

Supporting Pupils with Medical Conditions Policy

Signed by:

Mrs N Hall Headteacher September 2025

Mr D Hall Chair of Governors September 2025

Review Date: September 2026

Contents:

Statement of intent

- 1. <u>Legal framework</u>
- 2. Roles and responsibilities
- 3. Admissions
- 4. Notification procedure
- 5. Staff training and support
- 6. <u>Self-management</u>
- 7. Health Care Plans
- 8. Managing medicines
- 9. Allergens, anaphylaxis and adrenaline auto-injectors (AAIs)
- 10. Record keeping
- 11. <u>Emergency procedures</u>
- 12. <u>Day trips, residential visits and sporting activities</u>
- 13. <u>Unacceptable practice</u>
- 14. Liability and indemnity
- 15. Complaints
- 16. <u>Home-to-school transport</u>
- 17. <u>Defibrillators</u>
- 18. Monitoring and review

Appendices

- A) Health Care plan Implementation procedure
- B) Health Care plan template
- C) Parental agreement form for administering medicines template

Statement of intent

The Governing board of Mulbarton Primary School has a duty to ensure arrangements are in place to support pupils with medical conditions. The aim of this policy is to ensure that all pupils with medical conditions, in terms of both physical and mental health, receive appropriate support to allow them to play a full and active role in school life, remain healthy, have full access to education (including school trips and PE), and achieve their academic potential.

The school believes it is important that parents of pupils with medical conditions feel confident that the school provides effective support for their children's medical conditions, and that pupils feel safe in the school environment.

Some pupils with medical conditions may be classed as disabled under the definition set out in the Equality Act 2010. The school has a duty to comply with the Act in all such cases.

In addition, some pupils with medical conditions may also have SEND and have an EHC plan collating their health, social and SEND provision. For these pupils, the school's compliance with the DfE's 'Special educational needs and disability code of practice: 0 to 25 years' and the school's Special Educational Needs and Disabilities (SEND) Policy will ensure compliance with legal duties.

To ensure that the needs of our pupils with medical conditions are fully understood and effectively supported, we consult with health and social care professionals, pupils and their parents.

Legal framework

This policy has due regard to all relevant legislation and guidance including, but not limited to, the following:

- Children Act 1989
- Children and Families Act 2014
- Department of Health (2017) 'Guidance on the use of adrenaline auto-injectors in schools'
- DfE (2015) 'Special educational needs and disability code of practice: 0-25 years'
- DfE (2017) 'Supporting pupils at school with medical conditions'
- DfE (2022) 'School Admissions Code'
- DfE (2022) 'First aid in schools, early years and further education'
- Education Act 1996 (as amended)
- Education Act 2002
- Equality Act 2010
- Health and Safety at Work etc. Act 1974
- Medicines Act 1968
- Misuse of Drugs Act 1971
- National Health Service Act 2006 (as amended)
- The Food Information (Amendment) (England) Regulations 2019 (Natasha's Law)
- The Human Medicines (Amendment) Regulations 2017
- The School Premises (England) Regulations 2012 (as amended)
- The Special Educational Needs and Disability Regulations 2014 (as amended)

This policy operates in conjunction with the following school policies:

• Special Educational Needs and Disabilities (SEND) Policy

- First Aid Policy
- Pupil Equality, Equity, Diversity and Inclusion Policy
- Attendance Policy
- Admissions Policy

Roles and responsibilities

The Governing board will be responsible for:

- Fulfilling its statutory duties under legislation.
- Ensuring that arrangements are in place to support pupils with medical conditions.
- Ensuring that pupils with medical conditions can access and enjoy the same opportunities as any other pupil at the school.
- Working with the LA, health professionals, commissioners and support services to ensure that pupils with medical conditions receive a full education.
- Ensuring that, following long-term or frequent absence, pupils with medical conditions are reintegrated effectively.
- Ensuring that the focus is on the needs of each pupil and what support is required to support their individual needs.
- Instilling confidence in parents and pupils in the school's ability to provide effective support.
- Ensuring that all appropriate members of staff are properly trained to provide the necessary support and are able to access information and other teaching support materials as needed.
- Ensuring that no prospective pupils are denied admission to the school because arrangements for their medical conditions have not been made.
- Ensuring that pupils' health is not put at unnecessary risk. As a result, the board holds
 the right to not accept a pupil into school at times where it would be detrimental to
 the health of that pupil or others to do so, such as where the child has an infectious
 disease.
- Ensuring that policies, plans, procedures and systems are properly and effectively implemented.

