

**ST MARY'S BENTWORTH CE PRIMARY SCHOOL
SUPPORTING PUPILS WITH MEDICAL
CONDITIONS/NEEDS POLICY**

Date of implementation: March 2026

Date of Review: **March 2027**



<p>Ownership: Education Committee Responsible Managers: SENCos Mrs Jo Ayres Head Teacher Miss Charlotte Baker Deputy Headteacher (referred to in this document as 'SENCo')</p> <p>Signed:J Ayres..... Jo Ayres, Headteacher</p> <p>Signed:C Baker..... Charlotte Baker, Deputy Headteacher</p> <p>Date: 11th March 2026.....</p>	<p>Linked to: Safeguarding, Child Protection Policies; Attendance, SEN, Inclusion, Health & Safety, Confidentiality, Extended School Providers, Remote Learning, Food Policies</p>
<p>Review Committee: Education Committee, Head Teacher/Deputy Head Teacher</p>	
<p>Communicated to: Staff, Parents, FGB, Extended School Providers</p>	
<p>Evaluation: (inc links to evidence) January 2025 checked latest Allergy Management Guidance in Schools February 2026 addition of Collaboration with Health Services information</p>	
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<p>Signature of Chair of Governors:</p>	<p>.....Maria Fordyce..... Maria Fordyce</p>

Definition

To be read in conjunction with Department of Education's (DfE) "Supporting pupils with medical conditions" statutory guidance Dec 2015.
Section 100 of The Children and Families Act 2014 places a duty on the governing body of this school to make arrangements for supporting children at their premises with medical conditions. The DfE has produced statutory guidance 'Supporting Pupils with Medical Conditions' and updates, and we will have regard to this guidance when meeting this requirement.
We will endeavour to ensure that children with medical conditions are properly supported so that they have full access to education, including school trips and physical education.



The aim is to ensure that all children with medical conditions, in terms of both their 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 full academic potential.

Pupils' medical needs may be broadly summarised as being of the types listed below:

- (a) Short-term, affecting their participation in school activities which they are on a course of medication
- (b) Long-term, potentially limited their access to education and requiring extra care and support

It is our policy to ensure that all medical information will be treated confidentially by the Headteacher and staff. All administration of medicines is arranged and managed in accordance with the Supporting Pupils with Medical Needs document. All staff have a duty of care to follow and co-operate with the requirements of this policy.

Where children have a disability, the requirement of the Equality Act 2010 will apply. Where children have an identified special need, the SEN Code of Practice will also apply.

We recognise that medical conditions may impact social and emotional development as well as having educational implications.

Key Roles & Responsibilities

The Governing Body is responsible for:

making sure that a policy for supporting pupils with medical conditions in school is developed and implemented, *and ensuring that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. The Governing Body will ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.*

The Headteacher is responsible for: ensuring the policy is developed and effectively implemented with partners. This includes ensuring all staff are aware of the policy and understand their role in its implementation. The Headteacher will ensure that all staff who need to know are aware of a child's condition. The Headteacher will ensure that sufficient trained staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. The Headteacher has overall responsibility for the development of individual health care plans. The Headteacher will liaise with the school nursing service in the case of any child with a medical condition who has not yet been brought to the attention of the school nurse.

Teachers and Support: 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. School staff will receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support pupils with medical conditions. All members of staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

The School Link Nurse: every school has access to the School Nursing Service (Southern Health). [Click here for link to find school nurse information](#). 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.



The school nurse will support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training. The school nurse can liaise with lead clinicians on appropriate support and associated staff training needs.

Local Arrangements

Identifying children with health conditions

We will aim to identify children with medical needs on entry to the school by working in partnership with parents/ carers and following the process outlined in the document 'Process for identifying children with a health condition' produced by the Southern Health School Nursing Team in conjunction with the Children's Services Health and Safety Team (see link above). We will use the 'Health Questionnaire for Schools' to obtain the information required for each child's medical needs to ensure that we have appropriate arrangements in place prior to the child commencing at the school to support them accordingly.

In cases such as a new diagnosis or children moving to a new school mid-term, every effort will be made to ensure that arrangements are put in place within two weeks.

