

Supporting Pupils with Medical Conditions

“Small School with a Big Heart”

Summary of Changes for Governors (19.01.26)

This policy has been reviewed and updated to ensure clarity, reduce repetition, and strengthen guidance around the administration of both long-term and short-term prescribed medication. The intent and inclusive ethos of the policy remain unchanged.

- Key amendments:

- Minor wording correction in section 6 ("required medication").
- Amalgamation of sections 6.3 and 6.5 to reduce repetition.
- Removal of duplicated record-keeping statements between sections 5 and 7.

1. Policy statement

High Green Primary School is an inclusive school that welcomes and supports pupils with medical conditions. All pupils with medical needs are provided with the same opportunities as their peers and are supported to be healthy, stay safe, enjoy and achieve, make a positive contribution, and reach their full potential, including preparation for future economic wellbeing.

The school recognises that some medical conditions can be serious or potentially life-threatening and is committed to ensuring that medication and care are administered in line with the guidance of healthcare professionals and parents. All staff understand their duty of care and receive appropriate training, so they feel confident in responding to medical needs and emergencies.

The named members of staff responsible for the implementation of this policy are Mrs Natalie Coe (F2/KS1 SENCO) and Mrs Nickie Beal (KS2 SENCO). Medical forms and parental permissions are held centrally on Medical Tracker, and the Headteacher oversees medical provision, including the safe and appropriate storage of medication.

2. Policy Framework

2.1.

This policy framework sets out how the school meets the needs of pupils with medical conditions, particularly those with long-term or complex health needs, through clear systems, shared responsibilities and effective communication.

2.2.

The school ensures that pupils with medical conditions have equal access to education, activities and school life, including off-site visits and extended provision. No child will be denied admission or prevented from attending due to a medical condition or the arrangements required to support it.

2.3.

The school works in partnership with pupils, parents and carers, listening to their views and involving them in decisions about care and support.

2.4.

Staff are aware that medical conditions can vary in severity and impact, may affect wellbeing and learning, and require individualised approaches. Pupils with the same condition may have very different needs.

2.5.

All staff understand their duty of care and know how to respond to medical needs and emergencies. Appropriate training is provided to ensure confidence and competence.

2.6.

The school recognises its anticipatory duties under the Children and Families Act and the Equality Act and plans proactively to remove barriers, make reasonable adjustments and promote inclusion.

3. Communication

3.1.

The school uses clear and effective communication systems to support the consistent implementation of arrangements for pupils with medical conditions.

3.2.

Relevant information is shared appropriately with pupils, parents and carers, staff, and external professionals to ensure that medical needs are understood, supported and responded to safely.

3.3.

Communication methods include agreed procedures, secure record-keeping systems and regular review, ensuring that information remains accurate, up to date and accessible to those who need it.

4. Emergencies

4.1.

Clear emergency procedures are in place for pupils with medical conditions, and relevant staff receive training to respond to individual medical needs appropriately.

4.2.

All staff, including temporary and supply staff, are made aware of pupils' medical needs and understand their duty of care in emergency situations.

4.3.

Pupils with medical conditions have an Individual Healthcare Plan (IHP) which outlines emergency actions and required support. Where hospital treatment is required, the IHP will accompany the pupil, with parental consent recorded for information sharing with emergency services.

4.4.

The school ensures that staff are familiar with both general school emergency procedures and any pupil-specific emergency arrangements, with information reviewed and updated regularly.

4.5.

If a pupil requires hospital treatment, a member of staff known to the child will remain with them until a parent or carer arrives or will accompany them in an ambulance. Staff will not transport pupils to hospital in their own vehicles.

5. Administering Medication at School

5.1.

The school follows clear procedures for the administration of medication and the provision of medical care. All permissions, care arrangements and records are stored securely on Medical Tracker.

5.2.

Medication is administered in accordance with the pupil's Individual Healthcare Plan (IHP) or written medical instructions, where applicable.

5.3.

A sufficient number of staff are trained to administer medication and meet individual care needs, ensuring appropriate cover during staff absence or change. The Governing Body ensures that suitable insurance and liability cover is in place.

5.4.

Prescription-only medication will not be administered without written parental consent.

5.5.

Prescribed medication will only be administered in school where it is required during the school day, including medication that must be taken more than three times daily.

5.6.

Before administering medication, staff will check dosage instructions and the timing of the previous dose. Parents will be informed when medication has been given.

5.7.

All medication administration is recorded accurately on Medical Tracker, including the date, time and dosage, and shared with parents as appropriate.

5.8.

For off-site visits and residential activities, the school ensures that appropriately trained staff are available to administer medication and provide required medical support.

5.9.