- Ensuring that the school's policy clearly identifies the roles and responsibilities of all
 those involved in the arrangements they make to support pupils and sets out the
 procedures to be followed whenever a school is notified that a pupil has a medical
 condition.
- Ensuring that the school's policy covers the role of Health Care Plans (HCP), and who is responsible for their development, in supporting pupils at school with medical conditions.
- Ensuring that plans are reviewed at least annually, or earlier if evidence is presented that the child's needs have changed.

The Headteacher will be responsible for:

- The overall implementation of this policy.
- Ensuring that this policy is effectively implemented with stakeholders.
- Ensuring that all staff are aware of this policy and understand their role in its implementation.
- Ensuring that a sufficient number of staff are trained and available to implement this policy and deliver against all HPCs, including in emergency situations.
- Considering recruitment needs for the specific purpose of ensuring pupils with medical conditions are properly supported.
- Having overall responsibility for the development of HCPs.
- Ensuring that staff are appropriately insured and aware of the insurance arrangements.
- Contacting the school nurse where a pupil with a medical condition requires support that has not yet been identified.

Parents will be responsible for:

- Notifying the school if their child has a medical condition.
- Providing the school with sufficient and up-to-date information, including any changes about their child's medical needs.
- Being involved in the development and review of their child's IHP.

- Carrying out any agreed actions contained in the IHP.
- Ensuring that they, or another nominated adult, are contactable at all times.

Pupils will be responsible for:

- Being fully involved in discussions about their medical support needs, where applicable.
- Contributing to the development of their HCP, if they have one, where applicable.
- Being sensitive to the needs of pupils with medical conditions.

School staff will be responsible for:

- Providing support to pupils with medical conditions, where requested, including the administering of medicines.
- Taking into account the needs of pupils with medical conditions in their lessons when deciding whether or not to volunteer to administer medication.
- Receiving sufficient training and achieve the required level of competency before taking responsibility for supporting pupils with medical conditions.
- Knowing what to do and responding accordingly when they become aware that a pupil with a medical condition needs help.

Admissions

Admissions will be managed in line with the school's Admissions Policy.

No child will be denied admission to the school or prevented from taking up a school place because arrangements for their medical condition have not been made; a child may only be refused admission if it would be detrimental to the health of the child to admit them into the school setting.

Notification procedure

It is the responsibility of the parent notify the school that their child has a medical condition which requires support in school. Following this, the school will arrange a meeting with parents, where relevant, healthcare professionals and the pupil, with a view to discussing the necessity of an IHP, outlined in detail in the HCPs section of this policy.

The school will not wait for a formal diagnosis before providing support to pupils. Where a pupil's medical condition is unclear, or where there is a difference of opinion concerning what support is required, a judgement will be made by the Headteacher based on all available evidence, including medical evidence and consultation with parents.

For a pupil starting at the school in a September uptake, arrangements will be put in place prior to their introduction and informed by their previous institution. Where a pupil joins the school mid-term or a new diagnosis is received, arrangements will be put in place within two weeks.

Staff training and support

Any staff member providing support to a pupil with medical conditions will receive suitable training. Staff will not undertake healthcare procedures or administer medication without appropriate training. Training needs will be assessed by the SENDCO through the development and review of HCPs, on a regular basis for all school staff, and when a new staff member arrives. The school nurse will confirm the proficiency of staff in performing medical procedures or providing medication.

A first-aid certificate will not constitute appropriate training for supporting pupils with medical conditions.