Where a formal diagnosis is awaited or is unclear, we will plan to implement arrangements to support the child, based on the current evidence available for their condition. We will ensure that every effort is made to involve some formal medical evidence and consultation with the parents.

Individual health care plans

We recognise that individual healthcare plans are recommended in particular 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 will agree based on evidence when a healthcare plan would be inappropriate or disproportionate.

Where children require an individual healthcare plan it will be the responsibility of the SENCo will work in partnership with parents and relevant healthcare professionals to write the plan.

A healthcare plan (and its review) may be initiated in consultation with the parent/carer, by a member of school staff or by a healthcare professional involved in providing care to the child. The SENCo will work in partnership with the parents/carers, and a relevant healthcare professional e.g. school, specialist or children's community nurse, who can give best advice on the particular needs of the child to draw up and/or review the plan. Where a child has a special educational need identified in an EHCP (Educational Health Care Plan), the individual healthcare plan will be linked to or become part EHCP.

We may also refer to the flowchart contained within the document 'Process for identifying children with a health condition' for identifying and agreeing the support a child needs and then developing the individual healthcare plan.

If a child is returning following a period of hospital education or alternative provision (including home tuition), that we will work with Hampshire County Council and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.



Should a child be in hospital for a period of time, liaison with the hospital schools may be an option, sending work could also be an option if medical team and parents deem to be appropriate. When recovering at home, parents and school need to make a plan taking into account all medical guidance. This plan could incorporate remote learning or external tutor.

We will use the individual healthcare plan template produced by the DfE to record the plan. These plans will be reviewed annually or more frequently as required. The SENCo is the responsible member of staff and the review log will be held by the School Office (in Medical Room). Plans may include the following information as appropriate:

- *The medical condition, its triggers, signs, symptom 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 the condition, dietary requirements and environmental issues eg travel time between lessons;*
- *Specific support for the pupil's educational, social and emotional needs eg how absences are 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 monitoring arrangements in place;*
- *Who will provide this support, their training need, expectation of their role and confirmation of their proficiency to provide support for the child's medical condition from a healthcare professional, and cover arrangements for when they are not available;*
- *Who in school needs to be aware of the child's condition and the support required;*
- *Arrangements for written permission from parents/carers 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 (eg Residential) that will ensure the child can participate eg risk assessments;*
- *Where confidentiality issues are raised by the parent/carer or child, the designated individuals to be entrusted with information about the child's condition;*
and
- *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 will be used to inform development of their individual healthcare plan.*

Staff training

All new staff will be inducted on the policy when they join the school through their induction training. Records of this training will be stored in the School Office.

The awareness training will be provided to staff by Inset training and PDMs during the Autumn Term of each academic year/and periodically as required dependent on the needs of children as they are identified.



We will retain evidence that staff have been provided the relevant awareness training on the policy by signature sheet.

Where required we will work with the relevant healthcare professionals to identify and agree the type and level of training required and identify where the training can be obtained from. This will include ensuring that the training is sufficient to ensure staff are competent and confident in their ability to support children with medical conditions. The training will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs and therefore allow them to fulfil the requirements set out in the individual healthcare plan. Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure or administration of medication.

Any training undertaken will form part of the overall training plan for the school and refresher awareness training will be scheduled at appropriate intervals agreed with the relevant healthcare professional delivering the training.

The Staff training records will be completed to document the type of medical awareness training undertaken, the date of training and the competent professional providing the training.

The child's role

Where possible and in discussion with parents, children that are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be recorded in their individual healthcare plan. The healthcare plan will reference what will happen should a child who self-administers refuse to take their medication (this will normally be informing the parent/carer at the earliest opportunity).

We will endeavour to ensure that children have easy access to allow for quick self-medication via a member of staff. We will agree with relevant healthcare professionals/parent the appropriate level of supervision required and document this in their healthcare plan.

