Title and Description	Medical Needs Policy and Procedures

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Document History			
Version	Date of Review	Author	Notes on Revision
3	September 2025	Michele Osborne	P3 AI summary added. P6 Note added for local healthcare practitioners. P6 Note added for school nurse referrals and parent/carer responsibilities. P7 Clarification added on medications. P8 Worded changed to secure area. P8 Wording edited regarding storage of defibrillator. P9 Note added about specialist training and supply staff access to information. P10 Note added about staff medication. P14 Note on examples not being students.
4	September 2026	Michele Osborne	P3 AI summary edited. P4 Ethos updated.Note added on Allergy Safety Policy. P7 Note added on parent and student responsibilities. P8 Note added on change of location of defibrillator.

AI Summary of Medical Needs Policy and Procedures

The Medical Needs Policy ensures that students with medical conditions are fully supported, enabling them to participate in all aspects of school life, including physical education and trips. The policy is rooted in the school's ethos of known and valued, and aligns with British Values. It outlines clear responsibilities for the Local Governing Board, Headteacher, staff, parents, and students, emphasising collaboration and communication.

Medical information is centrally stored and regularly reviewed. The policy distinguishes between short-term and long-term medical needs, requiring either a Medical Information Consent Form or an Individual Healthcare Plan (IHCP). Staff receive appropriate training to administer medication and respond to emergencies, with procedures in place for both prescribed and non-prescribed medicines. Emergency equipment, such as defibrillators, is accessible and staff are trained in its use.

The policy prohibits practices that could disadvantage students with medical needs, such as restricting access to medication or penalising attendance due to medical appointments. It also details procedures for educational visits, staff medication, and transition for new students. IHCPs are developed in partnership with parents and healthcare professionals, reviewed annually, and tailored to individual needs. All records are securely maintained, ensuring safeguarding and effective support for every student.

MEDICAL NEEDS POLICY AND PROCEDURE

Values and Ethos

Like all good schools, we're driven by our values above all else. We define these as:

Excellence - Everyone in our community will know and experience success
The most for those that need the most - We will meet the needs of all our learners
Known and valued - Everyone here will be celebrated for who they are and what they do
Collective endeavour - We will achieve success together
Joy - Everyone will know and create joy

These five values determine all that we do, and every part of the school flows from them. They set the direction and act as a compass to ensure we continue to grow and develop as a school in the way that we feel best supports all our students.

British Values

All staff are expected to uphold and promote fundamental British Values including democracy, the rule of law, individual liberty and mutual respect and tolerance of those with different faiths and beliefs.

1. Introduction

The aims of this policy are to ensure that students with medical conditions are well supported in school and have full access to all aspects of education, including physical education and educational visits. This policy should be read in line with the Allergy Safety Policy.

2. Aims

Our policy and procedures are written so that when implemented we will:

- welcome and support students with medical conditions and make arrangements for them based on good practice
- adopt and implement the statutory guidance and the policy
- assist parents in providing medical care for their children by developing healthcare plans on notification of their child's medical condition where appropriate
- educate staff and students in respect of providing support to students with medical conditions
- arrange suitable training for staff, as required, to support students with medical conditions
- liaise, as necessary, with parents and medical services in support of individual students as required
- provide emergency support to students with medical conditions in line with their individual healthcare plans
- ensure that all students with medical conditions participate in all aspects of school life
- respond sensitively, discreetly and quickly to situations where a child with a medical condition requires emergency support
- keep, monitor and review appropriate records
- ensure consistent good practice in relation to medical needs and conditions across the school

3. Contents

This policy/procedural document contains the following:

- Section 4: Definition of medical needs
- Section 5: Storage of and access to information
- Section 6 Responsibilities of governors, staff, parents and students
- Section 7: Issuing prescribed and non-prescribed medication

