



SUPPORTING CHILDREN WITH MEDICAL CONDITIONS POLICY

October 2025

Next Review: October 2026

Approved by: Governing Body

Introduction

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. Other children have medical conditions that, if not properly managed, could limit their access to education. Such pupils are regarded as having medical needs. Most of these children will be able to attend school regularly and take part in normal school activities. This policy outlines responsibilities and procedures for supporting pupils at Glade Hill Primary and Nursery School who have medical needs.

Some children with medical conditions may be disabled and/ or may have special educational needs (SEN). For these children this policy should be read in conjunction with the Special Educational Needs and Disability Policy.

The aim of this policy is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

Statutory Guidance

The Children and Families Act 2014 includes a duty on schools to support children with medical conditions. This is inclusive of children with diabetes. Schools must make arrangements for supporting pupils at schools with medical conditions and in meeting that duty they must have regard to the statutory guidance issued by the Secretary of State.

Supporting pupils at school with medical conditions 2015 states that pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education. It also states that Governing bodies must ensure that arrangements are in place in schools to support pupils at school with medical conditions. Governing bodies should also ensure that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are properly understood and effectively supported.

Glade Hill Primary and Nursery school aims to ensure that children with medical conditions are well supported and included as much as possible in all aspects of school life. We have experience of supporting children with medical conditions who require this support including children with asthma, eczema, diabetes and epilepsy.

Roles and responsibilities

Glade Hill Primary and Nursery School recognises that supporting children with medical conditions is a matter for the school as a whole. Roles and responsibilities are therefore designated in the following way:

Under the direction of the Headteacher, the named persons with responsibility for managing support for these children and for ensuring that sufficient staff are suitably trained is:

Miss Sam Wardle – Assistant Headteacher and Inclusion Lead
Mrs Anita Bennett - SENCO

The Headteacher

- To implementing the governing body's policy in practice and for developing detailed procedures.
- To allocate roles and responsibilities to staff and organise training so that the needs of children with medical conditions are met.
- To liaise with staff, Inclusion Leader/ SENCO, health services, parents and pupils.
- To report to governors on the needs of children with medical conditions in their care.
- To delegate the organisation of meetings and training to the Inclusion Leader/ SENCO.
- To ensure that the needs of children with medical conditions are met within the school.
- To make sure parents are aware of the school's policy and procedures for dealing with medical needs.
- To ensure that back-up cover is arranged when the member of staff responsible for a pupil with medical needs is absent or unavailable.
- To ensure that supply teachers are briefed on the needs of any children with medical conditions.
- To ensure that risk assessments for school visits, holidays, and other school activities outside of the normal timetable include provision for children with medical conditions.
- To monitor any Individual Healthcare Plans (IHPs).

The Inclusion Leader and SENCO

- To play a key role in delivering the strategic development of the medical conditions policy and provision.
- To oversee the day-to-day operation of the school's policy for children with medical conditions.
- To monitor the needs of children with medical conditions together with the Headteacher and class teachers.
- To meet regularly with the Headteacher to discuss individual children and their needs.
- To ensure that the school's medical needs register is kept up to date with support from the School Office Manager.
- To ensure that the school's care plans register is kept up to date with support from the School Office Manager.
- To lead the annual review of the medical needs policy.
- To make contact with Health care professionals as required.
- To meet with parents and pupils to discuss and support needs.
- To report to governors as requested by the Headteacher.
- To work in conjunction with the class teachers and other members of staff.

Teachers and other school staff

- To be aware of the any children with medical needs in their class.
- To understand the nature of the conditions, and when and where the pupils may need extra attention.
- To be aware of the likelihood of an emergency arising and what action to take if one occurs, following guidance and training provided.
- To make the Inclusion Leader/ SENCO or Headteacher aware of variations to timetables or out of school activities that may have an impact on provision for children with medical conditions in terms of staffing or the need for additional support.

- If as part of an Individual Healthcare Plan (IHP) staff are required to administer medication, they may only do so if they have had appropriate training.

Other health professionals

The school will receive support and advice as necessary from the following in conjunction with meeting the needs of pupils with medical needs:

- the local health authority
- the school health service
- the school nurse
- the general practitioner (with the consent of the child's parents)
- the community paediatrician

Parents and guardians

Parents, as defined in the Education Act 1994, are a child's main carers. They are responsible for making sure that their child is well enough to attend school. Children should be kept at home when they are acutely unwell or infectious.