Managing medicines on School Premises / Collaboration with Health Services

The administration of medicines is the overall responsibility of the parents/carers. Where clinically possible we will encourage parents/carers to ask for medicines to be prescribed in dose frequencies which enable them to be taken outside of school hours. However, the *SENCo, designated member of staff will be* responsible for ensuring children are supported with their medical needs whilst on site, therefore this may include managing medicines where it would be detrimental to a child's health or school attendance not to do so.

We will not give prescription or non-prescription medicines to a child under 16 without their parent's/carers written consent (a 'parental agreement to administer medicines' form will be used to record this), except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, we will make every effort to encourage the child or young person to involve their parents while respecting their right to confidentiality.



A documented tracking system to record all medicines received in and out of the premises is in place. The name of the child, dose, expiry/shelf-life dates and product instructions to administer will be checked before medicines are administered.

On occasions where a child refuses to take their medication the parents will be informed at the earliest available opportunity.

We will only accept prescribed medicines that are in date, labelled, provided in the original container as dispensed by the pharmacist and include instructions for administration, their dosage and storage. Insulin is the exception, which must still be in date but will generally be available to schools inside an insulin pen or a pump, rather than its original container.

Children who are able to use their own inhalers themselves and whose parents have authorised self-usage, can administer in the supervision of an adult, who will note the medical records accordingly. If the child is too young or immature to take personal responsibility for their inhaler, staff should make sure that it is stored in a safe but readily accessible place, and clearly marked with the child's name. All medicines are stored and controlled under adult/staff supervision and easily accessible as required (refer to administration of medicines risk assessment kept in School Office).

Controlled drugs will be securely stored in a non-portable container which only named staff will have access to. We will ensure that the drugs are easily accessible in an emergency situation. A record will be kept of any doses used and the amount of the controlled drug held in school. There may be instances where it is deemed appropriate for a child to administer their own controlled medication. This would normally be at the advice of a medical practitioner. Where an individual child is competent to do so and following a risk assessment, we may allow them to have prescribed controlled drugs on them with monitoring arrangements in place.

We will only administer non-prescribed medicines on request from the parent if they are in clearly identifiable packaging and only on a short-term basis (Where the school has concerns they will seek further guidance from their link School Nurse).

We will never administer aspirin or medicine containing Ibuprofen to any child under 16 years old unless prescribed by a doctor.

All other pain relief medicine will not be administered without first checking maximum dosages and when previously taken and with parental consent having been given.

Any homeopathic remedies to be administered will require a letter of consent from the child's doctor and will be administered at the discretion of the Head teacher.

Emergency medicines will be stored in a safe location in the Medical Room accessed only by staff/adults or in classrooms in cupboards where only accessed by staff/adults.

Types of emergency medicines include:

- Injections of adrenaline for acute allergic reactions (Automatic Adrenaline Injectors - AAI)



- Inhalers for asthmatics
- Injections of Glucagon for diabetic hypoglycaemia

Other emergency medication ie Rectal diazepam or Buccal Midazolam for major seizures will be stored in accordance with the normal prescribed medicines procedures (see storage section).

Collaboration with Health Services

The school liaises with a variety of external agencies to support pupils with special educational needs. The Inclusion Leaders, Mrs J Ayres and Miss C Baker, facilitate this collaboration.

The school works with:

- **The School Nursing Team:** School nurses are Specialist Community Public Health Nurses who work with children and families to promote health and well-being. They lead the Healthy Child Programme for children aged 5-19 and provide support for children with additional health needs, mental health, and physical health. They also offer health promotion and early intervention approaches. The school nursing team provides an interface between the school, children, and their families, offering advice on issues such as child development, healthy lifestyles, and emotional well-being.
- **The Community Nursing Team:** Community Children's Nursing teams provide holistic care for children aged 0-19 with acute illnesses, disabilities, and long-term conditions within the community setting. They empower families with the skills and confidence to care for their children at home and in educational settings. The school may work with these teams to support pupils who require specialist medical care during the school day.

