

At Prettygate we are committed to safeguarding and promoting the welfare of all children and expect all staff and volunteers to share this commitment.



Supporting Pupils with Medical Conditions

Staff Consulted: July 2025

Ratified by the Governing Body: 7th July 2025

Review Date: Summer 2026

This document has been assessed for equality impact and is applicable to every member of staff or child within the school irrespective of their race, ethnic origin, nationality, gender, culture, religion or belief, sexual orientation, age or disability. All our pupils are encouraged to adopt the school's core values as set out in our vision statement. These complement fundamental British Values (see British Values statement).

PRETTYGATE INFANT AND JUNIOR SCHOOL

SUPPORTING PUPILS WITH MEDICAL CONDITIONS POLICY

Reviewed annually summer term

The policy framework describes the essential criteria for how a school can meet the needs of children and young people with long-term conditions. It is in line with DfE statutory guidance on Supporting Pupils with Medical Conditions (2014) for governing bodies of maintained schools and proprietors of academies in England

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/349435/Statutory_guidance_on_supporting_pupils_at_school_with_medical_conditions.pdf

The named member of school staff responsible for this medical conditions policy and its implementation is:

NAME: Mr M. Millbourne

ROLE: Headteacher

DfE guidance

- Governing bodies should ensure that all schools develop a policy for supporting pupils with medical conditions that is reviewed regularly and is readily accessible to parents and school staff.
- Governing bodies should ensure that the arrangements they set up include details on how the school's policy will be implemented effectively, including a named person who has overall responsibility for policy implementation.
- Details should include:
 - who is responsible for ensuring that sufficient staff are suitably trained,
 - a commitment that all relevant staff will be made aware of the child's condition,
 - cover arrangements in case of staff absence or staff turnover to ensure someone is always available,
 - briefing for supply teachers,
 - risk assessments for school visits, holidays, and other school activities outside of the normal timetable,
 - monitoring of individual healthcare plans.

Prettygate Infant and Junior Schools are inclusive communities that support and welcome pupils with medical conditions.

- Both schools are welcoming and supportive of pupils with medical conditions. We provide children with medical conditions with the same opportunities and access to activities (both school based and out-of-school) as other pupils. No child will be denied admission or prevented from taking up a place in either school because arrangements for their medical condition have not been made.
- We will listen to the views of pupils and parents/carers/carers.
- We ensure that pupils and parents/carers/carers feel confident in the care they receive and the level of that care meets their needs.
- Staff understand the medical conditions of pupils and that they may be serious, adversely affect a child's quality of life and impact on their ability and confidence
- All staff understand their duty of care to children and young people and know what to do in the event of an emergency.

- The whole school & local health community understand and support the medical conditions policy.
- We understand that all children with the same medical condition will not have the same needs, our schools will focus on the needs of each individual child.
- Both schools recognise their duties as detailed in Section 100 of the Children and Families Act 2014. (Other related legislation is referenced in DfE guidance p21).
- Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case, both schools comply with their duties under that Act. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For children with SEN, this policy should be read in conjunction with the Special educational needs and disability (SEND) code of practice.

The medical conditions policy is drawn up in consultation with a wide range of local key stakeholders within both the school and health settings.

- Stakeholders include pupils, parent/carers, school staff and governors.

The medical conditions policy is supported by a clear communication plan for staff, parent/carers/carers and other key stakeholders to ensure its full implementation.

- Pupils, parent/carers/, relevant local healthcare staff, and other external stakeholders are informed of and reminded about the medical conditions policy through clear communication channels.

All staff understand and are trained in what to do in an emergency for children with medical conditions in their school.

