



# Supporting Pupils at School with Medical Conditions Policy

**Adopted by the Governors of  
Teignmouth Community School  
on 26 February 2025**

**To be reviewed and updated as required  
and no later than February 2029**

## Amendment Record

VERSION #	DATE	AMENDED BY	NATURE OF CHANGE	DATE OF NEXT REVIEW
1	26. 09. 2014	J Moore		
2	June 2024	B Lee	Updated	June 2025 requires updating to medical conditions policy
3	Jan 2025	L Tidman	Updated to Supporting Pupils at School with Medical Conditions Policy and paracetamol/pain relief consent	January 2029

Teignmouth Community School is committed to ensuring that:

- students, staff and parents understand how the school will support students with medical conditions.
- students with medical conditions are supported to allow them to access the same education as other students, including extra curricula activities.
- staff are suitably trained.
- all school staff are aware of a student's condition, where appropriate.
- there are cover arrangements in place so a student with a known medical condition does not go unsupported whilst in school.
- cover, supply and temporary staff are given appropriate information about the policy and relevant students.
- that a named person takes responsibility for the development and monitoring of Individual Healthcare Plans (IHCPs).
- the safe administration and storage of medicines on the college premises.

This policy pays due regard to:

- Section 100 of The Children and Families Act 2014, which places a duty on governing boards to make arrangements for supporting students at their school with medical conditions.
- <https://www.legislation.gov.uk/ukpga/2014/6/section/100/enacted>
- The Department for Education's statutory guidance: Supporting students at school with medical conditions <https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

## 1 Rationale

All schools and academies are expected by Ofsted to have a policy dealing with medical needs and to be able to demonstrate that this is implemented effectively.

The school will ensure that arrangements give parents/carers and students confidence in the school's ability to provide effective support for medical conditions. The arrangements will 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.

We will ensure that the correct procedures will be followed whenever we are notified that a student has a medical condition.

The school will make arrangements for the inclusion of students in all activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible. The school will make sure that no child with a medical condition is denied admission or prevented from attending school because arrangements for their medical condition have not been made. However, in line with our safeguarding duties, we will ensure that student's health is not put at unnecessary risk from, for example infectious diseases. We will therefore not accept a child in school at times where it would be detrimental to the health of that child or others.

The school does not have to wait for a formal diagnosis before providing support to students. In cases where a student's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on the available evidence. This would normally involve some form of medical evidence and consultation with parents/carers. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place. This will usually be led by the headteacher and SENDCo.

Where a child has an Individual Health Care Plan (IHCP), this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other students in the school should know what to do in general terms, such as informing a teacher immediately if they think help is needed. If a child (regardless of whether or not they have an Individual Health Care Plan) needs to be taken to hospital, staff should stay with the child until the parent/carer arrives, or accompany the child taken to hospital by ambulance.

## 2 Policy

Definitions of Medical Conditions: Students' medical needs may be broadly summarised as being of two types: Short-term - affecting their participation in school activities because they are on a course of medication/treatment.

Long-term - potentially limiting their access to education and requiring extra care and support (deemed special medical needs).

## 3 Roles and responsibilities

### Governing body.

The governing board has ultimate responsibility to make arrangements to support students with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

### Headteacher.

The Headteacher will delegate the below responsibilities to the Associate Senior Leader SENDCo, and SLT.

They will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHCPs), including in contingency and emergency situations
- Take overall responsibility for the development of IHCPs
- Make sure that school staff are appropriately insured and aware that they are insured to support students in this way
- Contact the school nursing service in the case of any student who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

### School staff

Supporting students with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to students with medical conditions, although they will not be required to do so. This includes 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. Teachers will take into account the needs of students with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a student with a medical condition needs help. Staff must not give prescription medicines or undertake health care procedures without appropriate training (updated to reflect any IHCPs).

Student Services will ensure medical information is updated, records kept, and information shared with all necessary staff.

Where identified as being necessary, an Individual Health Care Plan (IHCP) will be developed between school, healthcare professionals and parents/carers so that the steps needed to help a student manage their condition and overcome any potential barriers to getting the most from their education are identified.

### Parents/carer.

Parents/carers

- Provide the school with sufficient and up-to-date information about their child's medical needs
- Be involved in the development and review of their child's IHCP and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the IHCP e.g. provide medicines and equipment

### 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 IHCPs. They are also expected to comply with their IHCPs.

### School nurses and other healthcare professionals

The school nursing service will notify the school when a student has been identified as having a medical condition that will require support in school. This will be before the student starts at the school, wherever possible. Healthcare professionals, such as GPs and pediatricians, will liaise with the school nurses and notify them of any students identified as having a medical condition. The school Welfare & First Aid Officer will be the point of contact with the school for the School Nursing service and other healthcare professionals.

