Policy for:

Supporting Pupils with Medical Conditions

		Date
Reviewed by:	SBM	September 2026
Authorised by:	Resources	Autumn 2026
Date for next review: (or earlier should legislation require it)	Autumn 2027	

Change Log	
No Change	

Woodstock CE Primary

Hand in hand we…
Love | Learn | Flourish

Our Christian Vision & Values

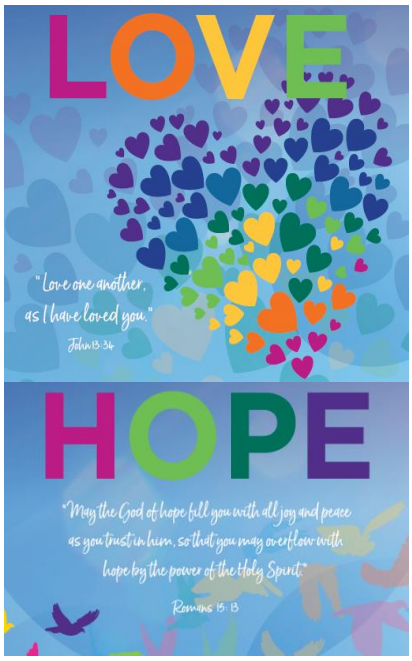


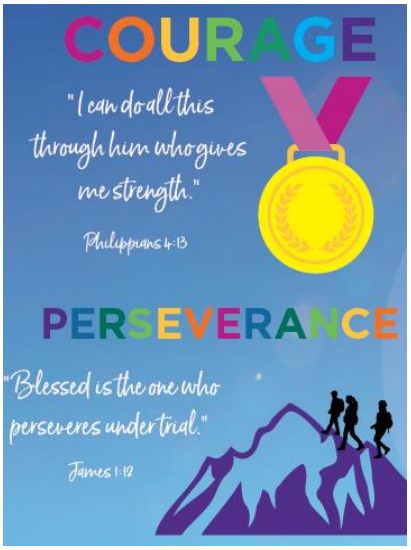
Our Christian vision states that we:
Clear a path for a lifelong journey of exploration and growth, through an innovative and challenging curriculum, inspiring all in our community to be courageous advocates and global citizens. Everyone can find their light and shine it brightly. Hand in hand, we love, learn and flourish together.

'In the same way, let your light shine before others, so that they may see your good works and give glory to your Father who is in heaven.' 'Let your light shine' Matthew 5:16

Our core Christian values allow us to deliver the Christian vision:







Supporting Pupils in School with Medical Conditions

Introduction

Section 100 of the Children & Families Act 2014 places a duty on all schools to make arrangements for supporting children with medical conditions, and to have regard for the Department for Education's Supporting Children at School with Medical Conditions (DfE 2015). This policy outlines how Woodstock CE Primary School will ensure that all children with medical conditions will be effectively supported so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

Principles

We have adopted the key drivers of the 'Supporting pupils at school with Medical Conditions' by the DfE as our aims and objectives. Wherever possible we will endeavour:

- To ensure pupils with medical conditions are properly supported so that they have full access to education, including school trips and physical education.
- To ensure arrangements are in place to support pupils at school with medical conditions, including the use of risk assessment and health care plans.
- To work with health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are properly understood and effectively supported.

As a school we interpret that a child with medical conditions is not a child needing

a short course of antibiotics or with a minor or very temporary illness.

Aims

As a school we work hard to ensure that all pupils with medical conditions, both physical and mental health, are properly supported in school so that they can play a full role in school life, remain healthy and achieve their academic potential.

Parents of children with medical conditions are often concerned that their child' health will deteriorate when they attend school. This can be because pupils with long-term complex needs may require on-going support, medical care whilst at school or medicines to help them manage their condition. Others may require monitoring or interventions in emergency situations. It is also true that children's medical needs may change over time, sometimes leading to periods of absence. It is important that parents feel their child's needs are being supported in school and that each child feels safe. In making decisions about how to support each child, as a school we establish relationships with relevant local health services to help us.

In addition to the educational impact of medical conditions, there are social and emotional implications associated with medical conditions. Children may be self-conscious about their condition and some may develop emotional disorders such as anxiety or depression around their condition. Long-term absences can impact on academic achievement and progress. It can also impact on their ability to integrate with their peers. Reintegration back into school will be fully supported by the school so that pupils are able to fully engage with the learning and do not fall behind. Short-term frequent absences, including those for appointments connected to the medical condition are carefully managed.