- Section 8: Storage of medication details
- Section 9: Emergency procedures
- Section 10: Emergency equipment storage and access
- Section 11: Educational visits
- Section 12: Unacceptable practice
- Section 13: Individual Health Care Plans (IHCPs)
- Section 14 Supply teachers
- Section 15: Staff training
- Section 16: Transition and new student procedures
- Section 17: Staff medication
- Section 18: Flow chart of procedures

4. Definition of Medical Needs

Students' medical conditions may be summarised as being of two types:

- short-term needs affecting their participation in school activities while they are on a course of medication (requiring a Medical Information Consent Form)
- long-term needs which potentially limit their access to education and require extra care and support (requiring an Individual Healthcare Plan)

5. Storage of Information

All medical information now stored centrally MIS System and Medical Tracker. Medical information reviewed annually by Central Services Coordinator. Medical needs information for staff use is also provided on Sims and Class Charts. All teachers and relevant support staff will familiarise themselves with this information at the beginning of every academic year, and where there is a change in class, mid-year.

6. Responsibilities

The Local Governing Board will:

- ensure arrangements are in place to support students with medical conditions in school, including making sure that a policy for supporting students with medical conditions is developed and maintained
- ensure students with medical conditions have the same rights of admission as other children
- have arrangements in place to meet its statutory responsibilities and ensure policies, plans, procedures and systems are properly and effectively implemented
- ensure this policy is accessible to parents and school staff
- review this policy at least annually as part of their wider safeguarding duties
- oversee the school's management of medicines to ensure that health & safety standards are met and that parents have confidence in the school's ability to support their child's medical needs

The Headteacher will:

- ensure this policy is developed and effectively implemented with governors, school staff and any relevant external partners
- ensure all staff are aware of this policy and understand their role in its implementation
- ensure that all staff who need to know are aware of a child's condition
- ensure sufficient trained numbers of staff are available to implement this policy and deliver against all individual healthcare plans, including in contingency and emergency situations
- ensure staff are appropriately insured and that they are aware that they are insured to support students in this way
- make arrangements through a named person to manage the following;
    - prescription medicines in school
    - prescription medicines on trips and outings, including school transport
    - maintenance of accurate record keeping when holding medicines
    - the safe storage of medicines

  - procedures for access to medicines during emergency situations
  - adhering to risk management procedures involving medicines
- ensure that risk assessments and arrangements for off-site visits are checked

The named person/people with responsibility for medical needs will:

- issue a medical needs information request document to all parents of students who are new to the school (Appendix 1)
- contact the school nursing service in the case of any child 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 staff work in partnership with parents or carers to ensure the well-being of a child
- ensure that interruption to school attendance for medical reasons will be kept to a minimum
- ensure staff who have volunteered to administer medicines will receive the appropriate training
- update the medical information to Sims, Class Charts and Medical Tracker
- devise and adhere to individual healthcare plans, liaising with parents as appropriate
- oversee the medical needs aspect of the transition process and regularly review the proforma and information to parents that is completed on induction evening (Appendix 1)
- ensure that all in year transfers information is added to the relevant information systems and shared with staff as is appropriate
- ensure all cultural and religious views, made known to the school in writing, are respected

School staff will:

- understand they may be asked to provide support to students with medical conditions, including the administering of medicines, although they cannot be required to do so
- receive sufficient and suitable training and achieve the necessary level of competency before they take on the responsibility to support a child with medical conditions
- know what to do and respond accordingly when they become aware that a student with a medical condition needs help
- regularly access updates on student medical needs through Sims, Class Charts and Medial Tracker
- work with local healthcare partners for identified vaccinations.

