

Sacred Heart
Catholic Primary School



Learning in Love

CHILDREN AT SCHOOL WITH MEDICAL CONDITIONS POLICY 2025 - 2027

Mission Statement

Guided by truth, respect and compassion; we share in building upon every individual's foundation, nurturing a love of learning in preparation for tomorrow's society, with Jesus at the heart of all we do.

Governing Body with Responsibility	Resources
Agreed by Governors on	25th June 2025
Chair's Signature	
Staff Member Responsible for Review	School Business Manager
Date for Review	June 2027

School Medical Policy

Background

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.

The Statutory Guidance on Supporting pupils with medical conditions (April 2014) states that:

The Governing body must ensure that arrangements are in place in schools to support pupils at school with medical conditions.

Governing body should ensure that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported. The Governing body should ensure that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.

The Governing Body recognises that:

Parents of children with medical conditions are often concerned that their child's health will deteriorate when they attend school. This is because pupils with long-term and complex medical conditions may require on-going support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. It is therefore important that parents feel confident that schools will provide effective support for their child's medical condition and that pupils feel safe. In making decisions about the support they provide, schools should establish relationships with relevant local health services to help them. It is crucial that schools receive and fully consider advice from healthcare professionals and listen to and value the views of parents and pupils.

In addition to the educational impacts, there are social and emotional implications associated with medical conditions. Children may be self-conscious about their condition and some may be bullied or develop emotional disorders such as anxiety or depression around their medical condition. In particular, long-term absences due to health problems affect children's educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health. Reintegration back into school should be properly supported so that children with medical conditions fully engage with learning and do not fall behind when they are unable to attend. Short term and frequent absences, including those for appointments connected with a pupil's medical condition, (which can often be lengthy), also need to be effectively managed and appropriate support put in place to limit the impact on the child's educational attainment and emotional and general wellbeing.

This policy has links with the SEND Policy:-

Some children with medical conditions may be disabled. Where this is the case governing bodies **must** comply with their duties under the Equality Act 2010. 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 guidance should be read in conjunction with the SEN code of practice.

This policy has links with the Admissions policy:

Children and young people with medical conditions are entitled to a full education and have the same rights of admission to school as other children. This means that no child with a medical condition should be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made.

However, in line with their safeguarding duties, the governing body should ensure that pupils' health is not put at unnecessary risk from, for example, infectious diseases. They therefore do not have to accept a child in school at times where it would be detrimental to the health of that child or others to do so. The school will take advice from the Local Authority, Health Protection Agency

Roles and responsibilities

Role of the Governors

The governors are legally responsible and accountable for fulfilling their statutory duty:

1. The governing body must ensure that arrangements are in place to support pupils with medical conditions. In doing so they should ensure that such children can access and enjoy the same opportunities at school as any other child.
2. In making their arrangements, the governing body should take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. Some will be more obvious than others. The governing body should therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life.
3. The governing body should ensure that their arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions in school. The arrangements should show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care. They should ensure that staff are properly trained to provide the support that pupils need.

4. The governing body must ensure that the arrangements they put in place are sufficient to meet their statutory responsibilities and should ensure that policies, plans, procedures and systems are properly and effectively implemented. This aligns with their wider safeguarding duties.
5. The governing body should ensure that there is a policy for supporting pupils with medical conditions that is reviewed regularly and is readily accessible to parents and school staff.
6. The governing body should ensure that the school's policy sets out the procedures to be followed whenever a school is notified that a pupil has a medical condition.
7. The governing body should ensure that the school's policy covers the role of individual healthcare plans, and who is responsible for their development, in supporting pupils at school with medical conditions. The governing body should ensure that plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed. They should be developed with the child's best interests in mind and ensure that the school assesses and manages risks to the child's education, health and social well-being and minimises disruption.
8. The governing body should ensure that the school's policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support pupils at school with medical conditions.
9. The governing body should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. The governing body should ensure that the school's policy sets out clearly how staff will be supported in carrying out their role to support pupils with medical conditions, and how this will be reviewed. This should specify how training needs are assessed, and how and by whom training will be commissioned and provided. The governing body should ensure that the school's policy should be clear that any member of school staff providing support to a pupil with medical needs should have received suitable training.
10. The governing body should ensure that the school's policy covers arrangements for children who are competent to manage their own health needs and medicines.
11. The governing body should ensure that the school's policy is clear about the procedures to be followed for managing medicines.
12. The governing body should ensure that written records are kept of all medicines administered to children.
13. The governing body should ensure that the school's policy sets out what should happen in an emergency situation.

