



Supporting Pupils at School with Medical Conditions POLICY STATEMENT

Person responsible for policy: Chief Executive

Reviewed: July 2025

Review Date: July 2026

Change control

15/10/2024 Individual Healthcare Plans are monitored, and reviewed at least annually, or earlier if evidence is presented that the child's needs have changed. (changed from at least monthly)

RIVER LEARNING TRUST		
HEALTH & SAFETY		
Document Type:	Policy	
Document Title:	Supporting Children with Medical Conditions Policy	
Document Date	Aug 2021	
Review Dates:	July 2024	July 2025

Introduction

This policy should be read in conjunction with the 'Supporting Children with Medical Conditions and Medicines GUIDANCE'. In accordance with Section 100 of the Children and Families Act 2014, the governing body is responsible for establishing arrangements to support pupils with medical conditions, having due regard to the DfE guidance 'Supporting Pupils at School with Medical Conditions' (effective September 1, 2014, last reviewed August 2017).

Key points

- Pupils with medical conditions will be supported to have full access to education, including school trips and physical education.
- Governing bodies must ensure that schools have appropriate arrangements in place to support pupils at school with medical conditions.
- Governing bodies must ensure that school leaders consult with health and social care professionals, pupils, and parents to ensure the needs of pupils with medical conditions are thoroughly understood and effectively supported.

The role of governing bodies and the River Learning Trust

The governing body is legally responsible and accountable for fulfilling its statutory duty to support pupils with medical conditions, as outlined in the DfE guidance. While functions may be delegated to governors, Headteachers, committees, or other staff, the governing body retains ultimate responsibility.

The governing body must:

- Ensure arrangements are in place to support pupils with medical conditions, enabling them to access and enjoy the same opportunities at school as their peers.
- Recognise that many medical conditions can affect quality of life and may be life-threatening, ensuring arrangements focus on the individual needs of each child and how their condition impacts their school life.
- Ensure arrangements foster confidence among parents/carers and pupils in the school's ability to provide effective support, demonstrating an understanding of the impact of medical conditions on learning, and promoting self-care.
- Ensure that policies, plans, procedures, and systems are effectively implemented to meet statutory responsibilities and that staff are sufficiently trained to provide the support that pupils need.

Each school within the River Learning Trust will ensure:

- Designated staff are responsible for ensuring sufficient staff are suitably trained.
- All relevant staff are made aware of a child's condition.
- Cover arrangements are in place for staff absence or turnover.
- Supply teachers are briefed.
- Risk assessments are conducted for off-site activities.

- Individual Healthcare Plans are monitored and reviewed at least annually, or more frequently if needs change.

Definition of Pupils' Medical Needs

Pupils' medical needs can be broadly summarised as:

- Short-term: Affecting participation in activities while on a course of medication.
- Long-term: Potentially limiting access to education and requiring additional care and support.

Procedure following Notification of a Pupil's Medical Condition

Each school will establish a procedure for when it is notified that a pupil has a medical condition. This will include procedures for:

- Transitions between schools.
- Reintegration processes.
- Changes in pupils' needs.
- Staff training and support.

For pupils starting a new school, arrangements will be in place by the start of the relevant term. In other cases, arrangements will be made within two weeks.

Schools will provide support to pupils even before a formal diagnosis. If a pupil's condition is unclear or there is a difference of opinion, support will be determined based on available evidence, including medical evidence and parent/carers consultation. Conflicting evidence may be challenged to ensure appropriate support is provided.

Individual Healthcare Plans (IHPs)

Individual Healthcare Plans (IHPs) facilitate effective support for pupils with medical conditions by clarifying required actions, timelines, and responsibilities.

IHPs are often essential for fluctuating conditions or high-risk emergency situations, and are generally beneficial for long-term or complex medical needs. However, not all children will require one.

The school, healthcare professionals, and parents/carers should collaboratively determine, based on evidence, when an IHP is unnecessary or disproportionate. In cases of disagreement, the Headteacher will make the final decision. River Learning Trust schools will adhere to the model flowchart process for developing IHPs, as detailed on p28 of 'Supporting Pupils at School with Medical Conditions' DfE guidance and in the Trust guidance notes supporting this policy.

IHPs (and their review) may be initiated by school staff or healthcare professionals, in consultation with parents/carers. Plans should be created collaboratively by the school, parents/carers, and relevant healthcare professionals (e.g., school nurse, specialist, or paediatrician), with pupil involvement as appropriate.