- All school staff, including temporary or supply staff, are aware of the medical conditions of children in their school and understand their duty of care to pupils in an emergency.
- All staff receive training in what to do in an emergency and this is refreshed at least once a year.
- All children with medical conditions that are complex, long-term or where there is a high risk that emergency intervention will be required have an individual healthcare plan (IHP) which explains what help they need in an emergency. The IHP will accompany a pupil should they need to attend hospital. Parental permission is sought and recorded in the IHP for sharing the IHP within emergency care settings.
- At Prettygate Infant School each child with an IHP has a yellow alert wallet detailing their care plan and medication needs. These are displayed in the classroom, office and staff room and relevant staff are briefed on the contents of the wallet.
- At Prettygate Junior School a central file is held in the staff room and office which contains individual wallets for children with IHP's.
- All staff providing support to a pupil receive suitable training and ongoing support to ensure that they have confidence to provide the necessary support and that they fulfil the requirements set out in the pupil's IHP. This is provided by the specialist nurse/school nurse/other suitably qualified healthcare professional and/or parent/carer. The specialist nurse/school nurse/other suitably qualified healthcare professional will confirm their competence and up to date records are kept of all training undertaken and by whom.

All staff understand and are trained in the school's general emergency procedures

- All staff are made aware of the content of this policy, which will be reviewed annually in the summer term.

- School nurses provide regular update training for common conditions eg asthma, allergies, epilepsy and diabetes and the use of epipens.
- If a pupil needs to attend hospital, a member of staff (preferably known to the pupil) will stay with them until a parent/carer arrives, or accompany a child taken to hospital by ambulance. They will not take pupils to hospital in their own car.

There is clear guidance on providing care and support and administering medication at school.

- All staff understand the importance of medication being taken and care received as detailed in the pupil's IHP.
- Medication will only be administered when it would be detrimental to a child's health or school attendance not to do so.
- We ensure that there are sufficient members of staff who have been trained to administer the medication and meet the care needs of an individual child and that there is sufficient cover in the event of any absences, staff turnover and other contingencies. The Federated Governing Body has made sure that there is the appropriate level of insurance and liability cover in place.
- Staff will not give medication (prescription or non-prescription) to a child under 16 without a parent's written or verbal consent except in exceptional circumstances.
- When administering medication, for example pain relief, staff will check the maximum dosage and when the previous dose was given.
- A trained member of staff accompanies any pupil with a medical condition on off-site visits, including overnight stays.
- Parents/carers/carers at this school understand that they should let the school know immediately if their child's needs change.
- If a pupil were to misuse their medication, or anyone else's, their parent/carer would be informed as soon as possible and the school's disciplinary procedures followed.

There is clear guidance on the storage of medication and equipment at school.

- All staff understand what constitutes an emergency for an individual child and make sure that emergency medication/equipment, eg asthma inhalers, epi-pens etc are readily available wherever the child is in the school and on off-site activities, and are not locked away.
- Pupils do not carry their own medication, this is stored centrally in the school office. The exception to this is asthma pumps in the Junior School – these are kept in a central location within the classroom and children may access these as they need them.
- Controlled drugs are stored securely within locked cupboards (or fridge as appropriate) in the school office, with only named staff having access. Staff school can only administer a controlled drug to a pupil once they have had specialist training.
- Medication is only accepted provided it is prescribed by a doctor, is in date, labelled and in its original container. Parents are required to complete medicine administration permission forms. (The exception to this is insulin, which though must still be in date, will generally be supplied in an insulin injector pen or a pump).
- Parents/carers/carers are asked to collect all medications/equipment when they expire, and to provide new and in-date medication when required.
- Needles and other sharps are disposed of in line with local policies. Sharps boxes, when needed for a specific child's medical needs, are kept securely and would accompany a child on off-site visits. They would be collected and disposed of in line with local authority procedures.

There is clear guidance about record keeping.

- As part of the school's admissions process and annual data collection exercise parents/carers are asked if their child has any medical conditions. These procedures also cover transitional arrangements between schools.

- An IHP is used to record the support an individual pupil needs around their medical condition. The IHP is developed with the pupil (where appropriate), parent/carer, designated named member of school staff, specialist nurse (where appropriate) and relevant healthcare services. Where a child has SEN but does not have a statement or EHC plan, their special educational needs are mentioned in their IHCP. Appendix 2 is used to identify and agree the support a child needs and the development of an IHCP.
- A centralised record of IHPs is kept by the SENCO and the school office.
- IHPs are regularly reviewed, at least every year or whenever the pupil's needs change.
- The pupil (where appropriate) parents/carers, specialist nurse (where appropriate) and relevant healthcare services hold a copy of the IHP. Other school staff are made aware of and have access to the IHP for the pupils in their care.
- Pupil's confidentiality is protected.
- Parental permission is sought before sharing any medical information with any other party.
- Accurate records of all medication administered, including the dose, time, date and supervising staff are kept in the school office.