14. The governing body should ensure that their arrangements are clear and unambiguous about the need to support actively pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.
15. The governing body should ensure that the school's policy is explicit about what practice is not acceptable.
16. The governing body should ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.
17. The governing body should ensure that the school's policy sets out how complaints may be made and will be handled concerning the support provided to pupils with medical conditions.

Policy implementation

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

For children moving to Sacred Heart School arrangements will be put into place to meet their needs within two weeks. Medical evidence will be obtained from the parents/carers. An Individual Medical Care Plan (IMCP -Appendix 1) will be developed for the pupil. The IMCP will contain:

The medical condition, its triggers, signs, symptoms and treatments:

- The pupil's resulting needs, including medication (dose, side-effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons;
- Specific support for the pupil's educational, social and emotional needs – for example, instructions for class teacher on day to day management including during lesson time / trips & visits, how absences will be managed, additional support in catching up with lessons, counselling sessions;
- The level of support needed, including in emergencies, with appropriate arrangements for supervision;
- Who will provide this support/supervision, their training needs, expectations of their role and cover arrangements for when they are unavailable;
- Who in the school needs to be aware of the pupil's condition and the support required;

- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, eg risk assessments;
- Where confidentiality issues are raised by the parent/pupil the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency, including whom to contact, and contingency arrangements. Some pupils may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

Staff training and support

The school's policy should additionally set out arrangements for whole school awareness training so that all staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing that policy. Induction arrangements for new staff should be included. The relevant healthcare professional should be able to advise on training that will help ensure that all medical conditions affecting pupils in the school are understood fully. This includes preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.

The family of a child should provide relevant information to school staff about how their child's needs can be met, and parents should be asked for their views. They should provide specific advice, but should not be the sole trainer. Relevant training should be provided by the School Nurse or specialist clinician e.g. Sickle Cell Nurse.

Managing medicines on school premises

Medicines should only be administered at school when it would be detrimental to a pupil's health or school attendance not to do so

The school 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 to this is insulin which must still be in date, but will generally be available to the school inside an insulin pen or a pump, rather than in its original container.

All medicines should be stored safely in the Medical Room. Pupils should know where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to staff and not locked away. This is particularly important to consider when outside of school premises e.g. on school trips. Prescribed medicines are stored with Health Care Plans in the Medical Room and designated staff in the office inform parents/carers as they are approaching their expiry date.

The school should keep medication that has been prescribed for a pupil securely stored in a non-portable container and only staff should access. Controlled drugs should be easily accessible in an emergency. A record should be kept of any doses used and the amount of the controlled drug held in school;

School staff may administer medicines to the pupil for whom it has been prescribed. Staff administering medicines should do so in accordance with the prescriber's instructions. Schools should keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted and reported to parents.

When no longer required, medicines should be returned to the parent to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps A spread sheet showing expiry dates should be kept for all prescribed medicines.

Emergency Asthma Kit and Allergy Pack

The government has now provided schools with an emergency allergy pack and an emergency asthma kit. These are stored in the medical room and can be administered in an emergency with specific prior written permission from parents/carers or on the advice of a healthcare professional in the event of calling 999.

Non-prescription medicines

Staff should never give a non-prescribed medicine to a pupil unless there are extenuating circumstances that have been discussed with the school and specific prior written permission from the parents/carers.

Day trips, residential visits and sporting activities

Teachers should be aware of how a pupil's medical condition will impact on their participation, but there should be enough flexibility for all pupils to participate according to their own abilities and with any reasonable adjustments. The school should make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible.

The school will consider what reasonable adjustments they might make to enable pupils with medical needs to participate fully and safely on visits. It is best practice to carry out a risk assessment 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 as necessary to ensure that pupils can participate safely.

Lists of pupils going on school trips, highlighting pupils with medical needs, should be given to the Educational Visits Coordinator with the risk assessments at least two weeks before the trip. The teacher responsible for the trip should then collect any medicines and instructions for a pupil on the medical register the day before or on the day of the trip.

Residential trip organisers should collect copies of the medical details for each pupil using the trips form which should be filled in by parents prior to the school trip. One set should be taken on the school trip. The pupil's medication should be collected by the trip organiser the day before the trip is due to leave.