First Aiders have additional responsibilities to:

- give immediate, appropriate help to casualties with injuries or illnesses
- when necessary ensure that an ambulance is called
- ensure they are trained in their role as first aider

Pastoral Staff have additional responsibilities to:

- know which students have a medical condition and which have special educational needs because of their condition
- ensure all students with medical conditions are not excluded unnecessarily from activities they wish to take part in
- refer to the school nurse where appropriate

Parents/carers should:

- provide the school with sufficient and up-to-date information about their child's medical needs using a standard form (Appendix 1) and be involved in the arrangements to develop and review their child's individual healthcare plan
- deliver any medicine, which cannot be administered outside the school day, to the school in its original container(s) ensuring that the medicine is not out of date and that it has previously been stored correctly
- clearly mark all medicines with the following information;
  - the child's name on the medicine
  - when the medicine should be given;
  - the prescribed dose and pharmacist's instruction, e.g. after meals

- notify the school immediately (in writing) of any changes or alteration to a prescription or recommended treatment so that adjustment can be made to individual healthcare plans or previous agreement
- ensure that they or another nominated adult are contactable at all times. It must be remembered that the prime responsibility for a child's health rests with parents or carers
- make staff aware if students are carrying any non-prescribed medication
- ensure their child has the correct and in-date medication needed.

Students

Following discussion with parents or carers, children who are deemed competent are;

- encouraged to take responsibility for managing their own health needs. We will continue to ask staff to supervise so that the appropriate records can be completed for safeguarding purposes. When this occurs parents should request permission from the named person/people in writing and provide relevant details about the type and dosage of the medicine. We recommend that only one dose be brought to school at any one time in order to reduce potential risk of medicines being abused.
- no students are advised to carry their own 'over the counter medicines' (non-prescribed medicines) for their own use or self-administer prescribed medicines. Parents and carers must make us aware if students are carrying non prescribed medicines on site.
- asked to adhere to the procedures in their individual healthcare plan
- ensure they have the correct and in date medication needed. For example an EpiPen.

7. Issuing prescribed and non-prescribed medication

Prescribed Medication

Teachers are not legally or contractually required to give children their medicine, or to supervise them taking it. Those who agree to administer medication do so voluntarily. Parents are therefore encouraged to schedule their child's medication so that they do not need a dose during the school day. For example, a child who is on antibiotics to be taken three times a day can usually take all three doses outside school hours. If, however, a child does need medication during school hours, the following guidelines must be followed.

- only prescription medication should be brought into schools. This includes antibiotics, asthma inhalers, AAIs, insulin syringes and so on
- medications must be brought into schools in their original container, as dispensed by a pharmacist, labelled with the child's name. They must include instructions for administration, dosage and storage, as well as possible side effects. The exception to this is insulin, which can be brought into school inside an insulin injector pen or pump, rather than its original packaging
- parents must provide written consent for their child to be given the medication. Parents must complete the medical consent form to administer medication (Appendix 4)
- all medications must be in date
- the smallest possible amount of medication should be brought into school. The exception to this is liquid medication, which can only be accurately and safely dispensed from the original container
- any prescribed medication which needs to be taken for a short term illness or condition, will be kept at student reception, as long as it is in the original packaging with the prescription label attached. This will then be issued as required
- medication will be kept in a secure place such as a locked cabinet or a sealed box in a fridge, according to storage instructions. Students must know where their medication is, and who to ask when they need it. However, medications that children may need to access quickly in an emergency should not be locked away, but these are stored in a safe, secure place in school (this includes emergency inhalers and epi pens). This includes asthma reliever inhalers and AAIs. These storage requirements apply not just on school premises, but also on trips and residential visits
- if a sharps box is required for the disposal of injectors, parents should obtain it on prescription and pass it on to the school
- parents should collect any leftover medication that their child no longer needs, or medicines that have passed their expiry date, from the school. This should be done routinely at the end of every term. If this is not collected the school will dispose of it in a safe way

- the school will keep a record (Appendix 3) of student's medication details for each individual child. This will include details of the medication to be issued and a table for when the medication is issued including the date and time of each dose, how much was taken, and whether there were any side effects