## **4 Individual Healthcare Plans (IHCP)**

The Headteacher has overall responsibility for the development of IHCPs for students with medical conditions. This has been delegated to SENDCo :

The IHCP will include:

1. The student's medical condition, its triggers, symptoms, medication needs and the level of support needed in an emergency. Also, it must include any treatments, time, facilities, equipment, testing and access to food or drink (where it is used to manage their condition), dietary requirements and environmental issues such as crowded corridors and travel time between lessons.
2. Specific support for the student's education, social and emotional needs, such as how will absences be managed, pastoral support and use of rest periods.
3. Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support from a healthcare professional.
4. Cover arrangements and who in the school needs to be aware of the student's condition and the support required including external supply staff.
5. Arrangements for written permission from parents for medication.
6. Arrangements or procedures for school trips or other school activities outside the normal timetable; completion of risk assessments for visits and school activities outside the normal timetable
7. The designated individuals to be entrusted with the above information
8. Procedures in the event of the student refusing to take medicine or carry out a necessary procedure.
9. The ASL: SENDCo will have the final decision on whether an IHCP is required.

Not all students with a medical condition will require an IHCP. It will be agreed with a healthcare professional and the parents when an IHCP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the headteacher will make the final decision.

## **5 Students with Special Educational Needs and Disabilities (SEND)**

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. For children with SEND, this guidance should be read in conjunction with the SEND code of practice 2015 and the school's SEND & Disabilities Policy. IHCPs will be linked to, or become part of, an education, health and care (EHC) plan when necessary. If a student has SEN but does not have a EHC plan, the SEN will be mentioned in the IHCP. The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed.

## 6 Equal opportunities

The school is clear about the need to actively support students with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. The school will consider what reasonable adjustments need to be made to enable these students to participate fully and safely on school 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. Student Services will liaise with the SENDCo and Safeguarding Lead in consideration of participation, reasonable adjustments and risk assessments.

## 7 Being notified that a child has a medical condition

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

(See Appendix 1.)

## 8 Managing medicines

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

- When it would be detrimental to the student's health or school attendance not to do so.
- Where we have parents' written consent, 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. The school 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.

- Paracetamol/pain relief consent is obtained from parents. Student services will hold paracetamol and, if written consent is held, once parents have been contacted and verbal consent given, student services will give out the correct dosage to the student. This will then be confirmed via email to the parents/carers including the amount given and the time. Internal records will be held for monitoring purposes.

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. 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 not locked away. Insulin can be stored in the first aid fridge

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

### 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. A student who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another student to use. All other controlled drugs are kept in a secure cupboard and only named staff have access. Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

## **9 Students at risk of Anaphylaxis**

Anaphylaxis is an extreme allergic reaction. It is potentially life-threatening and always requires an immediate emergency response.

All staff should:

- Undertake regular training to recognise the range of signs and symptoms of an allergic reaction
- understand the rapidity with which anaphylaxis can progress to a life-threatening reaction and that anaphylaxis may occur with prior mild (e.g. skin) reactions
- appreciate the need to administer adrenaline without delay as soon as anaphylaxis occurs and before the student might reach a state of collapse (after which it may be too late for the adrenaline to be effective)
- be aware of how to check if a student is on the Allergy Register
- be aware of how to access the student's EpiPens
- be aware of who the designated members of staff who may administer an EpiPen are and how to access their help

Designated staff should be trained in:

- responding appropriately to a request for help from another member of staff
- recognising when emergency action is necessary
- administering an EpiPen according to the manufacturer's instructions
- making appropriate records of allergic reactions.

Each student will have at least one EpiPen with them at all times. Additional EpiPens are kept in a labelled box in the First Aid room. Each student has a separate, named box or bag with a photo of the student on the front which should contain:

- antihistamine
- 2 EpiPens (if prescribed)
- Ventolin inhaler (if prescribed)
- copy of the child's management plan (if given to school) and/or their IHCP
- consent form for administration of medication
- medication administration form

## 10 Students with Asthma

Student Services will maintain/update the medical details via Arbor. Designated staff will have received asthma training through first aid courses including:

- Recognise the signs of an asthma attack and when emergency action is necessary
- Know how to administer inhalers through a spacer
- Make appropriate records of attacks
- Student services will be responsible for the storage, care and disposal of asthma medication

## 11 Students managing their own needs

Students who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents/carers and it will be reflected in their IHCPs. Students will be allowed to carry their own medicines and relevant devices wherever possible. Staff will not force a student to take a medicine or carry out a necessary procedure if they refuse but will follow the procedure agreed in the IHCP and inform parents/carers so that an alternative option can be considered, if necessary.

## 12 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the student's IHCP, 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/carers
- Ignore medical evidence or opinion
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHCPs
- If the student becomes ill, send them to the school office or medical room unaccompanied
- 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/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their student, 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
- Prevent students from participating, or create unnecessary barriers to students participating, in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child
- Administer, or ask students to administer, medicine in school toilets.

### 13 Emergency procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All students' IHCPs 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/carer arrives or accompany the student to hospital by ambulance.

### 14 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 IHCPs. 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, SENDCo and Student Services. 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 IHCPs

- 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.

## 15 Record keeping

The local governing board will ensure that written records are kept of all medicine administered to students. Parents/carers will be informed if their child has been unwell at school. IHCPs are kept in a readily accessible place which all staff are aware of.

