

HOLLINGWORTH LEARNING TRUST SUPPORTING PUPILS WITH MEDICAL CONDITIONS

Heap Bridge Village Primary School

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VERSION INFORMATION

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1.3	Review of document Addition of information on AEDs (Point 7.1) Amended and adopted by Heap Bridge Village Primary School	S Collinge K Collingwood	Summer 2025 Autumn 2025	Trustees LGB

Instructions for Academies

- This is a Trust document that must be implemented by HLT Academies.
- Academies are required to complete the required sections highlighted in yellow, to include the processes and procedures in place at their establishment.
- Completed documents should be shared with the trust and made available to all staff within your academy.
- The Academy DSL, appointed person for first aid and all first aiders must read the policy.
- For further information please contact the Trust Compliance Manager.

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Aim and Scope

Hollingworth Learning Trust's mission is to make a positive difference to the lives of the children in our schools. To deliver this mission, Hollingworth Learning Trust aims to support pupils with medical conditions remain in school, with any necessary support to allow them to achieve their full potential.

This is a Hollingworth Learning Trust policy and will be used by all schools within our Trust family. The policy is written for use by individual schools, however also is applicable to staff employed centrally within the Trust.

This is a non-contractual policy; the policy applies to all staff.

This policy aims to ensure that:

- Pupils, staff and parents understand how our Trust and academies 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 Local Governing Body (LGB)/Headteacher 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 (IHPs).

Equality and Diversity Policy Statement:

Hollingworth Learning Trust are committed to meeting our obligations under the Public Sector Equality Duty (PSED) and within our supporting pupils with medical conditions processes we actively;

- promote equality, diversity and inclusion;
- aim to eliminate discrimination;
- promote positive attitudes to disabled people;
- take account of disabilities in within the school setting to promote inclusion.

Trust Vision and Values – Supporting Pupils with Medical Conditions

The Trust aims to ensure that our academies effectively and efficiently support the provision of high-quality education to all our pupils. To support the vision of making a positive difference to the lives of our children, the Trust is committed to ensuring that pupils receive all necessary provisions in relation to medical conditions, to allow all our pupils equal opportunities within school.

AMBITIOUS:	We have high expectations for all of our children and staff. They deserve the best we can do.
POSITIVE:	We believe that people and schools can improve; we always believe this.
RESILIENT:	We make long term commitments to pupils, families, communities and schools. We never give up.
REFLECTIVE:	We constantly evaluate what we do in order to improve. We are never complacent.
PRINCIPLED:	We always promote equity, equality and challenge injustice. We consistently act in the 'best interests' of our pupils.

1 Legislation and Guidance

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 on [supporting pupils with medical conditions at school](#).

This policy complies with the Trust's funding agreement and articles of association.

2 Roles and Responsibilities

2.1 The Board of Trustees

The board of trustees has ultimate responsibility to make sure there are arrangements to support pupils with medical conditions across the Trust. Although the Trust delegates certain duties to different levels as outlined below, the board is still accountable for making sure the Trust is compliant with the requirements in the above legislation and guidance.

The board will also determine and approve this policy.

2.2 CEO

The CEO will:

- Oversee and support the Local Governing Board and Headteacher of each school in carrying out their duties.
- Highlight any issues found across the trust to the Board of Trustees.

2.3 The Governing Board

Local governing bodies of each school will:

- Help to decide what information should be recorded on individual healthcare plans (IHPs).
- Monitor that there is a sufficient number of trained staff available in their school.
- Monitor that records of children's medical needs and medicines that have been administered are kept up to date.
- Review how well this policy is locally applied and make recommendations to the Board of Trustees as necessary.

- Support and challenge the Headteacher to make sure that all children with medical conditions are supported to ensure their fullest participation in all aspects of school life.

2.4 The Headteacher

The Headteacher will:

- Make sure all staff are aware of this policy and understand their role in its implementation.
- Ensure 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.
- Assess training needs and commission necessary training in line with trust procedures.
- Co-ordinate and attend meetings to discuss and agree on the need for IHPs.
- Take overall responsibility for the development of IHPs.
- Contact the Academy's NHS school nursing team 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.
- Make sure cover arrangements are made in the case of staff absence, and that supply teachers are briefed where necessary.

2.5 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 unless this is a specific requirement of their role. 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 consider 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.

2.6 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, and ensure they or another nominated adult are contactable at all times.

2.7 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.

2.8 School nurses and other healthcare professionals

The NHS school nursing team will notify the Academy 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. They may also support staff to implement a child's IHP.

Healthcare professionals, such as GPs and paediatricians, will liaise with the school's nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

3 Equal Opportunities

The Trust and its academies are 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 Academy 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.

