Supporting children with Medical Conditions and Essential Medication Policy

Last updated: June 2025

Ratified by governors:

---------- Head teacher

----------Chair of governors

Next Review Date: June 2028

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1. 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.

The governing board 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 care plans, in conjunction with medical professionals.

The named person(s) with responsibility for implementing this policy is Korynn Amison or Davinia Clark.

2. 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 (DfE)'s statutory guidance on supporting pupils with medical conditions at school.

3. Roles and Responsibilities

3.1 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.

3.2 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 care plans, 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 care plans, alongside the SENCO.

Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way.

Instruct the SENCO or Family Support Worker to 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.

3.3 Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff, with the correct training in place, may be asked to provide support to pupils with medical conditions. 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.

3.4 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 care plan and may be involved in its drafting.

Carry out any action they have agreed to as part of the implementation of the care plan, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times.

3.5 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 care plan. They are also expected to comply with their care plan.

3.6 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. They may also support staff to implement a child's care plan.

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 care plans.

4. 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.

5. 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 a care plan.

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.

Appendix 1 Being notified a child has a medical condition.

6. Care plans

The headteacher has overall responsibility for the development of care plans for pupils with medical conditions. This has been delegated to SENCO.

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 a care plan written by the school; some children will follow the care plan given to the school by the NHS medical team dealing with the child's care. It will be agreed with a healthcare professional and the parents when a care plan 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 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.

Care plans 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 care plan where appropriate.

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, the headteacher and the SENCO will consider the following when deciding what information to record on care plans:

- 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 corridors, travel time between lessons
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete academic tests, use of rest periods or additional support in catching up with lessons, counselling 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, although we acknowledge that this will be rare in a mainstream primary school.
- 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 school 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, there will be 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.

7. Managing and administering essential medicines at school

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

It is at the discretion of the Headteacher or other members of the Senior Leadership Team whether medication prescribed by a doctor may be accepted and given to a pupil during the school day, and will always be limited to essential medication only that needs to be given in 4 daily doses

Please note that the guidelines state that a child under 16 should never be given aspirin or medicines containing ibuprofen 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.

Medication brought into school should be in its original container complete with its original chemist label:

- In-date
- Labelled (Name of the pupil, date of dispensing, dose and frequency, precautions/special storage instructions, name of medication, expiry date
- The school 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, in the school office. 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.

Certain medication requires special storage e.g. stored away from light, or within a certain temperature range. These details will need to be recorded on the *Appendix 1 parental agreement for setting to administer medicine*

Medicines will be returned to parents to arrange for safe disposal when no longer required or out of date.

It is the responsibility of the parents/carers to supply information about the medicines that their child needs to take into school and of any changes to the prescription. Parents/carers are required to complete and sign the below appendix, *parental agreement for setting to administer medicine* form that asks for this information.

Non-prescription medication should never be given to a pupil in school.

All medication administered to pupils throughout the school day are required to have relevant paperwork filled out. See appendices below. This also includes inhalers (see Asthma Policy). Once the relevant paper work has been completed as appropriate by the parent/carer, a copy should be kept with the pupil medication and a copy given to medication/first aid leads (SENCO's).

The school will keep an individual record for each pupil when medication has been administered. The administration of any medication will be recorded with two signatures. These will be archived in the pupil records.

If an individual refuses to take their medication, school staff will not force them to do so. The school will call parents/carers about the refusal and this should be recorded.

If the school has any doubts about the medication procedures/instructions they will check with the parents/carers and/or the Our Health 0-19 Hub before taking further action.

A member of the school office staff will check the expiry dates before taking medication from parents/carers.

Any expired medication will be sent home with parents.

In the event of a pupil being out of school on an educational visit, an appropriately trained member of staff will be responsible for the administration of prescribed medication during the visit.

In the case of the maladministration of medicine the following steps will be taken;

i. The child will be monitored
ii. Parents will be contacted and advised
iii. 111 will be called to seek advice
iv. An investigation will begin into the cause of the maladministration
v. Following the investigation, mitigation will be put in place and where relevant, training will take place.

