



Registered Charity 1171812

Supporting Students with Medical Conditions

Summary	
Policy Reference Number	084
Category	Health and Safety
Authorised by	Trustee Board
Responsibility of	SLT
Status	Updated March 2026
Next Review Date	March 2028

Contents

1. Aims	2
2. Legislation, Statutory Requirements, and Statutory Guidance	2
3. Roles and Responsibilities.....	2
3.1 The Board of Trustees.....	2
3.2 The Senior Leadership Team	3
3.3 Staff.....	3
3.4 Parents.....	3
3.5 Students	3
4. Equal Opportunities	3
5. Being Notified that a Student has a Medical Condition	4
6. Individual Healthcare Plans (IHPs)	4
7. Managing Medicines.....	5
7.1 Controlled drugs	6
7.2 Students managing their own needs	6
7.3 Unacceptable practice	6
8. Emergency Procedures	6
9. Training	7
10. Record Keeping	7
11. Liability and Indemnity	7
12. Complaints	7
13. Monitoring Arrangements	7
14. Links to other policies	7
Appendix 1: Being notified a child has a medical condition.....	8
Appendix 2: Agreement Form	9

1. Aims

This policy aims to ensure that:

- Students, staff, and parents understand how our Trust will support students with medical conditions
- Students with medical conditions are properly supported to allow them to access the same education as other students, including Trust organised trips and sporting activities

The Senior Leadership Team will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of students' conditions, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support students with medical conditions
- Developing and monitoring individual healthcare plans (IHPs) as part of our Provision Map recording system

2. Legislation, Statutory Requirements, and Statutory Guidance

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on governing boards to make arrangements for supporting students at their Trust with medical conditions.

It is also based on the Department for Education (DfE)'s statutory guidance on [supporting students with medical conditions at school](#)

3. Roles and Responsibilities

3.1 The Board of Trustees

This policy is approved by the Board of Trustees. Responsibility for the day-to-day operation, implementation, and monitoring of the policy rests with the Senior Leadership Team (SLT).

3.2 The Senior Leadership Team

The Senior Leadership Team will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Ensure that there is enough trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- Ensure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development of IHPs (Recorded on Provision Map)
- Make sure that staff are appropriately insured and aware that they are insured to support students in this way
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

3.3 Staff

Supporting students with medical conditions during Trust hours is not the sole responsibility of one person. Any member of staff, who is first aid trained, may be asked to provide support to students with medical conditions, including the administration of medicines.

Those staff who take on the responsibility to support students with medical conditions will receive sufficient and suitable training and will achieve the necessary level of competency before doing so.

Teaching staff and TA's will consider the needs of students with medical conditions. All staff will know what to do and respond accordingly when they become aware that a student with a medical condition needs help.

3.4 Parents

Parents will:

- Provide the trust with sufficient and up-to-date information about their child's medical needs
- Be involved in the development and review of their child's IHP and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times

3.5 Students

Students with medical conditions will often be best placed to provide information about how their condition affects them. Students should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

4. Equal Opportunities

Our Trust is clear about the need to actively support students with medical conditions to participate in Trust organised trips and visits, or in sporting activities, and not prevent them from doing so.

The Trust will consider what reasonable adjustments need to be made to enable these students to participate fully and safely on trust trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that students with medical conditions are included. In doing so, students, their parents and any relevant healthcare professionals will be consulted.

5. Being Notified that a Student has a Medical Condition See Appendix 1

When the Trust is notified that a student has a medical condition, the process outlined below will be followed to decide whether the student requires an IHP.

The named responsible staff will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for students who are new to our Trust.

6. Individual Healthcare Plans (IHPs)

The headteacher has overall responsibility for the development of IHPs for students with medical conditions. This has been delegated to the SENDCo and Pastoral Lead.

Plans will be reviewed at least annually, or earlier if there is evidence that the student's needs have changed.

