Abbey C of E Infant and Nursery School

Medicine and Supporting Pupils at School with Medical Conditions Policy

November 2026

Review date: November 2027

Regard to Documentation
At Abbey C of E Infant and Nursery School, we will have due regard to the following documents:
• Department for Education's statutory guidance, 'Supporting pupils at school with medical conditions', 2014
• Children and Families Act 2014
• Equality Act 2010
• Special Educational Needs and Disability Code of Practice
• Other school policies, such as Child Protection, Equal Opportunities, Behaviour, and Special Educational Needs.
• Department of Health – Guidance on the use of emergency Salbutamol inhalers in schools.

Introduction
At Abbey C of E Infant and Nursery School, children with medical conditions, in terms of both physical and mental health, will be properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential whilst accessing and enjoying the same opportunities at school as any other child.

We recognise that pupils with long-term and complex medical conditions may require on-going support, medicines or care while at school to help them to manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. Abbey C of E Infant and Nursery School recognises that each child's needs are individual. We also recognise that needs may change over time, and that this may result in extended absence from school. The school will make every effort to minimise the impact on a child's educational attainment and support his or her emotional and general well-being, including any necessary re-integration programmes.

The school will focus on giving pupils and their parents every confidence in the school's approach. The school recognises that some children who require support with their medical conditions may also have special educational needs and may have an Education Health and Care Plan (EHCP). We will work together with other schools, health professionals, other support services, and the Local Authority. Sometimes it may be necessary for the school to work flexibly, and may, for example, involve a combination of attendance at school and alternative provision.

Admission to school is conducted by Warwickshire County Council. Children's admission into Nursery is conducted by the Head teacher. No child will be denied admission because of a medical condition. However, if necessary, a comprehensive Individual healthcare plan should be drawn up prior to the child starting the school or nursery. Plans should be drawn up in partnership between the school, parents, and a relevant healthcare professional, e.g. school, specialist or children's community nurse, who can best advise on the particular needs of the child. Pupils should also be involved whenever appropriate. The aim should be to capture the steps which a school should take to help the child manage their condition and overcome any potential barriers to getting the most from their education and to identify if any additional staff training will be required prior to the child attending the school or nursery.

In line with the school's safeguarding duties, the school does 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.

Policy Implementation

• The governing body will ensure that statutory requirements are met;
• The Head teacher will ensure that sufficient staff members are suitably trained;
• All relevant staff will be made aware of the child's condition;
• Cover arrangements will be put in place to cover for staff absence, to ensure that someone is always available;
• Supply teachers will be briefed;
• Risk assessments will be put in place for educational visits, and other school activities outside the normal timetable;
• Individual healthcare plans will be monitored frequently.

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

The school, in consultation with all relevant stakeholders including parents, will:
• Ensure that arrangements are put into place to cover transition from another setting, upon being notified that a child is coming into school with a medical condition. These may vary from child to child, according to existing HCPs.
• Ensure that arrangements are implemented following reintegration into the school or when the needs of a child change.
• Provide support to pupils where it is judged by professionals that there is likely to be a medical condition. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put into place.
• Any staff training needs are identified and met.

Individual healthcare plans

Plans should be drawn up in partnership between the school, parents, and a relevant healthcare professional, e.g. school, specialist or children's community nurse, who can best advise on the particular needs of the child. The purpose of the plan is to ensure that they provide clarity about what needs to be done, when and by whom. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed, and they 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 professionals and parents will agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached, the Head teacher is best placed to take a final view. A flow chart for agreeing the support required is provided in Annex A.
The healthcare plan is a confidential document. The level of detail within will depend on the complexity of the child's condition and the degree of support needed. Where a child has a special educational need, but does not have an EHC plan, their special educational needs will be mentioned in their individual healthcare plan.

Individual healthcare plans, and their review, may be initiated, in consultation with the parent, by a member of school staff or a healthcare professional involved in providing care for the child. The aim is to capture the steps which a school should take to help the child manage their condition and overcome any potential barriers to getting the

most from their education. The individual healthcare plans are reviewed at least annually, or earlier if evidence is presented that the child's needs have changed. The plans are devised with the child's best interests in mind, ensuring that an assessment of risk to the child's education, health and social well-being is managed minimising disruption. Reviews will be linked to any education healthcare plan the child may have.

The information to be recorded

When deciding on the information to be recorded on individual healthcare plans, the following will be considered:

• 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, use of rest periods or additional support in catching up with lessons, counselling sessions;

• The level of support needed, including in emergencies. If a child is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring;

• Who will provide the support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable;

• Who in the school needs to be aware of the child's condition and the support required;

• Arrangements for written permission from parents and the Head teacher 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 that will ensure the child can participate, e.g. Risk assessments;

• Where confidentiality issues are raised by the parent or child, the designated individuals to be entrusted with information about the child's condition;

• 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 could be used to inform the development of their individual healthcare plan.

Roles and responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively; both with staff within the organisation and with outside agencies, as the circumstances of each child dictate.

Governing Body

The Governing Body will ensure that pupils in school with medical conditions are supported. It will ensure that a policy is developed, implemented and monitored. The Governing Body will ensure that staff receive suitable training and that they are competent before they take on the responsibility to support children with medical conditions.