<u>Advice specific to Asthma:</u>

Children on the field/playground at breaktime - staff on duty to ensure they have the red bags for their year groups with them when outside.

Lunchtimes - Class teacher to take red bag to dining hall with their class and then pass on to the TA who is going outside. TA will bring red bag back in at the end of lunchtime.

PE lessons/swimming - red bag to be taken to the place where the lesson is taking place by the teacher in charge.

Extra curricular clubs - Teacher leading the club should check their register at the start (there is a column on the register where any medical conditions should be listed) and make sure that any children with asthma have their inhalers with them. They should put them in an agreed space (plastic tray or red spotty bag for example). If not, child should be sent back to their classroom with another child to retrieve their inhaler. At the end of the club, the staff member leading the club should take the inhalers back to the relevant classroom and put back in the red bag.

Breakfast Club - An emergency inhaler is stored in the large cupboard area and can be accessed by any child on the asthma register if necessary. A list of children who attend breakfast club and who have asthma will be kept by the staff running the club.

School trips – an emergency inhaler alongside the children's own inhalers will be taken on any school trips.

Please refer to the school's Asthma Policy for further detail.

7.1 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 cupboard in the school office 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.

7.2 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 care plan.

Pupils will be allowed to carry their own medicines and relevant devices where appropriate. 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 care plan and inform parents so that an alternative option can be considered, if necessary.

7.3 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's care plan, but it is 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 care plan.
- 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 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.
- Administer, or ask pupils to administer, medicine in school toilets.

8. Emergency Procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupil care plans 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. Staff will ensure that a copy of the pupil information record is printed and taken to the hospital with the pupil if parents are not available.

9. 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 care plans. 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 SENCO and Headteacher. 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 care plans.
- Help staff to understand 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 be made 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.

10. 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.

Care plans are kept in the black file in each classroom, which all staff are aware of. A copy will also be stored electronically.

Administering medication paperwork is stored in the main school office and should be completed EVERY time medication is administered.

Asthma paperwork is stored in the class black file. This should be completed every time asthma is treated.

Care plans are stored electronically and in the class black file. This should be adhered to at all times.

A record of all children's medical conditions will be printed and kept in the medical file in the office in the event of a system failure.

11. Liability and indemnity

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

We will ensure that we are a member of the Department for Education's risk protection arrangement (RPA).

12. Complaints

Parents with a complaint about the school's actions in regard to their child's medical condition should discuss these directly with the medical lead (SENCO) in the first instance. If the SENCO cannot resolve the matter, they will direct parents to the head teacher and the school's complaints procedure.

13. Monitoring arrangements

This policy will be reviewed and approved by the governing board every 3 years.