Non-prescribed Medication

Paracetamol is a widely used drug for controlling pain and reducing temperature. It is sometimes appropriate to give paracetamol to control specific pain such as migraine or period pain. The following procedures should be implemented should it be deemed necessary to take paracetamol:

- only staff trained in administering medication are responsible for giving medicines, they must be wary of routinely giving paracetamol to children. If a child complains of pain as soon as they arrive at school and asks for painkillers, it is not advisable to give paracetamol until the amount given over the past 24 hours has been established
- no more than 4 doses should be given in a 24-hour period
- there should be at least 4 hours between any 2 doses of paracetamol containing medicines. No more than 4 doses of any remedy containing paracetamol should be taken in any 24 hours. We will always check with parents as to whether the child may have been given a dose of paracetamol before coming to school. Many non-prescription remedies such as Beechams Powders, Lemsip, Night Nurse etc. contain paracetamol. If paracetamol tablets are taken soon after taking these remedies, it could cause an unintended overdose
- there **must** be parental consent to give paracetamol. These must be provided by parents. Only trained staff can administer medication or paracetamol. A record must be kept of this and recorded on medical tracker (Appendix 3)
- Ibuprofen and Aspirin will not be administered routinely under any circumstances unless this is part of an agreed individual health care plan

8. Storage of Medication

All medication is stored in locked cabinets in a secure area (see section 7 note about emergency access). An entry into the 'medication stored' log should be completed (Appendix 4)

9. Emergency procedures

The safety of our students is of paramount importance. For all students deemed to have 'complex' or 'serious' medical conditions we hold emergency contact details on SIMs and Class Charts. All relevant staff are aware of individual emergency symptoms and procedures and other students know to contact a teacher immediately if they think help is needed. If a child needs to be taken to hospital, a designated member of staff will stay with the child until a parent or carer arrives, or they will accompany the child in the ambulance. Parents and Carers must be informed immediately.

10. Emergency equipment storage and access

A defibrillator is stored at Main Reception, Achievement Centre, Sports Hall and Sjovoll Centre. Relevant staff will be routinely trained in how to access and use the defibrillator.

11. Educational visits

The school will actively support students with medical conditions participating in school trips, residential visits and sporting activities by providing flexibility and reasonable adjustments in consultation with parents and students, and advice from healthcare professionals. All arrangements for medicines, including the storage, individual healthcare plans, and risk management programmes will apply for all off-site activities or school trips. A member of staff will be designated to ensure there are suitable off-site arrangements for storage and recording of the medicines when assessing any risks associated for the trip, particularly for those students with long term or complex health conditions. All plans and risk assessments will be discussed with parents or carers in preparation for the activity in advance of the departure day. All off-site activities will be evaluated in terms of proximity and accessibility to emergency services.

12. Unacceptable practice

Framwellgate School Durham acknowledges that the following are considered unacceptable practice, which will be avoided at all costs:

- preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary
- assuming that every child with the same condition requires the same treatment
- ignoring the views of the child or their parents/carers
- ignoring medical evidence or opinion
- sending children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHCPs
- sending an ill child to the school office to student reception unaccompanied
- penalising children for their attendance record if their absences are related to their medical condition e.g. hospital appointments
- preventing students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- requiring parents/carers, or otherwise making them feel obliged, to attend school to administer medication or provide medical support to their child, when staff are available to do this
- preventing children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips

13. IHCP (Individual Health Care Plans) – Appendix 2

Individual Health Care Plans will be developed in partnership with parents, students and healthcare professionals. These will set out the support that is needed so that the impact on school attendance, health, social well-being and learning is minimised. Not all conditions will require an IHCP. In some cases, the request to hold medicines will be sufficient to cover short term conditions and treatment. The IHCP will be tailored to meet the child's best interests and the needs of short term, long term and/or complex medical conditions. The plans will be kept under review by the named person and revised as required, or at least annually, to ensure that they reflect current medical needs (e.g. changes in medication). IHCPs will include details on emergency arrangements and these will be shared with all relevant staff, first aiders and school office staff, where necessary. Where students have been issued with an EHC plan by the local authority, any IHCP will be linked to, or become part of that EHCP.

