



**Knowleswood**  
Primary School

# Supporting Children with Medical Needs Policy

**Policy details**

Date of Policy Creation: January 2026

Date reviewed: January 2026

Date shared with staff:

Date shared with governors: January 2026

Date of next Policy Review: November 2028

*\*To be reviewed every 2 years and following any changes to legislation*

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## **Policy Statement**

### **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.
- Pupils, staff and parents understand procedures for administering prescription and non-prescription medication.

The governing board will implement this policy by:

- Making sure sufficient staff are suitably trained.
- Making staff aware of pupil's condition, 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 relevant pupils.
- Developing and monitoring individual healthcare plans (IHPs).

### **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's statutory guidance: Supporting pupils at school with medical conditions.

### **Roles & Responsibilities**

#### The Governing Board

The governing board has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

#### The Head Teacher

The Headteacher will:

- Ensure that staff are aware of the policy and understand their role in its implementation
- Ensures that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations.

- Ensure that all staff who need to know are aware of a child's condition.
- Take overall responsibility for the development of IHPs.
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way.
- Contact the school nursing service in the case of any pupil 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.
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date.
- Work on strategic planning to ensure that the policy can be delivered and implemented.
- Take overall responsibility for the development of IHPs.

### Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

As a school, we try to ensure that we have sufficient information about the medical condition of any child with long-term medical needs and will request meetings with parents and recognised medical practitioners regularly to provide the correct level of training. Training should be specific to the individual child concerned.

There will also be regular training for all staff on more generalised needs eg asthma awareness and epi-pen training, diabetes and epilepsy if required. The school is well supported by the School Nurse who provides staff with advice and any relevant training on request

### Parents

Parents will:

- Provide the school with sufficient and up-to-date information about their child's medical needs.
- Be involved in the development and review of their child's IHP and may be involved in its drafting,
- Carry out any action they have agreed to as part of the implementation of the IHP e.g. provide medicines and equipment.

Under no circumstances should a parent send a child to school with any medicines, eg throat sweets/tablets, without informing the school. These could cause a hazard to the child or to another child if found and swallowed.

### Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

### School Nurses and other Healthcare Professionals

Our school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible.

Healthcare professionals, such as GPs and paediatricians, will liaise with the schools nurses and notify them of any pupils identified as having a medical condition.

## **Equal Opportunities**

Our school is clear about the need to actively support pupils with medical conditions to participate in school 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.

## **Being Notified that a Child has a Medical Condition**

When the school is notified that a pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an IHP.

The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

See Appendix 1.

## **Individual Healthcare Plans**

The Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions.

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 IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is not a 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.

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

For pupils with chronic or long-term conditions and disabilities, an IHP will be developed in liaison with the pupil, their parent, the Headteacher, the SENDCo and any relevant medical professionals (if needed). When deciding what information should be recorded on an IHP, the following will be considered:

- The medical condition, its triggers, signs, symptoms and treatments.
- The pupil's resulting needs, including medication, including the correct dosage and possible side effects, medical equipment, and dietary requirements.
- Specific support for the pupil's educational, social and emotional needs.
- The level of support needed and whether the pupil will be able to take responsibility for their own health needs.
- The type of provision and training that is required including whether staff can be expected to fulfil the support necessary as part of their role.
- Which staff members need to be aware of the pupil's condition.
- Arrangements for receiving parental consent to administer medication.
- Separate arrangements which may be required for out-of-school trips and external activities.
- Which staff member can fulfil the role of being a designated, entrusted individual to whom confidentiality issues are raised.
- What to do in an emergency, including whom to contact and contingency arrangements.
- What is defined as an emergency, including the signs and symptoms that staff members should look out for.

## **Managing & Administering Medicines**

Non-prescription medicines will not be administered in school.

Pupils will not be given medicine unless prescribed by a doctor

Medication will only be administered at school if it would be detrimental to the pupil not to do so. Only suitably qualified members of staff will administer controlled drugs. Staff will check the expiry date and maximum dosage of the medication being administered to the pupil each time it is administered, as well as when the previous dose was taken.