Through training, staff will have the requisite competency and confidence to support pupils with medical conditions and fulfil the requirements set out in IHPs. Staff will understand the medical conditions they are asked to support, their implications, and any preventative measures that must be taken.

Whole-school awareness training will be carried out on a regular basis for all relevant staff and included in the induction of new staff members.

The SENDCO will identify suitable training opportunities that ensure all medical conditions affecting pupils in the school are fully understood, and that staff can recognise difficulties and act quickly in emergency situations.

The parents of pupils with medical conditions will be consulted for specific advice and their views are sought where necessary, but they will not be used as a sole trainer.

Self-management

Following discussion with parents, pupils who are competent to manage their own health needs and medicines will be encouraged to take responsibility for self-managing their medicines and procedures. This will be reflected in their IHP.

Where possible, pupils will be allowed to carry their own medicines and relevant devices. Where it is not possible for pupils to carry their own medicines or devices, they will be held in suitable locations that can be accessed quickly and easily. If a pupil refuses to take medicine or carry out a necessary procedure, staff will not force them to do so. Instead, the procedure agreed in the pupil's IHP will be followed. Following such an event, parents will be informed so that alternative options can be considered.

If a pupil with a controlled drug passes it to another child for use, this is an offence and appropriate disciplinary action will be taken in accordance with our Drug and Alcohol Policy.

Health Care Plans

The school, healthcare professionals and parents agree, based on evidence, whether an HCP will be required for a pupil, or whether it would be inappropriate or disproportionate to their level of need. If no consensus can be reached, the Headteacher will make the final decision.

The school, parents and a relevant healthcare professional will work in partnership to create and review HCPs. Where appropriate, the pupil will also be involved in the process.

HCPs will include the following information:

- The medical condition, along with its triggers, symptoms, signs and treatments
- The pupil's needs, including medication (dosages, side effects and storage), other treatments, facilities, equipment, access to food and drink (where this is used to manage a condition), dietary requirements, and environmental issues
- The support needed for the pupil's educational, social and emotional needs
- The level of support needed, including in emergencies
- Who will provide the necessary support, including details of the expectations of the role and the training needs required, as well as who will confirm the supporting staff member's proficiency to carry out the role effectively
- Who needs to be made aware of the pupil's condition and the support required
- What to do in an emergency, including contact details and contingency arrangements

Where a pupil has an emergency healthcare plan prepared by their lead clinician, this will be used to inform the HCP.

HCPs will be easily accessible to those who need to refer to them, but confidentiality will be preserved. HCPs will be reviewed on at least an annual basis, or when a child's medical circumstances change, whichever is sooner.

Where a pupil has an EHCP, the HCP will be linked to it or become part of it.

Where a child is returning from a period of hospital education, alternative provision or home tuition, the school will work with the LA and education provider to ensure that their HCP identifies the support the child will need to reintegrate.

All HCPs will be reviewed at least annually, or earlier if evidence is presented that the child's needs have changed.

Managing medicines

In accordance with the school's Medicines Policy, medicines will only be administered at school when it would be detrimental to a pupil's health or school attendance not to do so.

Non-prescription medicines may be administered in the following situations:

- When it would be detrimental to the pupil's health not to do so
- When instructed by a medical professional

No pupil under the age of 16 will be given medicine containing aspirin unless prescribed by a doctor. Pain relief medicines will not be administered without first checking when the previous dose was taken, and the maximum dosage allowed.

Parents will be informed any time medication is administered that is not agreed in an HCP.

The school will only accept medicines that are in-date, labelled, in their original container, and contain instructions for administration, dosage and storage. The only exception to this is insulin, which must still be in-date, but is available in an insulin pen or pump, rather than its original container.

All medicines will be stored safely. Pupils will be informed where their medicines are at all times and will be able to access them immediately, whether in school or attending a school trip or residential visit. When medicines are no longer required, they will be returned to parents for safe disposal.

Sharps boxes will be used for the disposal of needles and other sharps.