4 Being Notified that a child has a medical condition

When the Academy is notified that a pupil has a medical condition, the process outlined in **Appendix 1** will be followed to decide whether the pupil requires an IHP.

The Academy 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 the Academy.

5 Individual Healthcare Plans

The Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to Katharine Collingwood (DHT/SENCo) and Kim Clarke (Pastoral 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 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 no consensus, the Headteacher will make the final decision.

Plans will be drawn up in partnership with the Academy, 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 education, health and care (EHC) plan. If a pupil has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing board and key members of staff with responsibility for developing IHPs, will consider the following when deciding what information to record on IHPs:

- 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.
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete assessments, use of rest breaks or additional support in catching up with lessons, MHST 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 Academy 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/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

Template Plans

For pupils with diabetes a template IHP can be downloaded from Diabetes UK at:

<https://www.diabetes.org.uk/guide-to-diabetes/your-child-and-diabetes/schools/ihp-a-childs-individual-healthcare-plan>

For pupil with epilepsy, a template IHP can be downloaded from Epilepsy Action at:

<https://www.epilepsy.org.uk/app/uploads/2024/03/T039-INDIVIDUAL-HEALTHCARE-PLAN-EDITABLE-PDF.pdf>

For pupils with allergies, a template IHP can be downloaded from the British Society for Allergy and Clinical Immunology(BSACI):

<https://www.bsaci.org/resources/resources/paediatric-allergy-action-plans/>

A Trust general IHP can be found in **Appendix 2**.

6 Managing Medicines

Prescription and non-prescription medicines will only be administered at school:

- when it would be detrimental to the pupil's health or school attendance not to do so **and**
- where we have parents' written consent, via the 'Request to Administer Medication Form' on the school's website.

An example medication consent form (which replicates the online 'Request to Administer Medication Form') can be found in **Appendix 3**.

The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents.

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed.

The Academy 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.

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

All medicines will be stored safely. Pupils will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils and not locked away.

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

6.1 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.

All controlled drugs are kept in a secure medical cabinet in the school office, which only staff can access.

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

A template medication log can be found in **Appendix 4** (which replicates the information staff record on school's online 'Administration of Medicines Record').

6.2 Pupils managing their own needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents, and it will be reflected in their IHPs.

Pupils will be allowed to carry their own medicines and relevant devices wherever possible. Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered, if necessary.

6.3 Supporting Pupils with Asthma

Since October 2014, schools have been able to purchase salbutamol inhalers for emergency use for pupils who have been diagnosed with asthma where both medical authorisation and written parental consent for the use of the emergency inhalers have been provided.

Emergency Inhalers are stored in the school office and managed by Kim Clarke.

For more information please see the schools 'Guidance on the use of Emergency Salbutamol Inhalers in School'

6.4 Supporting Pupils with Severe Allergies (Anaphylaxis)

Since October 2017, schools have been able to purchase Adrenaline Auto Injector (AAI)s for emergency use for pupils at risk of anaphylaxis where both medical authorisation and written parental consent for the use of the spare AAI have been provided.

Emergency Adrenaline Auto Injector (AAI)s are stored in medical cabinet in the office and managed by the Senior Leader Team / First Aiders.

For more information please see the schools 'Guidance on the use of Adrenaline Auto-Injectors in School'

6.5 Unacceptable practice

Staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable to:

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary.
- Assume that every pupil with the same condition requires the same treatment.
- Ignore the views of the pupil or their parents.
- Ignore medical evidence or opinion (although this may be challenged).
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs.
- If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable.
- Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. hospital appointments.
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively.
- Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupil, including with toileting issues. No parent should have to give up working because the Academy 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.

Staff should NEVER give pupils any of their own medication.

7 Emergency Procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHPs 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.

See school Emergency Procedures in **Appendix 5**.

7.1 Defibrillators

The DFE's statutory guidance, supporting pupils with medical conditions, advises that all schools should have a defibrillator as part of their first aid equipment.

Defibrillators are designed to be used by someone without specific training, by following the step-by-step instructions on the defibrillator at the time of use, however, in line with the [DFE Automated External Defibrillator Guidance for Schools](#), schools should provide a general awareness briefing session to staff to ensure they meet their statutory obligations.

All First Aiders should receive AED training as part of First Aid at Work and Emergency First Aid at Work Training courses, and should be covered in Paediatric First Aid Courses.

8 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 Senior Leadership Team. 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 IHPs.
- 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.

Additional Training is available for certain medical conditions. Staff will be granted access to the following courses via Every on request:

- Anaphylaxis & Allergy Training for Schools and Carers
- Asthma Training for Schools and Carers
- Diabetes Training for Schools and Carers
- Epilepsy Training for Schools and Carers

9 Record Keeping

The governing board will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. 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 on Teams.