Paediatricians: School nurses and school staff work in partnership with paediatricians to support children with complex medical needs and long-term conditions. Paediatricians are medical doctors who specialise in the health of children and can provide diagnoses, treatment plans, and ongoing management for a wide range of conditions that may impact a child's education

Storage

All medication other than emergency medication will be stored safely in the Medical Room/1st aid room cupboard, where the hinges cannot be easily tampered with and cannot be easily removed from the premises' the medical room is only accessed by staff/adults, who will supervise any children requiring medication/treatment in their care. In the Classrooms cupboards are used for storage which are only accessed by staff/adults.

Where medicines need to be refrigerated, they will be stored in the Medical Room refrigerator in a clearly labelled airtight container. There is restricted access to a refrigerator holding medicines and a thermometer measures the temperature.



Children will be made aware of where their medicines are at all times and be able to access them immediately when appropriate, with a supervising adult.

Medicines such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to children and not locked away. We will also ensure that they are readily available when outside of the school premises or on school trips/Residentials.

Storage of medication whilst off site will be maintained at steady temperature and secure. There will be appropriately trained staff present to administer day to day and emergency medication and copies of individual health care plans will be taken off site to ensure appropriate procedures are followed.

Disposal

It is the responsibility of the parents/carers to dispose of their child's medicines. It is our policy to return any medicines that are no longer required including those where the date has expired to the parents/carers. Parents/carers will be informed of this when the initial agreements are made to administer medicines. Medication returned to parent/ carers will be documented on a tracking medication form.

If required, sharps boxes will be in place for the disposal of needles. Collection and disposal of these will be arranged locally.

Medical Accommodation

The Medical room, opposite the School Office will be used for all medical administration/treatment purposes. The location/room will be made available when required. This room is only accessed by an adult, who will supervise any child(ren) requiring medication/treatment in their care.

Record keeping

A record of what has been administered including how much, when and by whom, will be recorded on CPOMS by the staff member who administered and Office Staff keep a 'record of prescribed medicines' form on file. Medication administered, as consented by parents/carers, will be notified to the parent/carer by form, telephone or text by the end of the school day by the School Office or if appropriate by extended school day staff (After School Club); this will ensure parents are fully aware of medicines administered/dosage. Any possible side effects of the medication will also be noted and reported to the parents/carers.

Emergency Procedures

Where a child has an individual healthcare plan, this will clearly define what constitutes an emergency and provide a process to follow. All relevant staff will be made aware of the emergency symptoms and procedures. We will ensure other children in the school know what to do in the event of an emergency ie informing a teacher immediately if they are concerned about the health of another child.

Where a child is required to be taken to hospital, a member of staff will stay with the child until a/their parent(s) arrive(s), this includes accompanying them to hospital by ambulance if necessary (taking any relevant medical information, care plans etc that the school holds).



Day trips/off site activities

We will ensure that teachers are aware of how a child's medical condition will impact on their participation in any off-site activity or day trip/Residential, but we will ensure that there is enough flexibility for all children to participate according to their own abilities within reasonable adjustments.

We will consider what reasonable adjustments we might make to enable children with medical needs to participate fully and safely on visits. We will carry out a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. We will consult with parent/carers and pupils and advice from the relevant healthcare professional to ensure that pupils can participate safely.

Other issues

Home-school transport, local authorities would be made aware of pupils with individual healthcare plans. Staff driving our school mini-buses and transporting children with healthcare plans will be advised accordingly.

Unacceptable practice

Staff are expected to use their discretion and judge each child's individual healthcare plan on its merits, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged);
- send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise children for their attendance record if their absences are related to their medical condition, eg 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/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent/carer should have to give up working because the school is failing to support their child's medical needs; or



- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips eg by requiring parents/carers to accompany the child.

Liability and Indemnity

Staff at the school are indemnified under the County Council self-insurance arrangements.

The County Council is self-insured and has extended this self-insurance to indemnify school staff who have agreed to administer medication or undertake a medical procedure to children. To meet the requirements of the indemnification, we will ensure that staff at the school have parents'/carers' permission for administering medicines and members of staff will have had training on the administration of the medication or medical procedure.

Complaints

Should parents/carers or children be dissatisfied with the support provided they can discuss their concerns directly with the Headteacher. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's Complaints Procedure, found under Policies Section on the school website

All templates and risk assessments are held in the School Office