Procedures for Medical Room are as follows:

- If a pupil feels unwell he/she informs their teacher or member of staff. The member of staff sends them to the school office. In serious cases the teacher will send another pupil to the office or medical room to have a first aid staff member attend the pupil in class.
- If pupils are sent to the medical room an assessment is carried out and minor injuries e.g. cuts & grazes are treated and pupils sent back.
- Pupils may be kept in the Medical Room and monitored. Pupils will be reassessed after a suitable period and, depending on the severity of their condition, will either be sent back to class or parents/carers will be contacted to take home.
- If an injury to the head or face occurs an additional form is completed and given to parents/carers by the teacher at the end of the day.
- If pupils have prescribed medication in school, then this is administered and logged.
- In serious cases an ambulance is called and the Headteacher informed.
- All incidents are noted in the medical log.

Medical emergencies

If a member of the first aid staff decides that an ambulance should be called, the following will take place:

- Ambulance will be called using 999.
- Head Teacher will be informed.
- Parents/carers will be informed. Depending on where they are they will either come to the school or will meet their child at the Accident and Emergency Department of the hospital their child is taken to (in some cases this is not known until the paramedics have completed an assessment. In these cases, parents/carers will be informed as soon as soon as paramedics inform the school.)

- A member of staff will accompany the pupil to the hospital and will remain with them until a parent/carer arrives.

The school recognises that it is unacceptable practice to:

Prevent pupils from easily accessing their inhalers and medication and administering their medication when and where necessary;

Assume that every pupil with the same condition requires the same treatment;

Ignore the views of the pupil or their parents; or ignore medical evidence or opinion, (although this may be challenged);

Send pupils 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 pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;

Penalise pupils for their attendance record if their absences are related to their medical condition e.g. hospital appointments;

Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;

Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs; or

Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, eg by requiring parents to accompany the pupil.

Liability and indemnity

The school recognises that:

Insurance policies should provide liability cover relating to the administration of medication, but individual cover may need to be arranged for any health care procedures. The level and ambit of cover required must be ascertained directly from the relevant insurers. Any requirements of the insurance such as the need for staff to

be trained should be made clear and complied with. In the event of a claim alleging negligence by a member of staff, civil actions are likely to be brought against the employer.

Complaints

Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure. Making a formal complaint to the Department for Education should only occur if it comes within scope of section 496/497 of the Education Act 1996 and after other attempts at resolution have been exhausted. In the case of academies, it will be relevant to consider whether the academy has breached the terms of its Funding Agreement⁹, or failed to comply with any other legal obligation placed on it. Ultimately, parents (and pupils) will be able to take independent legal advice and bring formal proceedings if they consider they have legitimate grounds to do so.

Specific responsibilities

Family Liaison -oversee setting up and monitoring of Individual Medical Care Plans in conjunction with class teacher and School Nurse (in some cases).

In liaison with the First Aider and with the Head Teacher to decide when to call 999.

Store medicines with Health care Plans; update records on medicines and inform parents/carers as they are approaching their expiry date.

Trip organisers- lists of pupils with medical needs to be included in the Risk Assessment. Carry and administer medication in line with Health Plan.

Teachers TAs and MDSs- administer prescription medicines; assess pupils visiting Medical Room or taken ill elsewhere; inform parents/carers.

Be aware of pupils with complex medical issues and act in accordance with Health Plan.

Annotate pupils with medical conditions on seating plans.

Send for support from main office should a pupil become unwell and is unable to go to the office accompanied by another pupil.

Teachers leading trips that include pupils with a medical need should collect copies of the medical details for each pupil

Copies should be taken on the school trip by the teacher. The pupil's medication should be collected by the trip organiser/teacher the day before the trip is due to leave.

Appendix 1 follows on the next page.

1. Individual Medical Plan



Name of school/setting	Sacred Heart Primary School
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date set up	
Review date	
Family Contact Information	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Clinic/Hospital Contact	
Name	
Phone no.	
GP Name	
Phone no.	
Who is responsible for providing support in school	

Name/description of medical condition

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's in the curriculum (educational, social and emotional needs)

Arrangements for school visits/trips etc

Advice to teachers

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

Parental agreement

- I agree that the medical information contained in this plan may be shared with individuals involved with my child’s care and education (this includes emergency services). I understand that I must notify the school of any changes in writing

- I agree that my child cannot keep their medication with them and the school will make the necessary medication storage arrangements

Signed
Parent /Carer

Date

Print name

Healthcare professional agreement

- I agree that the information is accurate and up to date.

Signed	Date
Print name	Job title

Permission for emergency medication

- I agree that my child can be administered their medication by a member of staff in an emergency

Name of medication carried by pupil _____

Signed <i>Parent/Carer</i>	Date
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Head teacher agreement

It is agreed that (name of child)

- Will receive the above listed medication at the above listed time
- Will receive the above listed medication in an emergency

This arrangement will continue until Date:
(either end date of course of medication or until instructed by the pupil's parents)