Plans will be developed with the student's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all students with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the Trust, parents and a relevant healthcare professional, specialist or paediatrician, who can best advise on the student's specific needs. The student will be involved wherever appropriate.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The trustees and the headteacher, SENCO and Pastoral Lead will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments
- The student'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
- The level of support needed, including in emergencies
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the student's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- Who in the Trust needs to be aware of the student'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 student during trust hours
- Separate arrangements or procedures required for Trust organized trips or other Trust activities outside of the normal timetable that will ensure the student can participate, e.g. risk assessments
- Where confidentiality issues are raised by the parent/student, the designated individuals to be entrusted with information about the student's condition
- What to do in an emergency, including who to contact, and contingency arrangements

7. Managing Medicines

Prescription and non-prescription medicines will only be administered at the Trust:

When it would be detrimental to the student's health or Trust attendance not to do so **and** a parental agreement form has been completed and signed by the parent/guardian see appendix 2

Parents will specify timings during the day that the medicine can be administered. All medicines will be available to the students during the timeframe specified at the students request. The Trust will **not prompt** students to take medication.

The only exception to this is where the medicine has been prescribed to the student without the knowledge of the parents.

Students under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a student any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed prior to giving medication.

The Trust 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, dosage and storage
- No medicines will be held that are on the controlled medicines list.
- The Trust will hold their own pain relief (e.g. Paracetamol) this will only be given if consent from the student's parent or guardian gives permission first.

The Trust will accept insulin that is inside an insulin pen or pump rather than its original container All Students will be informed about 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 will always be readily available to students and held in the school office. All other medications will be held in a locked box.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

7.1 Controlled drugs

[Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

No controlled drugs will be administered in school. If a controlled drug is needed, they are to be administered and held by the parent.

7.2 Students managing their own needs

Due to the needs of other students across the Trust. No student will be allowed to manage their own medication apart from in-halers and EpiPen's.

7.3 Unacceptable practice

Trust staff should use their discretion and judge each case individually with reference to the student's IHP, but it is generally not acceptable to:

- Prevent students from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every student with the same condition requires the same treatment
- Ignore the views of the student or their parents
- Ignore medical evidence or opinion (although this may be challenged)
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal trust activities, including lunch, unless this is specified in their IHPs
- If the student becomes ill, send them to the medical room unaccompanied or with someone unsuitable
- Penalise students for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- Prevent students 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 trust to administer medication or provide medical support to their student, including with toileting issues. No parent should have to give up working because the Trust is failing to support their child's medical needs
- Prevent students from participating, or create unnecessary barriers to students participating in any aspect of trust life, including trust trips, e.g. by requiring parents to accompany their child
- Administer, or ask students to administer, medicine in Trust toilets

8. Emergency Procedures

Staff will follow the Trust's normal emergency procedures (for example, calling 999). All students' IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a student needs to be taken to hospital, staff will stay with the student until the parent/guardian arrives, or accompany the student to hospital by ambulance.

9. Training

Staff who are responsible for supporting students with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to students with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the headteacher, SENCO and Pastoral Lead. Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the students
- Fulfil the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

10. Record Keeping

The trustees will ensure that written records are kept of all medicine administered to students for as long as these students are at the Trust. Parents will be informed if their student has been unwell at the Trust.

IHPs are kept in a readily accessible place which all staff are aware of.

11. Liability and Indemnity

The trustees will ensure that the appropriate level of insurance is in place and appropriately reflects the Trust's level of risk.

12. Complaints

Parents with a complaint about the Trust's actions regarding their child's medical condition should discuss these directly with the Headteacher, SENCO and/or Pastoral Lead in the first instance. If the Headteacher, SENCO and/or Pastoral Lead cannot resolve the matter, they will direct parents to the Trust's complaints procedure.