Parents and carers are expected to inform the school promptly of any changes to their child's medical needs or medication.

6. Storing Medication and Equipment at School

6.1.

The school follows clear procedures for the safe and appropriate storage of medication and medical equipment, in line with individual medication guidance.

6.2.

Prescribed emergency medication is readily available at all times and accessible wherever the

pupil is on site or taking part in off-site activities. Staff are aware of what constitutes an emergency for individual pupils.

6.3.

Pupils do not routinely carry their own medication but know where and how to access it quickly. On school visits, the staff member responsible for the pupil will carry the required medication and ensure it is immediately available.

6.4.

Controlled drugs are stored securely but accessibly, with access restricted to named, trained staff. Controlled medication is only administered by staff who have received appropriate specialist training.

6.5.

All medication is stored safely while remaining readily accessible, and pupils with medical conditions are supported to access their medication promptly when required.

6.6.

Medication is stored in its original container, clearly labelled and in date, in accordance with storage instructions. The exception to this is insulin, which is commonly supplied in an injector pen or pump.

6.7.

Expiry dates are recorded on Medical Tracker, and automated alerts are issued to the school and parents in advance of medications expiring.

6.8.

Parents and carers are asked to collect all medication and medical equipment at the end of each school term and to supply new, in-date items at the start of the following term.

6.9.

Sharps and clinical waste are stored and disposed of safely in line with local authority procedures. Sharps boxes are kept securely and will accompany pupils on off-site visits where required.

7. Record Keeping

7.1.

The school maintains accurate and up-to-date records for pupils with medical conditions. All medical information, permissions, training records and medication administration logs are stored securely on Medical Tracker.

7.2.

Medical information is collected at enrolment and updated as required. Where appropriate, an Individual Healthcare Plan (IHP) is developed in partnership with the pupil, parents or carers, school staff and relevant healthcare professionals.

7.3.

IHPs are reviewed at least annually, or sooner if a pupil's medical needs change, and are shared appropriately with staff responsible for the pupil's care.

7.4.

The school ensures that pupils' confidentiality is maintained. Parental consent is obtained before medical information is shared with external parties.

7.5.

Prior to residential visits or extended school activities, care arrangements are reviewed and recorded within the pupil's IHP, which accompanies the pupil on the visit.

7.6.

All medication administered in school is recorded on Medical Tracker, including the date, time, dosage and supervising staff member.

7.7.

The school keeps an up-to-date record of staff training related to medical needs and ensures that staff providing support are suitably trained and confident to meet the requirements set out in pupils' IHPs.

8. Inclusivity

8.1.

The school promotes an inclusive environment that supports pupils with medical conditions to participate fully in school life, including educational, social, sporting and off-site activities.

8.2.

Reasonable adjustments are made to the physical environment and to activities, in consultation with pupils and parents where appropriate, to ensure accessibility and inclusion.

8.3.

Staff are aware of the potential physical, emotional and social impact of medical conditions and take steps to support pupils' wellbeing, using curriculum opportunities and the school's anti-bullying policy to promote understanding and positive attitudes.

8.4.

Pupils are not required to take part in activities if they are unwell or have been advised to take precautions. Appropriate medication, equipment or dietary requirements are made available as needed.

8.5.

The school recognises that attendance, concentration or fatigue may be affected by medical conditions and ensures that pupils are not disadvantaged or penalised as a result. Where concerns arise, the SENCO works with families and healthcare professionals to provide appropriate support.

8.6.

Risk assessments for off-site visits and extended activities consider the needs of pupils with

medical conditions and include arrangements for additional support, medication or equipment where required.

9. Triggers

9.1.

The school is aware of common triggers that may worsen medical conditions or lead to an emergency and takes steps to minimise these where possible.

9.2.

Individual triggers and required precautions are recorded in pupils' Individual Healthcare Plans (IHPs) and considered throughout the school day and during off-site activities.

9.3.

Staff receive appropriate information and guidance to help reduce pupils' exposure to known triggers, both on site and on educational visits.

9.4.

Risk assessments for off-site activities take account of pupils' medical needs and associated triggers.

9.5.

Medical incidents and emergencies are reviewed to identify learning and inform improvements to practice where necessary.

10. Responsibilities (Revised)

10.1.

All members of the school community and relevant health professionals understand their roles and responsibilities in supporting pupils with medical conditions and implementing this policy.

10.2.

The school works in partnership with pupils (where appropriate), parents and carers, staff, governors and healthcare professionals to ensure effective planning, delivery and review of medical support.

10.3.

This policy is reviewed and updated regularly to ensure it remains effective and compliant, informed by feedback from key stakeholders including pupils, parents, staff, healthcare professionals and governors.