Controlled drugs will be stored in a non-portable container and staff members will have access; however, these drugs can be easily accessed in an emergency. A record will be kept

of the amount of controlled drugs held and any doses administered. Staff may administer a controlled drug to a pupil for whom it has been prescribed, in accordance with the prescriber's instructions.

The school will hold asthma inhalers for emergency use. The inhalers will be stored in the child's classroom in a clearly labelled box and cupboard and their use will be recorded.

Records will be kept of all medicines administered to individual pupils, stating what, how and how much medicine was administered, when, and by whom. A record of side effects presented will also be held.

Non-prescription medicines

The school is aware that pupils may, at some point, suffer from minor illnesses and ailments of a short-term nature, and that in these circumstances, health professionals are likely to advise parents to purchase over the counter medicines, for example, paracetamol and antihistamines.

The school works on the premise that parents have the prime responsibility for their child's health and should provide schools and settings with detailed information about their child's medical condition as and when any illness or ailment arises.

To support full attendance the school will consider making arrangements to facilitate the administration of non-prescription medicines following parental request and consent.

Pupils and parents will not be expected to obtain a prescription for over-the-counter medicines as this could impact on their attendance and adversely affect the availability of appointments with local health services due to the imposition of non-urgent appointments being made.

If a pupil is deemed too unwell to be in school, they will be advised to stay at home or parents will be contacted and asked to take them home.

When making arrangements for the administration of non-prescription medicines the school will exercise the same level of care and caution, following the same processes, protocols and procedures as those in place for the administration of prescription medicines.

The school will also ensure that the following requirements are met when agreeing to administer non-prescription medicines.

• Non-prescription medicines will not be administered for longer than is recommended. For example, most pain relief medicines, such as ibuprofen and

paracetamol, will be recommended for three days use before medical advice should be sought. Aspirin will not be administered unless prescribed.

- Parents will be asked to bring the medicine in, on at least the first occasion, to enable
 the appropriate paperwork to be signed by the parent and for a check to be made
 of the medication details.
- Non-prescription medicines must be supplied in their original container, have instructions for administration, dosage and storage, and be in date. The name of the child must be written on the container by an adult.
- Only authorised staff who are sufficiently trained will be able to administer nonprescription medicines.

Paracetamol

The school is aware that paracetamol is a common painkiller that is often used by adults and children to treat headaches, stomach ache, earache, cold symptoms, and to bring down a high temperature; however, it also understands that it can be dangerous if appropriate guidelines are not followed and recommended dosages are exceeded.

The school is aware that paracetamol for children is available as a syrup from the age of 2 months; and tablets (including soluble tablets) from the age of 6 years, both of which come in a range of strengths.

The school understands that children need to take a lower dose than adults, depending on their age and sometimes, weight. The school will ensure that authorised staff are fully trained and aware of the NHS advice on how and when to give paracetamol to children, as well as the recommended dosages and strength.

Staff will always check instructions carefully every time they administer any medicine, whether prescribed or not, including paracetamol.

The school will ensure that they have sufficient members of staff who are appropriately trained to manage medicines and health needs as part of their duties.

Verbal or written consent of parents will be required in order to administer paracetamol to pupils.

Allergens, anaphylaxis and adrenaline auto-injectors (AAIs)

Parents are required to provide the school with up-to-date information relating to their children's allergies, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication required. The school catering team require parents of children with allergies to complete a, 'Norse Primary School special diet,' registration form. Children will not be served until this has been completed.

The Headteacher and Norse catering team will ensure that all meals prepared on the school site meet the requirements of Natasha's Law. For snack packs, the product displays the name of the food and a full, up-to-date ingredients list with allergens emphasised in bold. Hot meals for children with allergies are prepared and stored separately.

The Norse catering team store eg: gluten free products and ingredients separately. Food is prepared in a separate area. The catering team follow Norse food safety protocol to avoid mixed contamination.

Staff members receive appropriate training and support relevant to their level of responsibility, in order to assist pupils with managing their allergies.