The whole school environment, including the physical environment, as well as social, sporting and educational activities are inclusive and favourable to pupils with medical conditions.

- We are committed to providing a physical environment accessible to pupils with medical conditions and pupils are consulted to ensure this accessibility. We also provide an accessible physical environment for out-of-school activities.
- The needs of pupils with medical conditions are considered to ensure their involvement in structured and unstructured activities, extended school activities and residential visits.
- All staff are aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside the school's anti bullying policy, to help prevent and deal with any problems. They use opportunities such as PSHE and science lessons to raise awareness of medical conditions to help promote a positive environment.
- We understand the importance of all pupils taking part in off site visits and physical activity. All relevant staff make reasonable and appropriate adjustments to such activities in order that they are accessible to all pupils, this includes out-of-school clubs and team sports. Risk assessments are conducted as part of the planning process to take account of any additional controls required for individual pupil needs.
- All relevant staff are aware that pupils should not be forced to take part in activities if they are unwell. They should also be aware of pupils who have been advised to avoid/take special precautions during activity, and the potential triggers for a pupil's medical condition when exercising and how to minimise these.

We ensure pupils have the appropriate medication/equipment/food with them during physical activity and offsite visits.

- We ensure that pupils with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at school as any other child, and that appropriate adjustments and extra support are provided.
- All school staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition.
- Pupils are not penalised for their attendance if their absences relate to their medical condition.
- Pupils with medical conditions who are finding it difficult to keep up educationally are referred to the SENCO/INCO who will liaise with the pupil (where appropriate), parent/carer and the pupil's healthcare professional.
- A risk assessment is carried out before any out-of-school visit. The needs of pupils with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required.

We are aware of the common triggers that can make common medical conditions worse or can bring on an emergency. The school is actively working towards reducing or eliminating these health and safety risks.

- We are committed to identifying and reducing triggers both at school and on out-of-school visits.
- School staff have been given training and written information on medical conditions which includes avoiding/reducing exposure to common triggers.
- The IHP details an individual pupil's triggers and details how to make sure the pupil remains safe throughout the whole school day and on out-of-school activities. Risk assessments are carried out on all out-of-school activities, taking into account the needs of pupils with medical needs.
- All medical emergencies and incidents are reviewed by the Headteacher to see how they could have been avoided, and changes made to school policies if required.

Each member of the school and health community knows their roles and responsibilities in maintaining and implementing an effective medical conditions policy.