## 16 Liability and indemnity

The local governing board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

The school's insurance policy is a public liability policy with Zurich. We will ensure that we are a member of the Department for Education's risk protection arrangement (RPA).

## 17 Complaints

Parents/carers with a complaint about their child's medical condition should discuss these directly with the Head of Learning for the student's year group and SENDCo in the first instance. If the Head of Learning and SENDCo cannot resolve the matter, they will direct parents to a member of the school's Senior Leadership Team, and the school's complaints procedure if necessary.

## 18 Monitoring arrangements

This policy will be reviewed and approved by the local governing board annually.

## 19 Links to other policies

This policy links to the following policies

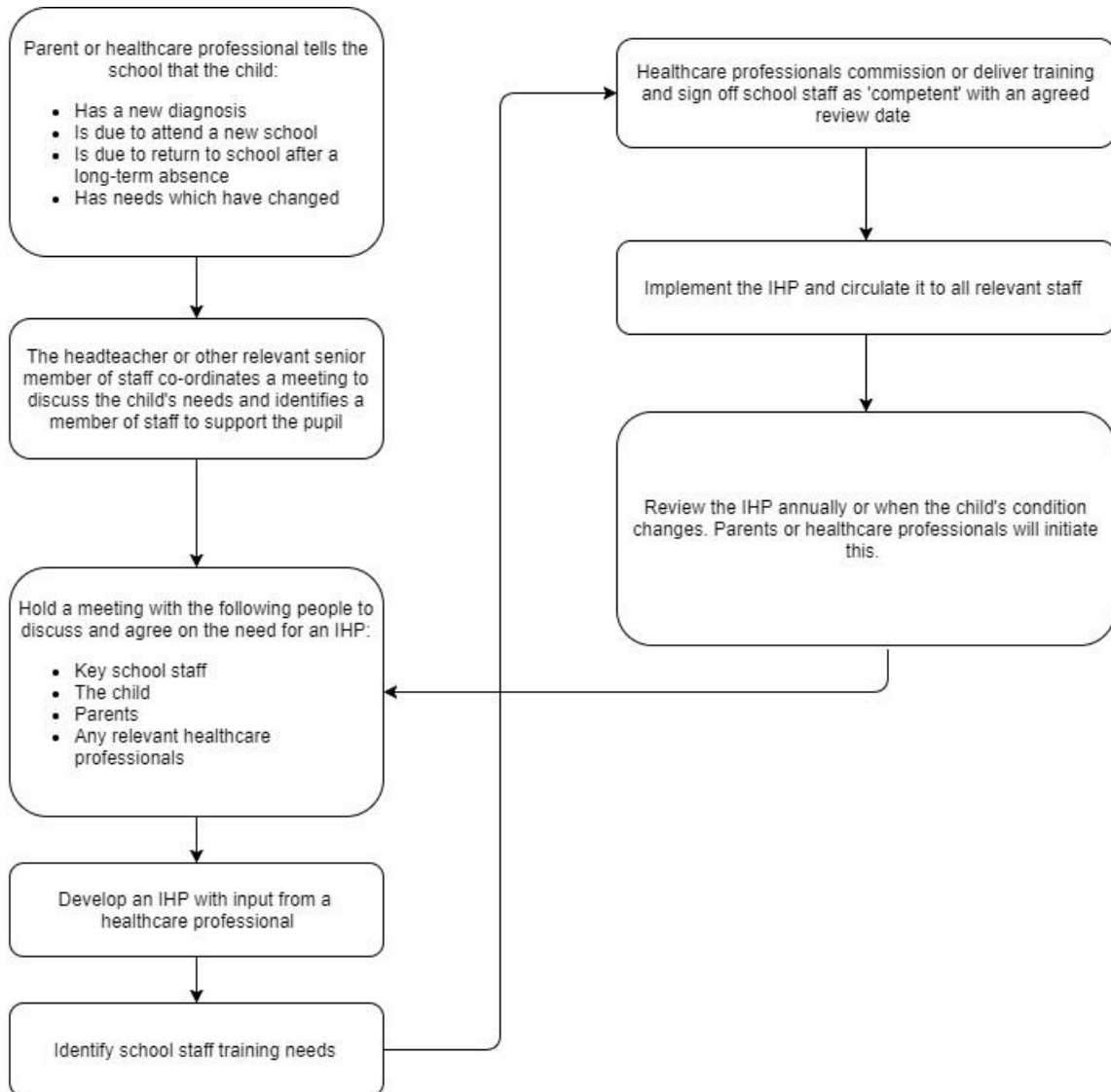
<https://teignmouthsecondary.co.uk/parents/policies/>

- Accessibility policy
- Complaints policy and procedure (IET)
- Equality and Diversity Policy (IET)
- Equality Objectives

- Health and safety (IET)
- Child Protection & Safeguarding policy (IET)
- Special Educational Needs & Disabilities policy

## Appendix 1

To be adapted by TCS's School Manager and Student Services to fit TCS procedures. An example:



## 20 Key Terms and Definitions

ACRONYM	TERM	DEFINITION