Parents are responsible for providing the Headteacher and Inclusion Leader/ SENCO with sufficient information about their child's medical condition and treatment or special care needed at school. With the Headteacher and Inclusion Leader/ SENCO, they should reach agreement on the school's role in helping their child's medical needs. Parents are key partners and should be involved in the development and review of their child's individual healthcare plan, and may be involved in its drafting.

They should carry out any action they have agreed to as part of its implementation, eg provide medicines and equipment, and ensure they or another nominated adult are contactable at all times.

Where parents have difficulty understanding or supporting their child's medical condition themselves, the School Health Service can often provide additional assistance.

Pupils

Children with medical conditions will often be best placed to provide information about how their condition affects them. We aim to involve them as fully as possible in discussions about their medical support needs and support them in contributing as much as possible to the development of, and complying with, their individual healthcare plan. We will encourage other pupils to be sensitive to the needs of those with medical conditions.

The Governing body

The governing body will ensure that a policy and arrangements are in place to support pupils with medical conditions. In doing so, they will ensure that such children can access and enjoy the same opportunities at school as any other child. The governing body will comply with their duty to ensure that their insurance arrangements provide cover for staff to act within the scope of their employment; that the procedures outlined in this policy are followed, and that any necessary training is made available to staff. The governing body will ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life. The governing body will also ensure that their

arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions in school.

Procedure to be followed when notification is received that a pupil has a medical condition

A flow chart for identifying and agreeing the support a child needs and developing an individual healthcare plan is shown in Appendix 1.

We will liaise with a new school when we know of a child coming to or going from Glade Hill and aim to ensure arrangements are in place for the start of the relevant school term. In other cases, such as a new diagnosis or children moving to a new school mid-term, we will make every effort to ensure that arrangements are put in place within two weeks.

We will not wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on the available evidence. This would normally involve some form of medical evidence and consultation with parents. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place.

Individual healthcare plans

Some children need IHPs (Individual healthcare plans) which can help to ensure that schools effectively support pupils with medical conditions. They provide clarity about what needs to be done, when and by whom. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed, and are likely to be helpful in the majority of other cases, especially where medical conditions are long-term and complex. However, not all children will require one. The school, healthcare professional and parent should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached, the Headteacher is best placed to take a final view.

The format of individual healthcare plans may vary to enable schools to choose whichever is the most effective for the specific needs of each pupil. They should be easily accessible to all who need to refer to them, while preserving confidentiality. Plans should not be a burden on a school, but should capture the key information and actions that are required to support the child effectively. The level of detail within plans will depend on the complexity of the child's condition and the degree of support needed. This is important because different children with the same health condition may require very different support. Where a child has SEN but does not have an EHCP (Education, Health and Care Plan), their special educational needs should be mentioned in their individual healthcare plan.

Individual healthcare plans, (and their review), may be initiated, in consultation with the parent, by a member of school staff or a healthcare professional involved in providing care to the child. Plans should be drawn up in partnership between the school, parents, and a relevant healthcare professional, e.g. school, specialist or children's community nurse, who can best advise on the particular needs of the child. Pupils should also be involved whenever appropriate. The aim should be to capture the steps which a school should take to help the child manage their condition and overcome any potential barriers to getting the most from

their education. Partners should agree who will take the lead in writing the plan, but responsibility for ensuring it is finalised and implemented rests with the school.

Plans will be reviewed at least annually or earlier if evidence is presented that the child's needs have changed. Where the child has a special educational need identified in an EHCP, the individual healthcare plan should be linked to or become part of that EHCP.

Where a child is returning to school following a period of hospital education or alternative provision (including home tuition), schools should work with the local authority and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

When deciding what information should be recorded on individual healthcare plans, the school will consider the following:

- 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.
- 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, (some children will be able to take responsibility for their own health needs), including in emergencies. If a child is self-managing their medication, this should 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 child'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 child'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 child can participate, eg risk assessments;
- where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition;
- what to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

Managing medicines on school premises

Children with asthma are allowed to keep their inhalers with them in school. Children who have been prescribed a 'Epipen' or other epinephrine autoinjector must keep their device in

a bag nearby their person at all times. Also, if medication forms part of a child's IHP and training has been provided to staff, then this can be administered in school.

