



## Supporting Pupils with Medical Needs Policy

<b>Approved by:</b>	Standards Committee	<b>Date:</b> 15/01/2025
<b>Last reviewed:</b>	January 2025	
<b>Next review due by:</b>	January 2026	

## **Introduction**

[Section 100 of the Children and Families Act 2014](#) 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: [Supporting pupils at school with medical conditions](#).

## **Pupils with Medical Needs**

Most pupils will, at some time have a medical condition that may affect their participation in school activities. For many this will be short term and will be discussed with the child's parent/carer on a case-by-case basis.

Other pupils have medical conditions that, if not properly managed, could limit their access to education. Such children are regarded as having medical needs. Most children with medical needs are able to attend school regularly and, with some support from school, can take part in most school activities. However, school staff may need to take extra care in supervising some activities to make sure that these pupils, and others, are not put at risk. For these pupils, an individual health plan will be drawn up in consultation with parents and medical professionals. At all times, staff and pupils will be encouraged to be sympathetic to children who have medical needs or who require medication at school.

## **Support for Pupils with Medical Needs**

Parents or guardians have prime responsibility for their child's health and should provide school with information about their child's medical condition. Parents, and the pupil where possible should give details in conjunction with their child's GP or paediatrician, as appropriate. The school nurse or doctor and specialist voluntary bodies may be able to provide additional background information for school staff.

## **Equal Opportunities**

The Rainbow Multi Academy Trust 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 trust schools 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.

## **Roles and Responsibilities**

### **The Employer**

The employer, The Rainbow Multi Academy Trust, is responsible under the Health and Safety at Work etc Act 1974, for making sure that the school has a Health and Safety Policy. This should include procedures for supporting pupils with medical needs, including managing medication.

## **The Governing Body and Board of Directors**

The governing body will follow the health and safety policies and procedures produced by The Rainbow Multi Academy Trust. The Board of Directors of The Rainbow Multi Academy Trust has ultimate responsibility for arranging to support pupils with medical conditions.

## **The Head**

The Head is responsible for implementing this policy in practice and for developing detailed procedures. The Head will:

- Ensure 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 staff have received suitable support and training and are competent before they are responsible for supporting children with medical conditions
- Take overall responsibility for the development of IHPs
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- Contact relevant health professionals 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 professional service
- 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 day to day decisions about administering medication

## **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. This includes the administration of medicines.

Some school staff are naturally concerned about their ability to support a pupil with a medical condition, particularly if it is potentially life threatening. 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 who have pupils with medical needs in their class should understand the nature of the condition. They must also understand when and where the pupil may need extra attention. The pupil's parents and health professionals should provide this information.

All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help. Alternative cover should be arranged for when a member of

staff responsible is absent or unavailable. At different times of day, other staff may be responsible for children, e.g. lunchtime supervisors. The school will ensure that they are provided with appropriate training and advice.

## **Parents**

Parents, as defined in the Education Act 1996, include any person who is not a parent of a child but has parental responsibility for the care of a child, such as foster parent. They are responsible for making sure the child is well enough to attend school. Parents should provide the head with sufficient information about their child's medical condition and treatment or special care needed at school. They should, jointly with the head, reach agreement on the school's role in helping with their child's medical needs. Parent's cultural and religious views will always be respected.

It only requires one parent to agree to or request that medicines are administered. As a matter of practicality, this is likely to be the parent with whom the school has day-to-day contact. Where parents disagree over medical support, the Courts must resolve the disagreement. The school will continue to administer the medicine in line with the consent given and in accordance with the prescriber's instructions, unless and until a Court decides otherwise. (DfES Guidance 1448-2005DCL-March 2005) The school will follow DfE guidance in determining parental responsibility.

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

## **Pupils**

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. If pupils are mature enough, they 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.

## **Others with a Role**

Cornwall Council, Health Authorities, School Health Service, School Nurse, GP, other Health Professionals will advise as necessary.

## **Being Notified that a Child has a Medical Condition**

When a school is notified that a pupil has a medical condition, the process in appendix 1 will be followed to decide whether the pupil requires an IHCP. 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.