IHPs will be reviewed at least annually, or more frequently if the child's needs change. They will be developed with the child's best interests in mind, ensuring that the school assesses and manages risks to the child's education, health, and social well-being, and minimises disruption.

Roles and Responsibilities

Local Governing Bodies must:

- Ensure pupils with medical conditions are supported to participate fully in all aspects of school life.
- Ensure staff supporting pupils with medical conditions have access to necessary information and teaching resources.
- Ensure school leaders consult with health and social care professionals, pupils, and parents/carers to effectively understand and support the needs of children with medical conditions.
- Acknowledge that many medical conditions requiring support can affect quality of life and may be life-threatening, and that some conditions are more apparent than others.
- Ensure that support focuses on the individual needs of each child and the impact of their medical condition on their school life.
- Ensure arrangements foster confidence among parents/carers and pupils in the school's ability to provide effective support for medical conditions.

The Headteacher must:

- Ensure the effective implementation of this policy with relevant partners, including staff awareness of the policy and their roles in its implementation.
- Ensure that all staff who need to know are aware of a child's condition.
- Ensure that a sufficient number of trained staff are available to implement the policy and deliver all Individual Healthcare Plans (IHPs), including contingency and emergency situations, which may involve recruiting staff.
- Have overall responsibility for the development of IHPs.
- Ensure school staff are appropriately insured and aware of their insurance coverage for supporting pupils with medical conditions.
- Contact the school nursing service for any child with a medical condition requiring support at school who has not yet been brought to the attention of the school nurse.

Parents and Carers must:

- Notify the school as soon as possible if their child has a medical condition, which can be done on the Registration Form.
- For complex needs, arrange a meeting with school staff to ensure any necessary training can be organised before the child starts school.
- Provide the school with sufficient and up-to-date information about their child's medical needs.
- Be key partners in the development and review of their child's Individual Healthcare Plan (IHP), and may be involved in its drafting.
- Carry out any agreed actions in the IHP, such as providing medicines and equipment, and ensuring they or a nominated adult are contactable at all times.

Pupil Responsibilities and Self-Management

Pupils with medical conditions are often best placed to provide information about how their condition affects them. They will be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their Individual Healthcare Plan (IHP). Other pupils are expected to be sensitive to the needs of their peers with medical conditions.

Following discussions with parents/carers, competent children will be encouraged to take responsibility for managing their own medicines and procedures, which will be documented in their IHPs.

Whenever possible, children will be allowed to carry their own medicines and devices or have quick and easy access for self-medication. Children self-administering medication or managing procedures may require appropriate supervision. If self-management is not appropriate, designated staff will assist with administering medicines and managing procedures.

If a child refuses medication or a necessary procedure, staff will not force compliance but will follow the agreed procedure in the IHP. Parents/carers will be informed to discuss alternative options.

School Staff

Any member of school staff may be asked to support pupils with medical conditions, including administering medication, though they cannot be required to do so. While administering medication is not part of teachers' professional duties, they should consider the needs of pupils with medical conditions in their classes. Staff must receive sufficient and suitable training and demonstrate competency before assuming responsibility for supporting these pupils. All staff should know how to respond appropriately when a pupil with a medical condition requires assistance.

School Nurses

Every school has access to school nursing services. If aware of a medical condition, the school nurse can notify the school if a child has a medical condition requiring support, ideally before the child starts at the school.

School nurses typically do not have an extensive role in ensuring schools take appropriate steps to support pupils with medical conditions. However, they may support staff in implementing a child's Individual Healthcare Plan (IHP) and provide advice and liaison, such as on training.

School nurses can liaise with local lead clinicians on appropriate support and associated staff training needs. For example, local specialist nursing teams may offer training to school staff. Community nursing teams are also a valuable resource for schools seeking advice and support for pupils with medical conditions.

Other Healthcare Professionals

Other healthcare professionals, including GPs and pediatricians, should notify the school nurse when a child is identified as having a medical condition requiring support at school. They may advise on developing Individual Healthcare Plans (IHPs). Specialist local health teams may provide in-school support for children with specific conditions (e.g., asthma, diabetes, epilepsy).

Local Authorities

Local authorities commission school nurses for maintained schools and academies. Under Section 10 of the Children Act 2004, they must promote cooperation among relevant partners—such as governing bodies, academy proprietors, and NHS organisations—to improve the wellbeing of children regarding their physical and mental health, education, training, and recreation.