13. Monitoring Arrangements

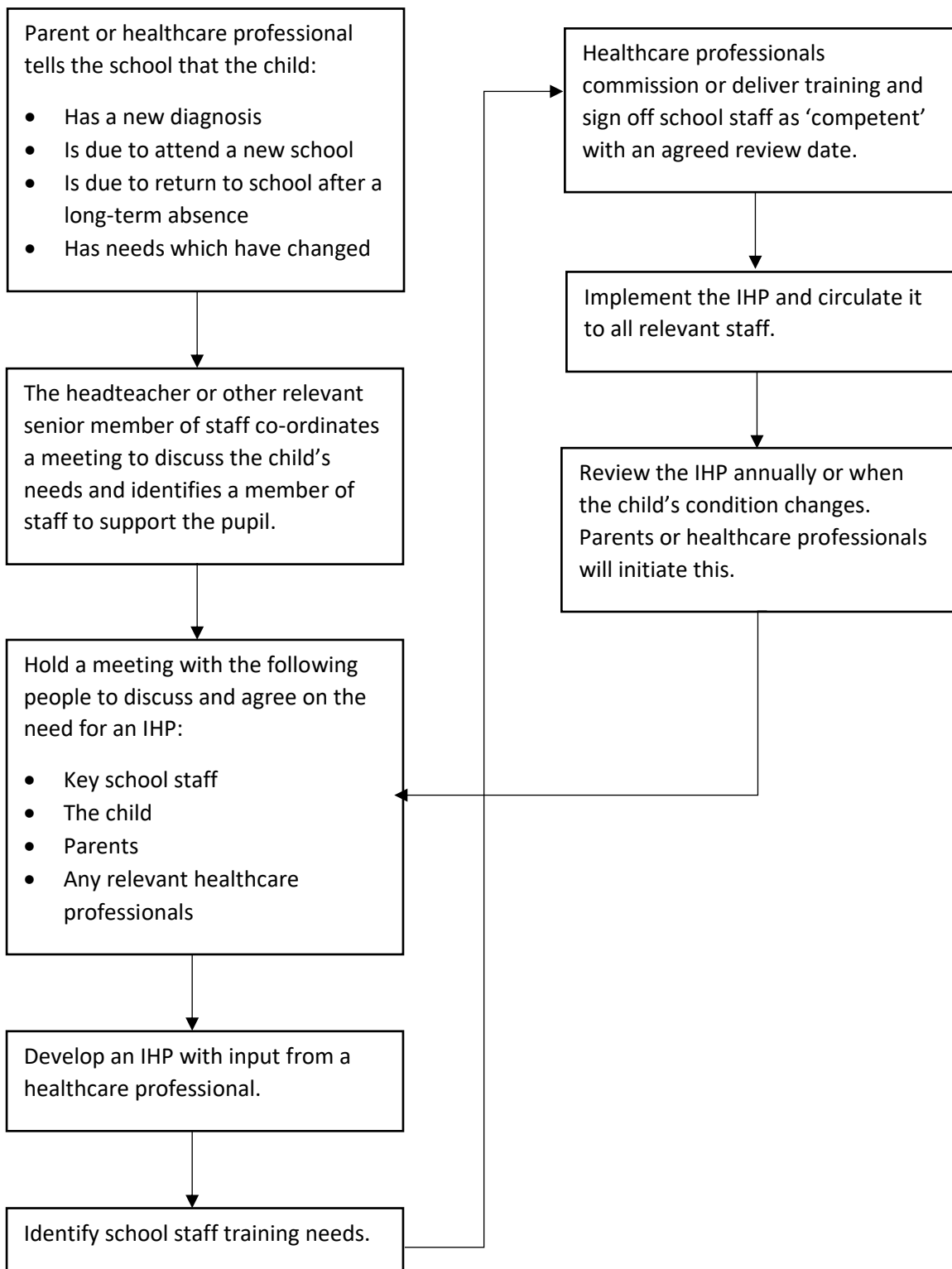
This policy will be reviewed and approved by the Board of Trustees every two years.

14. Links to other policies

This policy links to the following policies:

- Accessibility Plan
- Complaints
- First Aid
- Health and Safety
- Safeguarding

Appendix 1: Being notified a child has a medical condition



Appendix 2: Agreement Form



Parental Agreement for Administering Medicine

The Connie Rothman Learning Trust will not give your child medicine unless you complete and sign this form and that you also acknowledge that you have read and understood our policy, Supporting Students with Medical Conditions.

Name of Child		Date of Birth	
Medical condition or illness			
Name/type of medicine		Expiry Date	
Dosage and method		Timings during the day when medication can be taken	
Special precautions/other instructions			
Are there any side effects that the trust should know about			
Procedures to take in an emergency			

NB: Medicines must be in the original container as dispensed by the pharmacy. Connie Rothman Learning Trust will not prompt students to take medication. Students can request medications and will only be administered during the timeframe above. It is parents' responsibility to contact the school in order to check your child's medication regularly, and at least on a termly basis, to ensure it is in date, there are no changes to the dose, and it is still needed by your child. We cannot accept responsibility for medication or any effects of the medication.

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature		Date	
-----------	--	------	--