10 Liability & Indemnity

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

Heap Bridge Village Primary School will ensure that it is a member of the Department for Education's risk protection arrangement (RPA).

11 Complaints

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

12 Consistency of treatment and fairness

Hollingworth Learning Trust are committed to ensuring consistency of treatment and fairness. It will abide by all relevant equality legislation, including the duty to make reasonable adjustments where these are deemed either necessary or appropriate.

Hollingworth Learning Trust are aware of the guidance and provisions of the Equality Act 2010.

13 Monitoring Arrangements

This template policy will be reviewed annually by the board of Trustees

At every review, the policy will be sent to academies and adapted as required. The updated policy will be approved by the Headteacher and shared with the Local Governing Body.

14 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
- Guidance on the use of Emergency Salbutamol Inhalers in School
- Guidance on the use of Adrenaline Auto-Injectors in School

APPENDICIES

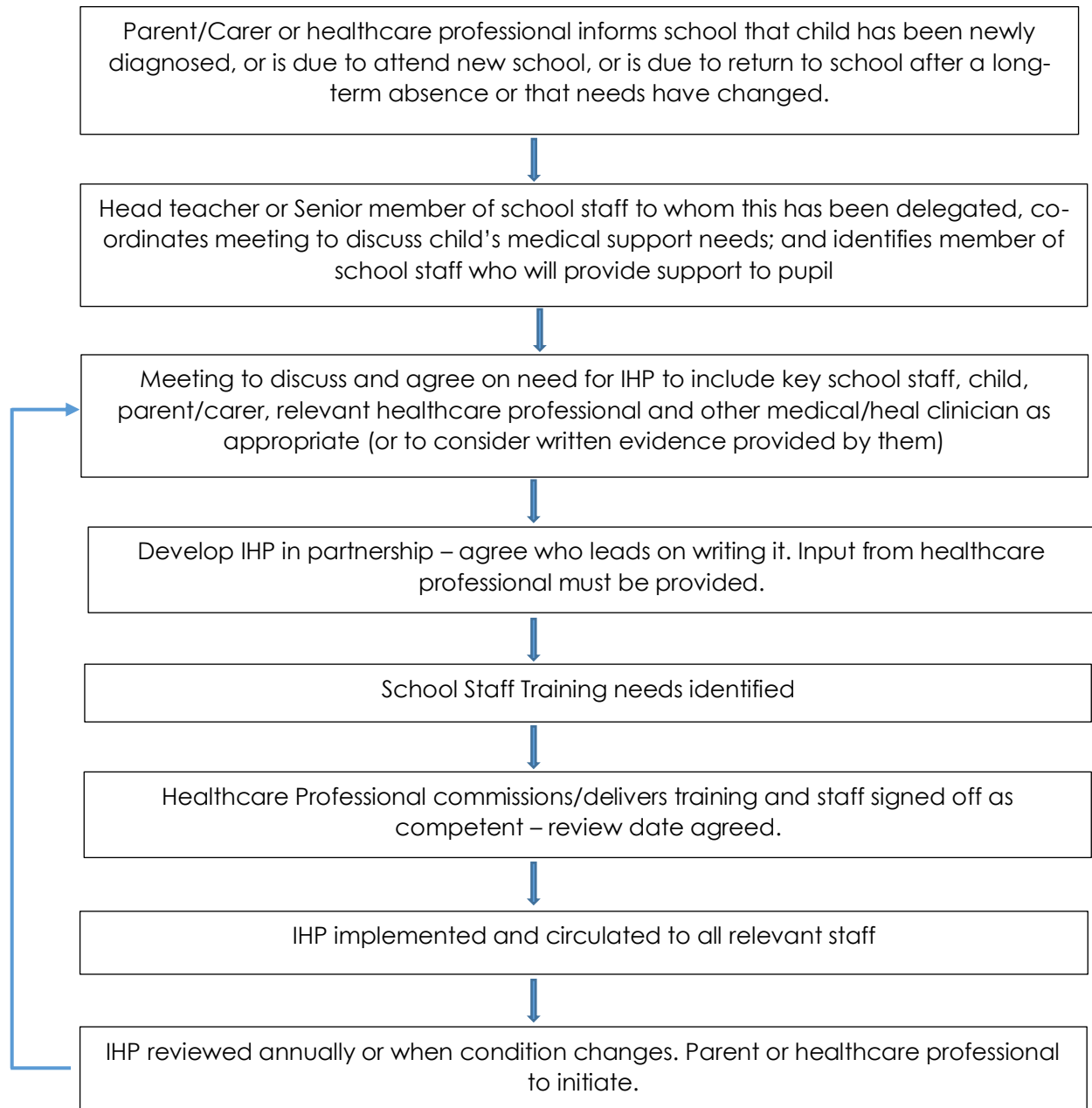
- Appendix 1: Pupil IHP Process
- Appendix 2: Template IHP
- Appendix 3: Medication Consent Form
- Appendix 4: Medication Log
- Appendix 5: Emergency Procedure