Local authorities, working with statutory partners, must establish joint commissioning arrangements for education, health, and care provision for children and young people with SEN or disabilities. Local authorities should provide support, advice, and guidance, including suitable training for school staff, to ensure effective delivery of support outlined in IHPs. They should also work with schools to support pupils with medical conditions in attending full-time.

When pupils cannot receive a suitable education in a mainstream school due to their health needs, local authorities must make alternative arrangements. Statutory guidance specifies that they should be prepared to make such arrangements when a child will be absent from school for 15 days or more due to health needs (see [Population health needs assessment: a guide for 0 to 19 health visiting and school nursing services](#) [Updated 19 May 2021](#)) (whether consecutive or cumulative across the school year).

Ofsted

Ofsted's common inspection framework, effective from 1 September 2015, requires inspectors to evaluate how well a school meets the needs of all pupils, including those with medical conditions. Key judgments will be informed by the progress and achievement of these pupils, alongside those with special educational needs and disabilities, and their spiritual, moral, social, and cultural development.

Sharing Key Information

Each school within the River Learning Trust will follow and adapt these procedures:

- Children with serious medical conditions will have their photo and a brief description of their condition, along with any other necessary information, displayed in a suitable location, such as the staff room.
- Children with medical conditions that may require emergency attention, such as epilepsy or diabetes, will have their names and Individual Healthcare Plans (IHPs) readily accessible in their classroom, and all staff working with the child will be made aware of this information.
- All other medical conditions will be noted from children's records, and this information will be provided to class teachers annually.

All information sharing and display will be conducted in compliance with GDPR.

Staff Training and Support

Staff will be supported in their role to support pupils with medical conditions. Suitable training needs will be identified during the development or review of Individual Healthcare Plans (IHPs). Staff who support pupils with medical conditions will be included in relevant discussions.

Training will be sufficient to ensure staff competence and confidence in supporting pupils with medical conditions and fulfilling IHP requirements. This includes understanding the specific medical conditions, their implications, and preventative measures.

A first-aid certificate does not constitute appropriate training for supporting pupils with medical conditions. All staff providing such support must receive suitable training.

Whole-school awareness training will ensure all staff are aware of the school's policy and their role in its implementation, including induction arrangements for new staff. The relevant healthcare professional can advise on training to ensure a comprehensive understanding of pupils' medical conditions, including preventative and emergency measures.

Each school will display a list of trained first aiders and make available a list of staff trained to administer medicines, including those with specialist training (e.g., EpiPen administration).

Governing bodies will consider providing details of continuing professional development opportunities.

Managing and Administering Medicines on School Premises

Each school within the River Learning Trust will develop its own medicine management procedures, based on Trust guidance and the following principles:

- Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- Children under 16 will not be given prescription or non-prescription medicines without parent/carer written consent, except in exceptional circumstances where the medicine is prescribed without parent/carer knowledge. In such cases, the school will make every effort to encourage the child to involve their parents/carers, while respecting their confidentiality. Schools will define the circumstances under which non-prescription medicines may be administered.
- Children under 16 will not be given medicine containing aspirin unless prescribed by a doctor. Medication, including pain relief, will only be administered after checking maximum dosages and the time of the previous dose. Parents/carers will be informed. Secondary schools may administer a single dose of paracetamol, limited to one dose per school day.
- Where clinically possible, medicines should be prescribed with dose frequencies that allow them to be taken outside school hours.
- Schools will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist, and include instructions for administration, dosage, and storage. The exception is in-date insulin, which may be in an insulin pen or pump.
- All medicines will be stored safely at a maximum of 25°C. Children will know where their medicines are and have immediate access to them. Where relevant, they will know who holds the key to the storage facility. Medicines and devices like asthma inhalers, blood glucose testing meters, and adrenaline pens will be readily available to children and not locked away, including during off-site activities.
- When no longer required, medicines will be returned to parents for safe disposal. Sharps boxes will be used for needle and sharps disposal.
- Competent children prescribed controlled drugs may legally possess them, but passing them to another child is an offense. Monitoring arrangements may be necessary. Schools will securely store prescribed controlled drugs in a non-portable container, with access limited to named staff. Controlled drugs will be easily accessible in emergencies. A record will be kept of doses used and the amount of controlled drug held.
- School staff may administer prescribed controlled drugs to the child for whom they are prescribed, following the prescriber's instructions. Schools will record all medicines administered to individual children, including the medication, administration method, dosage, time, and administering staff member. Any known side effects of the medication will be noted.