14. Supply teacher information

Teachers who are on supply to the school will be made aware of any medical needs of a particular class by the lead person in charge of supply. Supply staff have access to a class dashboard with essential medical information provided for students.

15. Staff training

Most medicines to be administered will not require staff to be professionally trained; the school however will ensure that staff are supported in carrying out their role to support students with medical conditions. Those supervising the administering of medicines will be trained to a level of competence and understand the requirement for accurate and timely record keeping. Staff who maintain these records are trained to know what action to take, (such as referring to the Designated Safeguarding Lead) if they have a concern around the welfare of an individual student. If an IHCP is applied to particular students / young people, additional training will be given by a nominated healthcare professional, e.g., use of a nebuliser, using adrenaline pens. Training received or cascaded from parents will not be accepted unless otherwise instructed by a healthcare professional. A training matrix will be completed, maintained and held securely by Central Services Coordinator. Additional training will be sought to support specific student needs such as diabetes or epilepsy from specialist local teams.

16. Transition and new student procedures

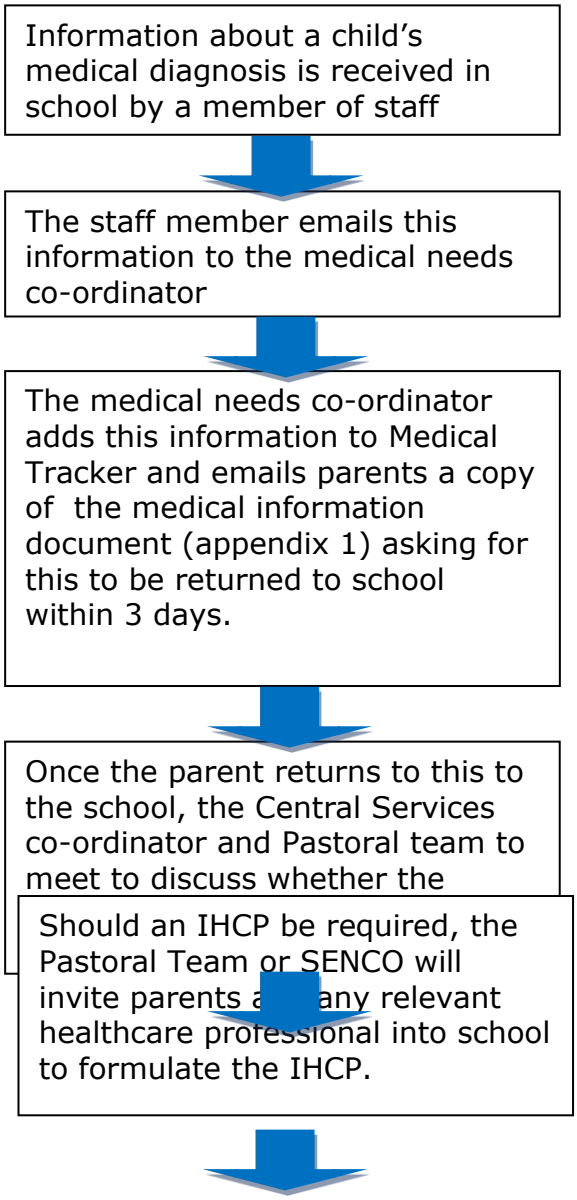
All parents of students in year 6 will be asked to complete a medical information form as part of the transition process (Appendix 3). The medical needs co-ordinator will then make an assessment from these of which students require an IHCP, will contact the parents to discuss the issues further and, if

deemed necessary, invite the parents into school to discuss the formation of the plan. Parents of students who are new to the school and transfer in year will be issued a request for medical information document (Appendix 3) and will have their medical needs information shared by the pastoral team to all relevant staff. This information will also be added to medical tracker and uploaded onto Sims and Class Charts. It is the responsibility of Pastoral staff to share any medical information with Central Services Coordinator and staff at Student Reception