Roles and Responsibilities

At Woodstock CE Primary the Inclusion Manager along with the Headteacher in co-operation with parents and appropriate agencies make the arrangements for pupils with medical needs. The Link Safeguarding Governors monitors this and the Inclusion Manager reports arrangements to the Governing Body in her termly report. However, the Governing Body remains legally responsible and accountable for fulfilling their responsibilities.

The Governing Body ensures that arrangements are in place to support pupils with medical conditions. In doing so they ensure that such children access and enjoy the same opportunities as other pupils.

Any member of school staff may be asked to provide support to children with medical conditions, including the administering of medicines, although they cannot be required to do so. Any member of staff must know what to do and respond accordingly when they become aware that a child with a medical condition needs help.

Parents are responsible for:

- Providing the school with sufficient and up-to-date information about their child's medical needs.
- Participating in the development and review of their child's individual Healthcare Plan.
- Carrying out any actions they have agreed to as part of the plan's implementation, for example provide medicines.
- Ensuring that written records are kept of all medicines administered to children.
- Ensuring they or another nominated adult is contactable at all times and contact information is kept up-to-date.

The Governors are responsible for making arrangements to support children with medical conditions in school, including:

- Making sure that this policy is in place.
- Ensuring sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.
- Ensuring that the school's procedures are explicit about what practice is not acceptable.
- Making sure it is clear how complaints may be made and will be handled concerning the support provided to children with medical conditions.
- Ensuring the school's policy clearly identifies the roles and responsibilities of those involved in the arrangements they make to support children at school with medical conditions.

The Headteacher is responsible for:

- Promoting this policy with the whole staff team, parents/carers, pupils and healthcare professionals.
- Ensuring the training needs of all staff are met, including in respect of this policy, First Aid and Epi-pen training, as well as individual members of staff with responsibility for individual children.

The Inclusion Manager is responsible for:

- Producing, and sharing with staff, a register of all pupils with medical needs.
- Ensuring all children with medical needs have a healthcare plan where appropriate, that it is kept up-to-date, is shared with all the individuals who need to know about it and reviewed at least annually; also, if required produce a Health Card to display routines or specific medical requirements, for example, in the event of an emergency to be handed to a paramedic.
- Cover arrangements to ensure availability of staff to meet individual children's needs.
- Monitoring the provision of individual Healthcare Plans for those children who require one and undertaking healthcare plan reviews.
- Liaising with healthcare professionals to ensure the individual needs of children are met.
- Meet with teachers and parents of any pupil with a Healthcare Plan prior to a residential visit to decide if and how the Plan must be adapted to cater for the child during the trip.

Teachers and Support Staff are responsible for:

- Supporting the child as much as possible in self-managing their own condition.
- Risk assessment for school visits, school journey and other school activities outside of the normal timetable; and ensuring all needed medications, medical details and emergency contact numbers are packed in the class medical rucksack.
- Implementing actions identified in individual healthcare plans.

Office Staff are responsible for:

- Tracking staff training needs and ensure that Epi-pen training and first aid training are booked as required.
- Producing a 'medical needs' summary register for each class register and this will be regularly updated.
- Ensuring the safe and accessible storage of prescribed medication in a child's medical pack along with their Healthcare Plan. Medical packs are kept in the school office for Years 1-6 and in the Reception Area for Foundation Stage pupils.
- Returning any no longer required, medicines to the parent/carer to arrange for safe disposal.

Links to achievement and social and emotional wellbeing

There are often social and emotional implications associated with medical conditions. Children may be self-conscious about their condition and some may become anxious or depressed. Long-term absences due to health problems may affect attainment, impact on a child's ability to sustain friendships and affect their well-being and emotional health. As a school we work closely with

the child, their parent/carer and other practitioners to ensure that the impact of their medical needs on their achievement and social and emotional well-being is minimised.

School staff are highly skilled in providing excellent social and emotional support. Our team will develop bespoke programmes to support transition following a period of absence working with outside agencies where appropriate.

Procedure to be followed when Notification is received that a Pupil has a Medical Condition

For children starting at Woodstock Primary, arrangements are in place in time for the start of term. If a child joins mid-term, every arrangement will be made to meet the needs of the child within two weeks.

The Inclusion Manager will call a Medical Planning Meeting as far in advance as possible of start dates and will involve all relevant agencies, or advice from them in their absence. All relevant staff training will be arranged as soon as possible.

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

Individual Health Care Plans

The Inclusion Manager will ensure that all Healthcare Plans, where appropriate, are developed with the help of pupils, parents and other agencies. These plans will be reviewed annually or, if necessary, as pupils' needs change.