In general, no other medicines should be administered in school. Parents/ carers will be encouraged, wherever possible, to organise a child's medication so that it does not need to be taken at school, without this being detrimental to a child's treatment. However, if the medicine has been prescribed by a doctor, e.g. antibiotics, and the parent completes a parental consent form then staff will administer the medicine where necessary. No 'over the counter' medicines will be allowed unless they form part of a child's IHP as outlined above.

All medicines kept in school must be in the original box (where possible), clearly labelled with the child's name and the date when provided. Any medicine to be administered in school must be stored securely at all times either in a fridge within a staff area (if required) or in a locked cupboard within the classroom. The form must be completed each time the medicine has been administered as a record for staff and parents.

School trips

We will make reasonable adjustments to allow children with medical needs to participate fully and safely on visits. A risk assessment may be undertaken as part of this process so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. This will require consultation with parents and pupils, and advice from the relevant healthcare professional to ensure that pupils can participate safely. Staff supervising excursions will be aware of any medical needs, and relevant emergency procedures. Sometimes an additional supervisor or parent might accompany a particular pupil.

Sporting activities

Children with medical needs will be encouraged to take part in sporting activities appropriate to their own abilities. Any restrictions on a pupil's ability to participate in PE will be included in their individual health care plan. Some pupils may need to take precautionary measures before or during exercise and/or need to be allowed immediate access to their medication if necessary. Teachers should be aware of relevant medical conditions and emergency procedures. A risk assessment may be undertaken and additional adult support may be provided if deemed necessary.

Emergency procedures

In an emergency situation all staff will follow school guidance and the direction of the Headteacher or the next senior member of staff. Where a child has an individual healthcare plan, this will clearly define what constitutes an emergency and explain what to do. All relevant staff will be aware of emergency symptoms and procedures. Other pupils in the school will know what to do in general terms, such as informing a teacher immediately if they think help is needed.

Allocated staff have regular training in First Aid and there are protocols on the first aid procedure and how to call the emergency services that are shared with staff and kept near the main outside line phones. If a child needs to be taken to hospital, staff will stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.

The school office stores some emergency medication/ equipment for use only with permission of a parent/ carer or by direction from the emergency services. This includes an emergency use inhaler set, allergy relief syrup (cetirizine hydrochloride) and a spare epinephrine autoinjector. This is for use when a child/ adult's medication is not present/ working or in the event of when a new episode/ condition emerges.

The school has also been provided with a Mediana HeartOn AED A15 Semi-Automatic Defibrillator by the charity 'Leon's Legacy' and staff have been trained on it's use in an emergency.

Confidentiality

The school will treat medical information confidentially. The Headteacher and Inclusion Leader will agree with the parents who will have access to records and information about a pupil. If information is withheld from staff, they cannot be held responsible if they act incorrectly in giving medical assistance but otherwise in good faith.

Complaints

If a parent is worried and wishes to discuss any concerns relating to their child, the first point of contact should be the child's class teacher. Most concerns can usually be addressed by a meeting between the class teacher and parents to discuss any issues and identify actions to address them. Our school usually resolves concerns in this way.

However, if there are on-going concerns, specifically relating to a child's medical needs, a meeting should be requested with the school's Inclusion Leader/ SENCO via the school office. The Inclusion Leader/ SENCO will then usually arrange a meeting with parents, the class teacher, the child, and other support staff or other professionals if appropriate.

We endeavour to communicate with parents 'face-to-face' to address concerns, however if this is not suitable telephone conversations with the Class Teacher or Inclusion Leader/ SENCO can be arranged.

If there are any complaints relating to the provision for pupils with medical conditions these will be dealt with in the first instance by the Headteacher. The chair of governors may be involved if necessary. In case of an unresolved complaint the LA may be involved. Please see the complaints policy on the school website or request a copy from the office for specific details.

Additional information

A flow chart for identifying and agreeing the support a child needs and developing an individual healthcare plan is shown in Appendix 1.

A flow chart for identifying and agreeing support for a child with medical needs and developing an individual healthcare plan