Each school will have a procedure for administering medicines (see separate Guidance Notes issued by the Trust), including:

- Parents and carers will ensure schools have and maintain up-to-date medical details for their children, which schools will check at least annually.
- A statement regarding the administration of painkillers, including self-administration for older pupils and administration to younger pupils.
- A clear statement outlining when the school will administer medicine, how it judges individual cases, and procedures for pupils completing a course of antibiotics.
- Procedures for pupils with asthma, hay fever, and other common conditions.

Record Keeping

Governing bodies will ensure written records are kept of all medicines administered to children.

Emergency Procedures

Individual schools will establish emergency procedures, including:

- For children with Individual Healthcare Plans (IHPs), clearly defining what constitutes an emergency and outlining necessary actions. All relevant staff will be aware of emergency symptoms and procedures. Other pupils will know general emergency procedures, such as immediately informing a teacher.
- Arrangements for dealing with emergencies during all school activities, including on and off-site trips (within and outside the UK), as part of general risk management.
- Procedures for taking a child to hospital, including staff staying with the child until a parent/carer arrives or accompanying the child in an ambulance. Schools will understand local emergency service coverage and provide correct information for navigation systems. A protocol will detail:
 - How and by whom the decision to call an ambulance is made.
 - What information to provide when calling emergency services (using the DfE template).
 - Procedures for accompanying or taking a child to hospital if an ambulance is not required, such as children being accompanied by two staff members (staff cars will not be used).
 - Parents or carers will always be contacted in a medical emergency but do not need to be present for a child to be taken to hospital.

Day Trips, Residential Visits, and Sporting Activities

Refer to Guidance Notes issued by the Trust.

Unacceptable Practice

While staff will use discretion and consider each case on its merits, with reference to the child's Individual Healthcare Plan (IHP), the following are generally unacceptable practices:

- Preventing children from easily accessing and administering their inhalers and medication when and where necessary.
- Assuming all children with the same condition require the same treatment.
- Ignoring the views of the child or their parents/carers, or ignoring medical evidence or opinion (although this may be challenged).
- Frequently sending children with medical conditions home or preventing them from participating in normal school activities, including lunch, unless specified in their IHPs.
- Sending ill children to the school office or medical room unaccompanied or with an unsuitable person.
- Penalising children for attendance records when absences are related to their medical condition, such as hospital appointments.
- Preventing pupils from drinking, eating, or taking necessary breaks to manage their medical condition effectively.
- Requiring or obligating parents/carers to attend school to administer medication or provide medical support, including with toileting issues. No parent/carer should have to stop working due to the school's failure to support their child's medical needs.
- Preventing or creating unnecessary barriers to children's participation in any aspect of school life, including school trips (e.g., by requiring parent/carer accompaniment).

Liability and Indemnity

The River Learning Trust maintains appropriate insurance coverage through Zurich Insurance.

Complaints

Parents/carers or pupils dissatisfied with the support provided should first discuss their concerns directly with the school. If the issue remains unresolved, they may submit a formal complaint through the school's complaints procedure.

Formal complaints to the Department for Education (DfE) should only occur if the matter falls within the scope of section 496/497 of the Education Act 1996 and all other resolution attempts have been exhausted. For academies, it will be relevant to consider breaches of the Funding Agreement or other legal obligations. Ultimately, parents/carers and pupils may seek independent legal advice and initiate formal proceedings if they believe they have legitimate grounds.

Templates

Relevant templates are included in the Guidance Notes issued by the Trust.

Further Sources of Information

Refer to the separate Guidance Notes issued by the Trust.

Summary of Required Procedures for Individual Schools

Each school within the River Learning Trust will ensure that the following procedures are in place:

- Designated staff are responsible for ensuring sufficient staff are suitably trained.
- All relevant staff are made aware of a child's condition.
- Cover arrangements exist for staff absence or turnover.
- Supply teachers are briefed.
- Risk assessments are conducted for off-site activities.
- Individual Healthcare Plans are monitored.
- A procedure is followed whenever notification of a pupil's medical condition is received.
- The model flowchart process for developing Individual Healthcare Plans, as detailed on p28 of 'Supporting Pupils at School with Medical Conditions' DfE guidance, is used.
- The roles and responsibilities of various groups are understood, and information is shared/displayed as described in this policy.
- Suitable training takes place.
- Procedures for managing and administering medicines are in place at school level.
- Written records are kept of all medicines administered to children.
- Emergency procedures are established.
- Arrangements are in place to support pupils in actively participating in off-site activities.
- An appropriate complaints procedure is in place at school level.