17. Staff medication

- All staff must make sure any medications they bring in are for personal use only.
- It is the responsibility of every staff member to ensure all medication brought into school is stored safely and securely so students are unable to access it.
- Medication MUST NOT be taken into or left in classrooms.
- Any member of staff bringing in powerful or potentially dangerous medications into school, or who need to carry their medication with them, must inform the Headteacher.
- A safe procedure for self-administering medication with the school can then be agreed and this information will be treated in the strictest confidence.
- It is a requirement that where staff are taking powerful medication, they will be required to seek medical advice to ensure they are able to carry out their duties and to confirm that their ability to work directly with students is not impaired. A risk assessment may be created if deemed necessary by the Headteacher.

18. Flow Chart of Procedures



Once the IHCP is completed, this will be stored on Medical Tracker in a folder with the student's name.



The relevant medication forms will be completed (appendices 2,3 and 4) and the medication stored in the locked cupboard in Student Reception.

Appendix 1
Request for Medical Information Document

Medical Information Document

Student's name			
Date of birth			
Student's address			
Medical diagnosis or condition (include any information about how the student is affected by their medical condition)			
Medication Taken (include dosage amounts and times and whether or not the medication is administered by the student)			
Are there any side effects of the medication?			
Emergency Procedures?			
Family Contact Information			
1) Name		Relationship to student	
Phone no. home	Phone no. mobile		Phone no. work
2) Name		Relationship to student	
Phone no. home	Phone no. mobile		Phone no. work
GP			
Name		Phone number	
Surgery address			

Appendix 2
Medical Consent form to administer medication

Parental Agreement to Administer Medicine

Framwellgate School Durham will not give your child medicine unless this form is completed and signed.

Date for review to be initiated:

Name of child			
Date of birth		Tutor group	
Medical condition or illness			

Medicine

Name/type of medicine (as described on the container)	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Any side effects the school needs to know about	

Student to self-administer	Yes/No* **delete as appropriate*	Student to carry his/her own medicine	Yes/No* **delete as appropriate*	School use only Approved by school? Yes/No Staff initials:

NB: Medicines must be in the original container as dispensed by the pharmacy

In Emergency

Procedures to take in an emergency

Emergency Contact Details

1) Name		
Phone no. home	Phone no. mobile	Phone no. work
Relationship to child		
2) Name		
Phone no. home	Phone no. mobile	Phone no. work
Relationship to child		

I understand that I must deliver the medicine personally to the medical needs co-ordinator

<u>To be completed where the administration of asthma/anaphylaxis medication is requested by this form</u>
Emergency provision of salbutamol inhalers/adrenaline auto injectors (AAI)*

In the event of my child displaying symptoms of asthma/anaphylaxis*, and if his/her inhaler/AAI* is not available or is unusable, I consent for my child to receive treatment from an emergency inhaler;/AAI* held by the school for such emergencies (**delete as appropriate*)

☐ Tick to consent

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 policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medication is stopped.	
Signature(s)	Date

Appendix 3-
Individual Medication Information Form

Name of Student:					**Date of Birth:**		
Name of Medication:					**Instructions for administration:**		
Date	**Time**	**Amount Given**	**Amount Left**	**Administered By**	**Witnessed By**	**Student Signature**	**Comments**

Appendix 4
Medication Stored Log * Names are not students - for examples only
E.g.

Forename	**Surname**	**Year**	**Medication**	**Expiry Date**
Eleanor	Abbott	7	Sumatriptan 50mg Tablets	06/2027
Hannah	Brimstone	10	Sumatriptan	05/2027
Liam	Carter	9	Salbutamol Inhaler	12/2027
Joseph	Smith	11	Chlorphenamine 4mg Tablets	03/2027