We will follow the templates for Healthcare Plans issued with the statutory guidance to ensure all relevant information is included in the plan. If additional information is necessary, for example for sporting events, trips, building adaptations etc these will be included.

Additional support forms include details of prescribed medication and doses required, emergency procedure plans for pupils with Epi-pens and records for administering medication.

The Headteacher will ensure that the school's policy is developed and implemented effectively. The Inlcusion Manager will report all medical arrangements to the Headteacher termly and to the governors in her termly report.

Any member of the staff may be asked to support a child with medical needs but they cannot be required to do so. Although administering medicines is not part of teacher's professional duties they should take into account the medical needs of the pupils 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 a child with medical needs. Any member of staff should know what to do and respond accordingly when they become aware that a child with a medical condition needs help.

Parents **must** provide school with all the up-to-date information about the needs of their child.

Support for children with allergies and medical conditions

On receiving information regarding allergies or medical conditions, all staff are made aware of the allergy or medical need immediately. The Inclusion Manager will then liaise with families and professionals to develop a Healthcare Plan and deliver any necessary staff training. Where appropriate they will then develop a Health Card which includes a picture of the pupil, a description of the allergy and allergic reaction symptoms. Cards will be shared with all staff and held in the child's file.

Parents/carers must provide an Epi-Pen where applicable, which should be kept centrally in the school office. The Inclusion Manager will check Epi-Pens routinely to ensure they are 'in date'. Epi-Pens must be taken on school trips and visits and held by an adult who is trained to administer it.

Teachers and support staff will be trained on how to use an Epi-Pen. The school office keeps a list of the staff trained and their training.

Children with Special Educational Needs & Disabilities (SEND) and Medical Needs

Some children with medical needs also have SEND. If a child with SEND also has a medical need, and he or she has an Education, Health and Care (EHC) Plan, their individual healthcare plan is part of that EHC Plan. For children who have SEND and a medical need but no EHC Plan, their healthcare plan includes reference to the Special Educational Need or Disability. Common medical needs are:

- Asthma: Pupils are required to carry their own, for example salbutamol, though there is a school one available in emergency, administered to those for whom permission has been obtained
- EpiPens are kept in a secure but available cupboard in the school office. Staff receive annual training.
- Insulin will be kept in secure but available cupboard, in pupil-specific boxes in school office.
- Children with injuries, for example broken legs
    - School will consider access arrangements
    - Release from lessons to avoid crush and allow time

- Where an illness keeps the child off school, work will be arranged to be sent to them, if this is reasonable. Longer term illness may invoke referral to medical access school.

Staff Training and Support

The office will keep a central record of all staff training. This includes the register of Epi-pen trained staff and First Aid training. Epi-pen training needs to be renewed every 12 months and is carried out by the School Nurse Team. This training will be organised by the office and staff informed about the training.

Paediatric First Aid training is updated every three years. All staff are offered training.

Information supplied by parents on registration forms is kept in the school's central database and these forms are sent out to parents to update each September. All staff receive a register of pupils across the school who have additional medical needs.

Only medication that has been prescribed by a doctor is administered in school; details of each medication is included in the forms completed by parents. All medicine must be in the original packaging, with a current prescription label. The only exception to this rule is the administration of an inhaler in a situation deemed to be an emergency.

Healthcare Professionals

As a school we work closely with a range of other professionals when supporting a child with medical needs including GPs, school nurses, psychologists and specialist provision in hospitals etc.

We have the support of the school nursing service who work closely in partnership with the school and parents.

The Child's Role in managing their own Medical Needs

Where possible, and in agreement with parents, we aim to ensure that children are fully aware of their medical needs and where appropriate are fully involved in managing their routine. This is done through charts, sticker systems, and natural breaks in the day, visual timetables or prompt cards. This enables children to feel in control and to understand their developing role in managing their condition. These systems are developed with the pupils, parents and other health professionals or support agencies.

If a child refused to take any medication, parents would be contacted immediately for their advice and decision.

Managing Medicines on School Premises

The Governing Body ensure that the school's policy is clear about the procedures to be followed for managing medicines.