Head teacher

The Head teacher will:
• Ensure that the Supporting Pupils with Medical Conditions Policy is developed and effectively implemented, and that partners, including all staff, are aware of the policy and understand their role in its implementation;
• Ensure that all staff who need to know are aware of a child's condition;
• Ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all the individual healthcare plans, including in contingency and emergency situations;
• Have overall responsibility for the development of individual healthcare plans;
• Ensure that all staff are appropriately insured to support pupils in this way;

The SENDCO will:
• Liaise with the school nurse in respect of a child who has a medical condition, including in cases where the situation has not yet been brought to the attention of the school nursing service.

School Staff
Any member of the school staff may be asked to provide support to pupils with medical conditions, including the administration of medicines, although they cannot be required to do so. Although administering medicines is not part of a teachers' professional duties, they should take into account the needs of pupils with medical conditions they teach. Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

Pupils
Pupils with medical conditions may be best placed to provide information about how their condition affects them. They should be involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with their individual healthcare plan. Other children will often be sensitive to the needs of those with medical conditions.

Parents and Carers
Parents and carers should provide the school with sufficient and up-to-date information about their child's medical needs. At Abbey C of E Infant and Nursery School, parents are seen as key partners and they will be involved in the drafting, development and review of their child's individual healthcare plan. Parents should carry out the action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Local Authority
The Local Authority has a duty to commission a school nurse service to this school. It is expected that the Local Authority will provide support, advice and guidance, including suitable training for school staff.

Staff training and support
Training needs for staff will be assessed by looking at the current and anticipated needs of pupils already on the roll. It may be possible to determine training needs by

early information relating to a child about to be admitted to the school. All members of staff providing support to a child with medical needs will have been trained prior to the child starting the school or nursery. Members of staff who provide support to pupils with medical conditions will be included in meetings where this is discussed. The type of training, and frequency of refresher training, will be determined by the actual medical condition that a child may have and this will be supported by the Governing Body.

Some training may be arranged by the school, and other types may make use of the skills and knowledge provide by the school nurse service, or specialist nurse services, among others. In some cases, the healthcare professional may be able to advise on easily accessible training such as epipen training. Other training may involve on-site or off-site provision. Parents will be asked to supply specific advice and then this will be reinforced with healthcare professional advice.

All staff will be made aware of the specific needs of each child with a medical condition and will be competent and confident enough to deliver the support. It must be noted that a First Aid certificate alone will not suffice for training to support children with medical conditions. The Supporting Pupils with Medical Conditions Policy will be subject to whole staff consultation as part of the draft, and subsequent reviews. All members of staff will be informed of it and it will be included in the induction arrangements for new staff to the school.

The child's role in managing their own medical needs

At Abbey C of E Infant and Nursery School, the children who require medication or other procedures will be supervised in administering them or receive them from a relevant member of staff. If a child refuses to take medicine or carry out a medical procedure, staff will not force him or her to do so, but follow the procedure agreed in the individual healthcare plan. Parents will be informed so that alternative options can be considered.

Managing medicines on school premises

Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours. Where this is not possible, the following will apply:

• Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.

• No child will be given prescription medicines without their parent's written consent – except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents.

• Non-prescription medicines will be administered by parents, should they be needed during the school day. No child will be given a medicine containing aspirin unless it has been prescribed by a doctor.

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

• Medicines will be stored safely. This may be in a locked cupboard in the office or in a fridge in the staff room. Some medicines may be stored in classroom store rooms. Children who need access to their medicines immediately, such as those requiring asthma inhalers, will be shown where they are.
On educational visits, medicines will also be available and they will be looked after by a relevant member of staff.
• If a controlled drug has been prescribed, it will be kept securely and stored in a non-portable container. Named staff only will have access to such medication so that it can be administered to the specific child. The school will keep a record of doses administered, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered will be noted.
• When no longer required, medicines should be returned to the parent to arrange for safe disposal.

Written records will be kept of all medicines administered to children and parents will be informed if their child has been unwell at school.

Emergency procedures
A child's individual healthcare plan will clearly define what constitutes an emergency and the action to be taken, including ensuring that all relevant staff members are aware of emergency symptoms and procedures. It may be necessary to inform other pupils in general terms so that they can inform a member of staff immediately if they think help is needed.
If a child is taken to hospital, staff will stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance. Accurate information about the child will be provided to the emergency services at the call out stage, during any first response stage, or subsequent moving on to hospital.

Educational visits and sporting activities
The school will consider how a child's medical condition will impact on their participation. We will encourage all children to participate according to their ability and make any necessary reasonable adjustments, unless evidence from a clinician, such as a GP, states that this is not possible. The school will consider what reasonable adjustments may need to be made after carrying out a risk assessment so that planning arrangements take account of any steps needed to ensure that children with medical conditions are included. This will require consultation with parents and pupils and advice from the relevant healthcare professional to ensure that pupils can participate safely.

Liability and indemnity
The Governing Body at Abbey Infant and Nursery School ensures that appropriate insurance is in place and that it reflects the level of risk. The insurance covers staff providing support to pupils with medical conditions. From time to time, the school may need to review the level of cover for health care procedures and any associated related training requirements.

Complaints

Parents who are dissatisfied with the support provided should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they make a formal complaint via the school's complaints procedure.

This policy was updated in November 2026 and will be reviewed in November 2027.

Signed……. (Headteacher)

Signed……..(Chair of Governors)

Annex A: Model process for developing individual healthcare plans