14. Links to other policies

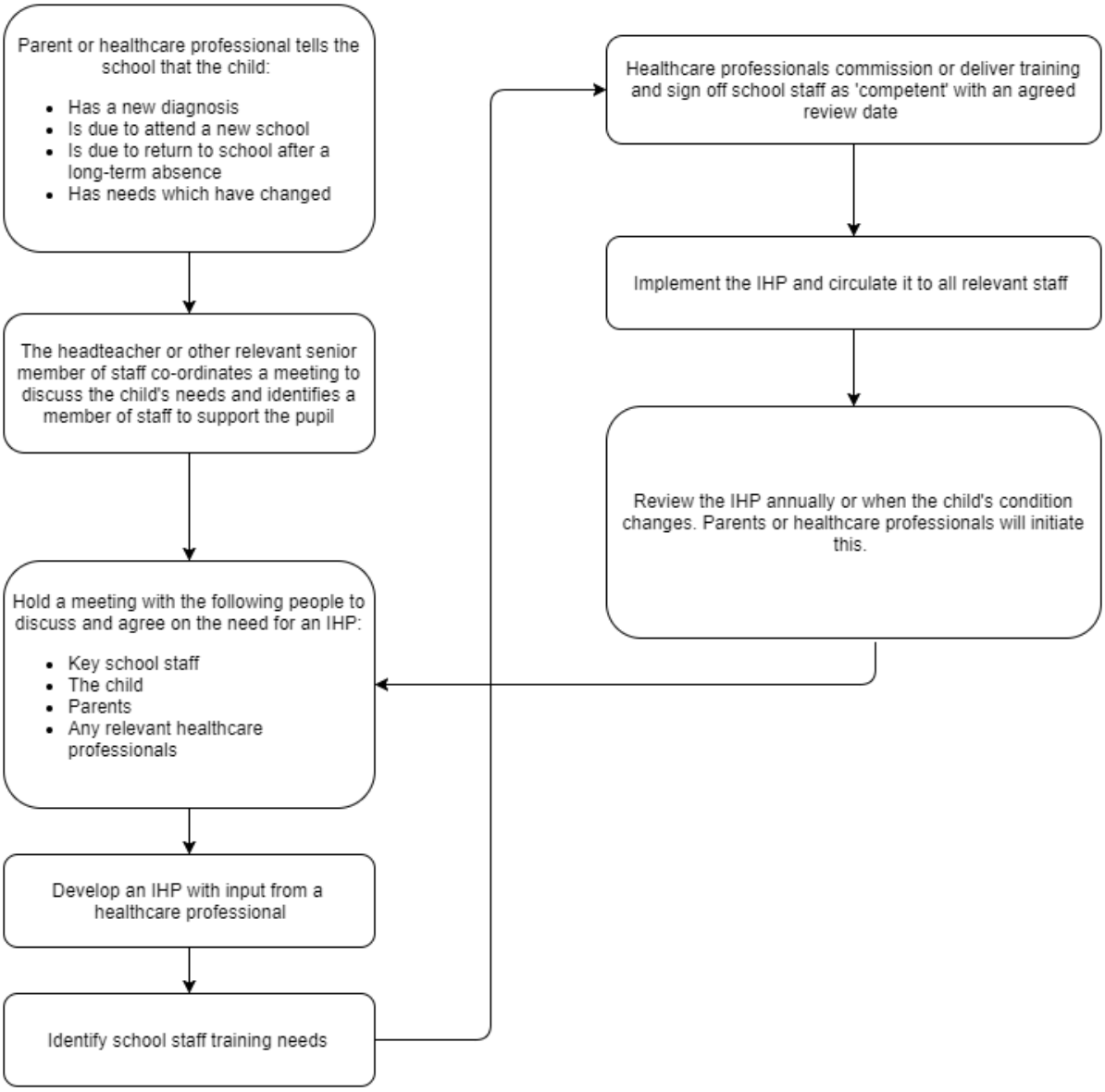
This policy links to the following policies:

- Accessibility plan
- Asthma
- Complaints
- Equality information and objectives
- Health and safety
- Safeguarding
- Special educational needs information report

And:

- National Service Framework: Standard 10-Medicines for Children & Young People 2004 DOH. DFES
- Supporting pupils at school with medical conditions. DOH. December 2015

Appendix 1: Being notified a child has a medical condition (IHP = care plan)



Appendix 2 Administering medication paperwork.

Forest Park Primary School will not give your child medicine unless you complete and sign this form. Medicines must be in the original container as

dispensed by the pharmacy. We cannot administer any medications not prescribed by a doctor.

Child's Details:

Date for review, if appropriate, to be initiated by **school office**	
Name of school	Forest Park Primary School
Name of Child	
Date of Birth	
Class	
Medical condition or illness	

Medicine Details:

Name/type of medicine (as described on the container)	
Expiry Date	
Dosage and method	
Times	
How should medicine be stored	
Special precautions/other instructions	
Are there and side effects that school need to know about? Y/N	
Self-administration Y/N	
Procedures in an emergency	

Parent/Guardian Contact Details

Name	

Daytime telephone no.	
Relationship to child	
Address	
To be completed by school: I understand that I must deliver the medicine personally to ……	(agreed member of staff, must be more than one person in the event of staff absence)

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to Forest Park Primary School staff administering medicine in accordance with the school policy. I will inform Forest Park Primary School immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature	
Date	

This is to notify Forest Park Primary School that they no longer need to administer

…….. medicine to my child……..

Signed……. Name…… Date……