The administration of adrenaline auto-injectors (AAIs) and the treatment of anaphylaxis will be carried out in accordance with a child's HCP.

Teachers are aware of any pupils who have been prescribed an AAI to use in the event of anaphylaxis. A copy of their HCP will be stored with their AAI for easy access in the event of an allergic reaction and will be checked as part of initiating the emergency response.

AAI devices will be stored in a labelled box in a labelled cupboard in the child's classroom.

Designated staff members will be trained on how to administer an AAI, and the sequence of events to follow when doing so. AAIs will only be administered by these staff members.

In the event of anaphylaxis, a designated staff member will be contacted immediately. Where there is any delay in contacting designated staff members, or where delay could cause a fatality, the nearest staff member will administer the AAI. If necessary, other staff members may assist the designated staff members with administering AAIs, e.g. if the pupil needs restraining.

Where a pupil is, or appears to be, having a severe allergic reaction, the emergency services will be contacted even if an AAI device has already been administered.

In the event that an AAI is used, the pupil's parents will be notified that an AAI has been administered and informed whether this was the pupil's or the school's device. Where any

AAIs are used, the following information will be recorded on the Adrenaline Auto-Injector (AAI) Record:

- Where and when the reaction took place
- How much medication was given and by whom

AAIs will not be reused.

In the event of a school trip, pupils at risk of anaphylaxis will have their own AAI with them and the school will give consideration to taking the spare AAI in case of an emergency.

Record keeping

Written records will be kept of all medicines administered to pupils. Proper record keeping will protect both staff and pupils and provide evidence that agreed procedures have been followed.

Emergency procedures

Medical emergencies will be dealt with under the school's emergency procedures.

Where an HCP is in place, it should detail:

- What constitutes an emergency.
- What to do in an emergency.

Pupils will be informed in general terms of what to do in an emergency, e.g. telling a member of staff.

If a pupil needs to be taken to hospital, two members of staff, including, where possible, at least one member of the Senior Leadership Team, will remain with the pupil until their parents arrive.

Day trips, residential visits and sporting activities

Pupils with medical conditions will be supported to participate in school trips, sporting activities and residential visits.

Prior to an activity taking place, the school will conduct a risk assessment to identify what reasonable adjustments should be taken to enable pupils with medical conditions to participate. In addition to a risk assessment, advice will be sought from pupils, parents and relevant medical professionals. The school will arrange for adjustments to be made for all

pupils to participate, except where evidence from a clinician, e.g. a GP, indicates that this is not possible.

Unacceptable practice

The school will not:

- Assume that pupils with the same condition require the same treatment.
- Prevent pupils from easily accessing their inhalers and medication.
- Ignore the views of the pupil or their parents.
- Ignore medical evidence or opinion.
- Send pupils home frequently for reasons associated with their medical condition, or prevent them from taking part in activities at school, including lunch times, unless this is specified in their HCP.
- Send an unwell pupil to the medical room or school office alone or with an unsuitable escort.
- Penalise pupils with medical conditions for their attendance record, where the absences relate to their condition.
- Make parents feel obliged or forced to visit the school to administer medication or provide medical support, including for toilet issues. The school will ensure that no parent is made to feel that they have to give up working because the school is unable to support their child's needs.
- Create barriers to pupils participating in school life, including school trips.
- Refuse to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

Liability and indemnity

The governing board will ensure that appropriate insurance is in place to cover staff providing support to pupils with medical conditions.

The school holds an insurance policy with Zurich Municipal.

Home-to-school transport

Arranging home-to-school transport for pupils with medical conditions is the responsibility of the LA. Where appropriate, the school will share relevant information to allow the LA to develop appropriate transport plans for pupils with life-threatening conditions.

Defribrilators

The school has a Mediana automated external defibrillator (AED). The AED is stored in an unlocked, alarmed cabinet and is located in the foyer of the Upper School Hall.

All staff members will be made aware of the AED's location and what to do in an emergency. A risk assessment regarding the storage and use of AEDs at the school will be carried out and reviewed annually.