Appendix 1: Pupil IHP Process

DFE Model Process for developing Individual health Care Plans

Taken from

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/803956/supporting-pupils-at-school-with-medical-conditions.pdf



Appendix 2: Template IHP

INDIVIDUAL HEALTHCARE PLAN

Name	
Date Of Birth	
Class / Tutor Group	
Parents Name	
Parents Contact	
Healthcare Professional	
Contact	

Condition	
Description of Condition and the symptoms that may affect the pupil	Signs & symptoms: Triggers: Treatments
Information about your child's daily care requirement's: • Medication • Dietary requirements • Special facilities/support needed in school • Environmental Issues • Other	
What sort of support your child needs with their daily care:	<i>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</i>
Who in school with administer this care: Are there any additional training needs/requirements for the member of staff?	<i>Who will provide support for the pupil</i> <i>What are 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.</i>

Who needs to be aware of the pupils condition?	<i>Who in the school needs to be aware of the pupil's condition and the support required</i>
Does the School need to administer medication?	<i>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</i>
Other Information	<i>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</i>
What constitutes an Emergency relating to your child's condition: What action should be taken:	<i>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</i> <i>What to do in an emergency, including who to contact, and contingency arrangements</i>
Confidentiality	<i>Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition</i>

Member of Staff:

Date:

Parents Signature:

Date:

Appendix 3: Medication Consent Form

***(online Google form for parents via the school's website –
'Request to Administer Medication')**

MEDICATION CONSENT FORM

All prescribed medicines must be in the original container as dispensed by the pharmacy, with the child's name, the name of the medicine, the dose and the frequency of administration, the expiry date and the date of dispensing included on pharmacy label.

A separate form is required for each medicine.

Pupil Name:	
Tutor Group:	
Pupils Date of Birth:	
Parent/Carer Name:	
Parent/Carer Contact:	
Date:	

I confirm that my child has been prescribed:	
Please provide details / instructions or the prescribed medication	
Dose to be given:	
Time to be given:	
Advised storage of medication:	
Other Instructions:	
Duration of medication (from/to)	
Medication Expiry Date:	
If there are any possible side effects from the medication that the school needs to be aware of please list them:	

- I give my permission for the trained staff member to administer the prescribed medicine to my son/daughter during the time he/she is at school. 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.
- I understand that it may be necessary for this medicine to be administered during educational visits and other out of school activities, as well as on the school premises.
- I also agree that I am responsible for collecting any unused or out of date medicines and returning them to the pharmacy for disposal and supplying new stock to the school if necessary.
- The above information is, to the best of my knowledge, accurate at the time of writing.

Parent/Carer Name:	
Parent/Carer Signature:	
Date:	

Appendix 4: Medication Log

MEDICATION LOG *

***online Google form for staff – 'Administration of Medicines Record'**

Pupil Name:	
Tutor Group:	
Pupils Date of Birth:	
Name of Medication:	
Dose to be given:	
Duration of Medication:	

Date	Time	Medication & dose given	Administered by:

A copy of the 'Administration of Medicines Record' is stored on the Academy's Google Drive

Appendix 5: Emergency Procedures In Academy

EMERGENCY FIRST AID

- If there is an emergency within school, staff are required to bring the pupil or staff member to Reception **ONLY** if it is safe to do so.
- If first aid is required at the 'scene' the first aiders need to go to the incident immediately.
Two first aiders should attend all emergencies.
- The pupil's class teacher should also be informed to attend the incident or a member of SLT.

PROCEDURE FOR CALLING AN AMBULANCE

- If the pupil/member of staff requires an ambulance, a call can be made from the school office.
- If the pupil/member of staff is away from Main Reception then a mobile phone (preferably a school mobile), should be taken to the incident and the ambulance called from there. This is so that up-to-date information can be given to the operator and the operator's advice can be followed.
- A member of staff must remain with the pupil/staff member at all times.
- When an ambulance is called, a member of staff must go to the school entrance to meet the paramedics and take them directly to the incident in school.
- Pupil's/member of staff's emergency contacts should be contacted as soon as possible and information should be passed to them with a direct telephone number for the school that they can call back on.
- If there is a medical emergency and parents or carers cannot be contacted, the school will act in the best interests of the child which may involve giving permission for medical treatment.
- A member of Heap Bridge staff will escort the pupil/staff member in the ambulance to hospital if the emergency contact is unable to get to school.
- The member of staff must stay with the pupil/staff member at hospital until the emergency contact arrives. Transport will be provided by the school to return the member of staff to school.