medical conditions home frequently 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 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/Carer should have to give up working because the school is failing to support their child's medical needs;
- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including educational visits, e.g. by requiring Parents/Carers to accompany the child.

**Complaints**

Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

**Collaborative working**

Partnership working between school staff, healthcare professionals (and where appropriate, social care professionals), local authorities, and parents and pupils is essential. In order to provide effective support for children with medical conditions school will work cooperatively with other agencies. This includes meetings to facilitate transition between settings.

School will contact the school nurse to support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training. School may also notify and refer a child to the school nurse service when a parent notifies them of a medical need.

## Annex A: Model process for developing individual healthcare plans