## **Staff 'Duty of Care'**

Anyone caring for children, including teachers and other school staff in charge of children have a common law duty of care to act like any reasonably prudent parent. Staff need to make sure that children are healthy and safe. In exceptional circumstances, the duty of care could extend to administering medicines and/or taking action in an emergency. This duty also extends to staff leading activities taking place off site, such as visits, outings or residential trips.

## **Confidentiality**

The Head and staff will always treat medical information confidentially. The Head will agree with the parent, who else should have access to records and other information about a child and this will be detailed in their Individual Health Care Plan. If information is withheld from staff, they will not generally be held responsible if they act incorrectly in giving medical assistance but otherwise in good faith.

## **Medication**

### **School Staff Giving Medication**

There is no legal duty that requires school staff to administer medication; this is a voluntary role. Any member of staff who agrees to accept responsibility for administering prescribed medicines to a child, must be competent to do so and will receive support from the Head and parents. Staff should receive appropriate training and guidance and they should be aware of possible side effects of the medicines and what to do if they occur. The type of training provided will depend on the individual child's needs. Such staff must have access to information and reassurance about their legal liability. The Rainbow Multi Academy Trust must ensure that their insurance policies provide appropriate cover for staff who agree to administer medicines.

The majority of medicine will be administered by the class teacher or teaching assistant.

### **Short Term Medical Needs**

Many pupils will need to take medication (or be given it) at school at some time in their school life. Mostly this will be for a short time only; e.g. to finish a course of antibiotics. To allow pupils to do so will minimise the time they need to be absent from school. However, medicines should only be taken in school when essential; that is where it would be detrimental to a child's health if the medicine were not administered during the school day. Parents should keep children at home if they are acutely unwell.

Where possible, medicines should not be given in school – parents are encouraged to ask the prescriber to prescribe dose frequencies that enable the medicine to be taken outside school hours. For example, medicines that need to be taken three times a day could be taken in the morning, after school and at bedtime. The school will administer prescribed and non-prescribed medicines to a child if there is specific, prior written permission from a parent (forms are available from the school office).

- A child under the age of 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor

- If a child suffers regularly from frequent or acute pain the parents are encouraged to refer the matter to the child's GP
- Parents must complete Administration of Medicine Form before any medication will be given. (Available from the office.)
- Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken.
- The Head will ensure that written records are kept of all medicine administered to pupils

The school will only accept prescribed medicines that are:

- In-date
- Clearly labelled with the child's name and the appropriate dose
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage. A spoon/measuring syringe must be provided if needed.

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. 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 and not locked away.

All medicines will be returned to the parent when no longer required, so that they can arrange for safe disposal. If this is not possible, medicines will be returned to the dispensing chemist.

School will not accept medicines that have been taken out of their original container as dispensed nor make changes to doses on parental instruction. No child at school will be given medicines without parental consent.

Any member of staff giving medicines will check:

- The child's name
- Prescribed dose
- Expiry date
- Written instructions provided by the prescriber on the label or container
- Record each time they administer medicine to the child

### **Administering Medicine to Children with Long Term Needs**

Parents must tell the school about the medicines their child needs to take and provide written details of any changes to the prescription or the support required. School will keep written records of any medicines administered. The same policy on administering long-term medicines apply as those for short-term administration. E.g. Medicines must be provided in their original container as dispensed by the pharmacist and must include the prescriber's instructions. Staff will check that written details include:

- The child's name

- Prescribed dose
- Expiry date
- Written instructions provided by the prescriber on the label or container.
- Record each time they administer medicine to the child.

See Short Term Medical Needs section above.

### **Storage and Disposal of Medicines**

Medicines will be stored securely in the school office. Certain medicines will be stored in the fridge if advised to do so by parents.

For pupils with complex and serious medical needs, a risk assessment will be undertaken for the individual child, and if appropriate, as part of an Individual Health Care Plan.