- Medicines are only administered at school when it would be detrimental to a child's health not to do so.
- No child under 16 will be given prescription or non-prescription medicines without their parents written consent. (The only exception to this may be the use of an Asthma inhaler in a situation deemed to be an emergency and only by a qualified first aider)
- The only occasion where pain relief medication may be administered is on a residential visit. In order to administer 'Calpol' pre-approval is gained from parents prior to the visit.
- In the first instance, school will ask parents if any prescribed medication can be administered outside of school hours, this is usually possible for most common antibiotics which need to be taken three times daily and therefore can be taken before and after school.
- Medications are stored in with phases areas of the school. Each area has a fridge to store Medicine. Medicines are not locked away to allow access, but are stored out of reach of pupils or where pupils are not allowed unaccompanied. (Exceptions to this are inhalers that are required by pupils at all times.)
- Individual pupils' medication is kept in clearly labelled zippy pockets that contain the plan for medication, details of the medication and expiry dates so that parents are kept fully informed about needs for renewal.
- When any medication is administered the record sheet is updated and parents are informed of doses and times of administration.
- When medication is no longer required or goes out of date it is returned to parents to dispose of responsibly or renew accordingly.

Record Keeping

Electronic records are kept of all medication that is administered.

- All medication taken by pupils or administered by staff is recorded on smartlog. For short term prescribed antibiotics, administration is recorded on smartlog and an online form is filled in by parents giving permission to administer the medicine.
- Parents are asked by the school Administrator to collect out of date medicines and to replace them accordingly.
- If a child receives a bump to the head parents are informed by phone by a member of the office team if severe, if not a text message with head bump guidance.
- If a pupil is unwell parents are contacted and action agreed, this may include the pupil remaining at school but being monitored.

- If a child says that they are unwell but appears to be well, a parent may be contacted but not necessarily expected to come to school.

Emergency Procedures

Woodstock CE Primary School has a clear Emergency Plan which includes all the relevant information and support for staff in an emergency situation. This plan is regularly reviewed and disseminated to all staff.

Where a child has an individual healthcare plan, this defines what constitutes an emergency and explains what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other pupils in the school know that they should inform a teacher immediately if they think help is needed. If a pupil needs to be taken to hospital, staff stay with the child until the parent/carer arrives, or accompanies a child taken to hospital by ambulance.

Day Trips, Residential Visits and Sporting Activities

The Governing Body ensures that arrangements are clear and unambiguous about the need to support pupils with medical conditions to participate in school trips and visits, or in sporting activities and not prevent them from doing so.

All staff are aware of the risk assessments that need to be completed for a trip of any kind, including sporting activities. Each risk assessment includes a section about medical needs and what additional provision, if any, is required. All medication is placed into the First Aid ruck sack that is taken on the trip and a qualified First Aider is required to accompany any school trip or sporting fixture.

Unacceptable Practice

In order to keep all pupils safe and well we are very clear that the whole team know what is not acceptable practice. It is not acceptable practice (unless there is evidence included in the child's individual healthcare plan from a medical professional) to:

- Prevent children from easily accessing their inhalers and medication, and administering their medication when and where.
- 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.
- 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 a pupil becomes ill, send him/her to the school office unaccompanied or with someone unsuitable.
- Penalise children for their attendance record if their absences are related to their medical condition
- Prevent children from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition,
- Require parents/carers, or make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues,
- Prevent pupils from participating, or create unnecessary barriers to children participating in any aspect of school.

Liability, Indemnity and Complaints

The Governing Body, via the Business Manager, ensures that the appropriate level of insurance is in place and appropriately reflects the level of risk.

As a school we try very hard to uphold the aims and procedures outlined in this policy. However, we recognise that on occasion and despite every effort, parents may feel the need to question actions and possibly complain. Initial contact should first be made with the school. Any complaint that cannot be initially resolved by the class teacher should be passed to the Inclusion Manager.

If the situation remains unresolved it will be passed to the Headteacher. Only if the Headteacher is unable to resolve the complaint or the complainant is unwilling to contact the Headteacher, the complainant should invoke the more formal procedures by contacting the Chair of Governors.

The Chair of Governors will investigate the matter and respond to the complainant. If the Chair of Governors cannot resolve the matter it will be referred to the Governing Body Complaints Committee. The Committee will try to resolve the matter as quickly as possible.

Review and Evaluation

The H&S Committee of the Governing Body review this Policy and procedures annually. Whole school data on medical needs and the impact of this Policy are evaluated to deliver best practice and comply with statutory requirements.

Individual Healthcare Plan

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

Family Contact Information

Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

Clinic/Hospital Contact

Name	
Phone no.	

G.P.

Name	
Phone no.	

Who is responsible for providing support in school?	

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 educational, social and emotional needs

Arrangements for school visits/trips etc

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 for the administering of medicine in schools

Form is available here

Administering Medicine Record

Recorded online via smartlog.