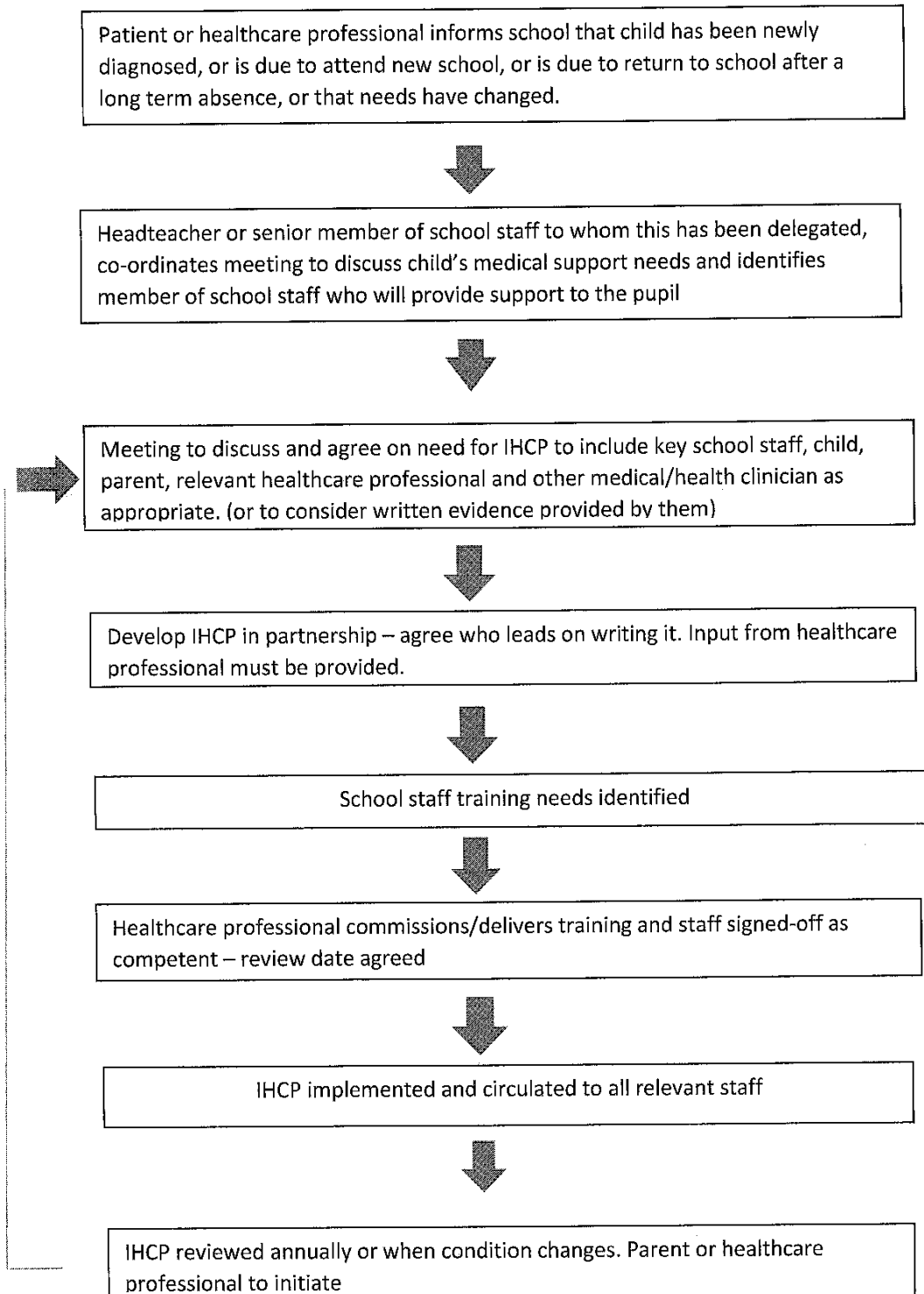
- We work in partnership with all relevant parties including the pupil (where appropriate), parent/carer, school's governing body, all school staff, employers and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.
- Key roles and responsibilities are outlined in Appendix 1.

The medical conditions policy is regularly reviewed, evaluated and updated.

- In evaluating the policy, feedback is taken from key stakeholders including (pupils, parents/carers where applicable), school nurses, specialist nurses and other relevant healthcare professionals, school staff, local emergency care services and governors. The views of pupils with medical conditions are central to the evaluation process.
- Should parents and pupils be dissatisfied with the support provided they should discuss these concerns with the Headteacher.

Appendix 1

Model process for developing individual healthcare plans



Appendix 2

Roles and responsibilities

Governing bodies – must make arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed and implemented. They should ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. Governing bodies should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. They should also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

Headteacher – should ensure that their school's policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. Headteachers should ensure that all staff who need to know are aware of the child's condition. They should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. Headteachers have overall responsibility for the development of individual healthcare plans. They should also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way. They should contact the school nursing service in the case of any child who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse.

School staff – any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach. School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

School nurse – every school has access to school nursing services. They are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they will do this before the child starts at the school. They would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with medical conditions, but may support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training. School nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs - for example, there are good models of local specialist nursing teams offering training to local school staff, hosted by a local school. Community nursing teams will also be a valuable potential resource for a school seeking advice and support in relation to children with a medical condition.

Other healthcare professionals - including GPs, paediatricians, nurse specialists/community paediatric nurses – should notify the school nurse and work jointly when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans. Anyone dealing with the medical care of a pupil in school should contact the named school nurse for that school to ensure a coordinated approach.

Pupils – with medical conditions will often be best placed to provide information about how their condition affects them. They should 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. Other pupils will often be sensitive to the needs of those with medical conditions.

Parents/carers – should provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents/carers 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.