Medication will be administered in a comfortable environment and arrangements can be made for increased privacy where intimate contact is necessary.

Before administering medication, the responsible member of staff should check:

- The pupil's identity.
- That school possesses written consent from a parent.
- That the medication name, dosage, and instructions for use match the details on the consent form.
- That the name on the medication label is the name of the pupil being given the medication.
- That the medication to be given is within its expiry date.
- That the pupil has not already been given the medication within the accepted frequency of dosage

When administering, the named adult must complete a record showing the date and time and details/dosage of the medication. This must be countersigned by another adult.

Anyone giving a pupil any medication (for example, pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will be informed. The school will only accept prescribed medicines that are:

- In-date
- Labelled
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage.

If there are any concerns surrounding giving medication to a pupil, the medication will not be administered and the school will consult with the pupil's parent or a healthcare professional, documenting any action taken.

If a pupil cannot receive medication in the method supplied, e.g. a capsule cannot be swallowed, written instructions on how to administer the medication must be provided by the pupil's parent, following advice from a healthcare professional.

If a pupil refuses to take their medication, staff will not force them to do so, but will follow the procedure agreed upon in the IHPs, and the parents will be informed so that alternative options can be considered.

The school will not be held responsible for any side effects that occur when medication is taken correctly.

Written records will be kept of all medication administered to pupils, including the date and time that the medication was administered and the name of the staff member responsible. Records will be stored in accordance with the Records Management Policy.

It is the parent's responsibility to inform the school of any changes to their child's medical needs immediately by completing a new medical information form. These are available from the school office.

If a child has to take medication during a school trip then a nominated member of staff who is a First Aider will administer the medication. The school office will provide the medication in a named, blue bag with the prescribed box labelled with the child's name and date of birth and details including time to be administered and amount to be taken. We are unable to administer antibiotics during a school trip.

For the purpose of residential visits, there will be a named person with responsibility for the administration of medicines and care of children as above. This will usually be the teacher in charge of the residential.

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

## **Storing Pupils' Medication**

The school will ensure that all medications are kept appropriately, according to the product instructions, and are securely stored. All medication kept in class will be stored in a green plastic box, on a shelf, out of the reach of pupils but accessible to staff. Medication that may be required in emergency circumstances, e.g. asthma inhalers, and AAls, will be stored in a way that allows it to be readily accessible to staff who may need to administer it emergency situations.

School will ensure that pupils know where their medication is at all times and it is accessible to staff immediately.

Medication stored in school will be :

- Kept in the original container alongside the instructions for use
- Stored alongside the accompanying administering medication parental consent form
- Clearly labelled with:
  - Pupil's name
  - The name of the medication
  - The correct dosage

- The frequency of administration
- Any likely side effects
- The expiry date

Medicines will be returned to parents to arrange for safe disposal when no longer required.

## **Controlled Drugs**

[Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments.

All controlled drugs are kept in a secure cupboard 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.

## **Pupils managing their own needs**

Pupils who are competent may administer medicines and procedures. However, this will be discussed with parents and it will be reflected in their IHPs.

## **Unacceptable Practice**

School staff should use their discretion and judge each case individually with reference to the pupil's PCP, 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 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, to 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.

## **Emergency Procedures**

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' PCPs will clearly set out what constitutes an emergency and will explain what to do.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance.

## **Training**

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the head teacher. Training will be kept up to date. Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils;
- Fulfil the requirements in the PCPs;
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

## **Record Keeping**

The governing board will ensure that written records are kept of all medicine administered to pupils. Parents will be informed if their pupil has been unwell at school.

IHPs are kept in a readily accessible place which all staff are aware of.

## **Liability & Indemnity**

The governing board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

## **Complaints**

Parents with a complaint about their child's medical condition should discuss these directly with the Headteacher in the first instance. If the Headteacher cannot resolve the matter, they will direct parents to the school's complaints procedure.

## **Monitoring arrangements**

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

## **Links to other policies**

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding
- Special Educational Needs Information Report and Policy.

## Appendix 1: Being notified a child has a medical condition