No training will be needed to use the AED, as voice and/or visual prompts guide the rescuer through the entire process from when the device is first switched on or opened; however, staff members will be trained in cardiopulmonary resuscitation (CPR), as this is an essential part of first-aid and AED use.

The emergency services will always be called where an AED is used or requires using.

Where possible, AEDs will be used in paediatric mode or with paediatric pads for pupils under the age of eight.

Maintenance checks will be undertaken on AEDs on a weekly basis by the Site Manager who will also keep an up-to-date record of all checks and maintenance work.

Monitoring and review

This policy is reviewed on an annual basis by the governing board, and Headteacher. Any changes to this policy will be communicated to all staff, parents and relevant stakeholders.

The next scheduled review date for this policy is September 2026.

Health Care Plan Implementation Procedure •A parent or healthcare professional informs the school that the child has a medical condition or is due to return from long-term absence, or that needs have changed. •The SENDCO coordinates a meeting to discuss the child's medical needs and identifies a member of school staff who 2 will provide support to the pupil. •A meeting is held to discuss and agree on the need for a HCP. 3 •An HCP is developed in partnership with healthcare professionals, and agreement is reached on who leads. 4 •School staff training needs are identified. 5 •Training is delivered to staff and review dates are agreed. 6 •The HCP is implemented and circulated to relevant staff. •The HCP is reviewed annually or when the condition changes (revert back to step 3). 8



HEALTH CARE PLAN FOR A CHILD/YOUNG PERSON WITH HEALTH NEEDS

PERSONAL DETAILS Name of Child/Young Person:	Child/Young Person's Photo
Date of Birth:	
Name of School:	
Class/Form:	
Date:	
Date Care Plan to be reviewed:	
Child/Young Person's Heal	th Need

ESSENTIAL INFORMATION CONCERNING THE YOUNG PERSON'S HEALTH NEED

- 1. Describe the health need and give details of child/young person's individual symptoms:
- 2. Describe what constitutes an emergency for the child/young person and the action to take if this occurs:

3. The prescribed medication is located at: (Must include drug dosage and information around self care if applicable) many strong and self-care if applicable in the self-c					
4. What are the child/young person's daily care requirements (e.g. before sport/at lunch-time etc.):					
 Persons able to respond should an er activities): 	5. Persons able to respond should an emergency occur (state if different for 'off-site' activities):				
CONTACT INFORMATION					
Family Contact 1	Family Contact 2				
Name:	Name:				
Phone No: (Home)	Phone No: (Home)				
(Work):	(Work):				
(Mobile):	(Mobile):				
Relationship:	Relationship:				
GP:					
Phone No:					



HEALTH CARE PLAN AGREED BY:

Signatures:

1. Parent/Guardian/Carer	Name	Date
2. SENCO*	Name and Designation	Date

(*SENCO = Special Educational Needs Co-ordinator)

Note for Parents:

Confidentiality: For reasons of safety your child's first name, photograph and key medical need may be displayed in the kitchen and first aid areas.

Parental agreement for setting to administer medicine

The school will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Name of school	Mulbarton Primary School
Name of child	
Date of birth	
Class	
Medical condition or illness	
Medicine	
Name/type of medicine	
(as described on the container)	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the	
school/setting needs to know about?	
Self-administration – y/n	
ND: Madiainaa must ka in the eriginal	

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

Name Daytime telephone no. Relationship to child Verbal consent given eg over the phone The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting 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 medicine is stopped.

Date _____

Signature _____

Record of medicine administered to an individual child

Name of school		Mulbarton Primary Schoo	I
Name of child			
Date medicine provided by	y parent		
Class			
Quantity received			
Name and strength of med	dicine		
Expiry date			
Quantity returned			
Dose and frequency of me	dicine		
Staff signature			
Date			
Time given			
Dose given			
Name of member of staff Staff initials			
-			
Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date				
Time given				
Dose given				
Name of member of staff Staff initials				
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Staff initials		