### **Long Term Medical Needs**

It is important for the school to have sufficient information about the medical condition of any pupil with long-term medical needs. If a pupil's needs are inadequately supported, this can have a significant impact on a child's academic attainment and/or lead to emotional and behavioural problems. For pupils who attend regular hospital appointments, special arrangements may be necessary. For pupils with long-term medical needs, we will draw up an individual health care plan.

### **Individual Health Care Plans (IHCP)**

The Head has overall responsibility for the development of IHPs for pupils with medical conditions.

The main purpose of an IHCP is to identify the level of support that is needed at school for an individual pupil. This written agreement with parents clarifies for staff, parents and the pupil the help the school can provide and receive.

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.

IHCPs will be linked to, or become part of, any statement of special educational needs (SEN) or education, health and care (EHC) plan. If a pupil has SEN but does not have a statement or 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 Head/name of individual/role with responsibility for developing IHPs, will consider the following when deciding what information to record on IHCPs:

- 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

- 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
- 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 school needs to be aware of the pupil's condition and the support required
- Arrangements for written permission from parents and the head 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

A copy will be given to parents, class teacher and a copy will be retained in the medical needs/SEN file. IHCPs are kept in a readily accessible place that all staff are aware of.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

Not all pupils with a medical condition will require an IHCP. It will be agreed with a healthcare professional and the parents when an IHCP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the Head will make the final decision.

### **Self-Management**

We recognise that it is good practice to encourage children, who are able, to take responsibility to manage their own medicines. This will be discussed and agreed with parents, children and health professionals as appropriate. Any decisions regarding self-medication will be outlined in the individual health care plan, depending on the child's maturity and with regard to the safety of other children.

Parents will support children in understanding the safety issues involved in carrying their own medication. If a child is too young to carry their medication safely, it will be stored in a location that is easily accessible at all times.

### **Refusing Medication**

If a pupil refuses to take medication, it is the policy of the school not to force them to do so. This will be recorded, in the case of short-term medication, on the Administration of Medicine Form or, for children with an IHCP, in the records for the plan. Procedures as outlined in the IHCP will be followed.

Parents will be contacted as a matter of urgency. If necessary, the school will call the emergency services.

## **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 IHCPs. 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 Head/name of role. 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 IHCPs
- 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.

## **Sporting Activities**

We recognise that most children with medical needs can participate in physical activities and extra-curricular sport. Any restrictions in a child's ability to participate in PE should be recorded in their IHCP. All staff should be aware of issues of privacy and dignity for children with particular needs.

## **School Trips**

We recognise that it is good practice to encourage children with medical needs to participate in safely managed visits.

When preparing risk assessments staff will consider any reasonable adjustments they might make to enable a child with medical needs to participate fully and safely on visits.

Sometimes additional safety measures may need to be taken for outside visits and it may be that an additional supervisor, a parent or other volunteer might be needed to accompany a particular child. Arrangements for taking any medicines will need to be planned or as part of the risk assessment and trip planning process. A copy of IHCPs should be taken on trips and visits in the event of information being needed in an emergency.

All staff taking pupils out of school are required to take a travelling first aid kit. Staff are required to take emergency contact forms and a mobile phone. Pupils, who are responsible for their own inhalers must bring them on trips and staff must check they have them with them. In the case of younger children, staff must ensure that they have all necessary medication. One of the emergency inhalers will also accompany any trip. Additional measures may be necessary for individual pupils. These will be specified in the child's IHCP.

## **Unacceptable Practice**

School staff should use their discretion and judge each case individually with reference to the pupil's IHCP, 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 IHCPs
- 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 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, e.g. by requiring parents to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

## **Emergency Procedures**

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

## **Liability and Indemnity**

The Board of Directors will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk. Please refer to the Zurich insurance policy.

## **Complaints**

Parents with a complaint about their child's medical condition should discuss these directly with the head/name of role/individual in the first instance. If the head/name of role/individual cannot resolve the matter, they will direct parents to the trust's complaints procedure.

## **References**

Supporting Pupils with Medical Needs - a good practice guide DfEE & Dept of Health  
Supporting Pupils with Medical Needs in School - Circular 14/96

## Appendix 1: Being notified a child has a medical condition



