

# SOKE EDUCATION TRUST

## Supporting pupils with medical conditions and those who cannot attend school policy

Reviewed Date	6 February 2026
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## **Supporting children with medical needs and those who cannot attend school**

### **Aims**

This policy aims to ensure that:

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

The Trust board will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupils' conditions, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- Providing supply teachers with appropriate information about the policy and relevant pupils
- Developing and monitoring Individual Healthcare Plans (IHPs)

### **Legislation and statutory responsibilities**

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 pupils at their school with medical conditions.

It is also based on the Department for Education's statutory guidance: 'Supporting pupils at school with medical conditions' (December 2015).

This policy also complies with our funding agreement and articles of association.

### **Roles and responsibilities**

#### **The Trust Board**

The Trust board has ultimate responsibility to make arrangements to support pupils with medical conditions and delegates the responsibility to its Local Governance Committees to monitor. The Trust board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

#### **The Headteacher**

The Headteacher 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 (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
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- Contact the school nursing service in the case of any pupil 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

### **Staff**

Supporting pupils 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 pupils 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 pupils 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 pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

### **Parents**

Parents will:

- 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 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

### **Pupils**

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils 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.

### **School nurses and other healthcare professionals**

When a pupil has been identified as having a medical condition that will require support in school, we will liaise with the school nursing team. This will be before the pupil starts school, wherever possible. They may also support staff to implement a child's IHP.

Healthcare professionals, such as GPs and paediatricians, will liaise with the school and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

### **Equal opportunities**

Our school is clear about the need to actively support pupils 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 pupils 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 pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

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

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

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 pupils who are new to our school.

See Appendix 1.

### **Individual healthcare plans (IHPs)**

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This Headteacher may be delegated to the SENCO but will retain oversight.

Plans will be reviewed at least annually, or earlier if:

- There is evidence that the pupil's needs have changed
- The pupil has a medical emergency or incident
- There are concerns about the effectiveness of the support
- The pupil is moving to a new class or key stage
- There are changes in medication or treatment
- The parent requests a review

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

- What needs to be done
- When
- By whom

Not all pupils 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 school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can offer best advice on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP.

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

- 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, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil'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 pupil'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 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 pupil can participate, e.g. 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 who to contact, and contingency arrangements

### **Managing medicines**

Prescription medicines only will be administered at school:

- When more than three dosages are required or medicines are prescribed to be taken at specific times of the day
- When it would be detrimental to the pupil's health or school attendance not to do so **and**
- Where we have parents' written consent

Before administering any medication, staff will:

- Check the pupil's name
- Check the prescribed dose
- Check the expiry date
- Check the written instructions provided by the prescriber
- Check the maximum dosage and when the previous dosage was taken
- Check that written parental consent has been given

A record will be kept of all medicines administered, including:

- Date and time
- Name of pupil
- Name and dose of medicine
- Any reactions
- Name and signature of staff member who administered the medicine

Parents will always be informed when medication has been administered.

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

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

Medicines will be stored in accordance with the product instructions and in the original container in which dispensed. Medicines requiring refrigeration will be stored in a refrigerator [specify location].

Pupils 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 pupils and not locked away. This may mean that pupils carry them with them, or that they are stored in an easily accessible location in the classroom.

All controlled drugs (except those that need to be readily accessible in an emergency) are kept in a secure cupboard in the school office and only named staff [specify who] have access.

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

### **Use of Sharps**

Alongside the care plan which will support the requirement to provide medical care for example a child with diabetes, a risk assessment will be completed.

Sharps should be handled as little as possible, and never passed directly from hand to hand.

Used sharps should be discarded immediately into a designated sharps container at the point of use.

Sharps containers should be puncture-resistant, appropriately sized, and located safely, away from public access and children. They should not be overfilled and must be disposed of when full or according to schedule.

In the event of a sharps injury, the wound should be encouraged to bleed, washed thoroughly with soap and water, and then covered with a waterproof dressing. The incident must be reported to occupational health, and appropriate follow-up procedures will be initiated, including potential blood tests and vaccinations.

### **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.

All other controlled drugs are kept in a secure cupboard in the school office 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.

### **Pupils managing their own needs**

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures e.g. asthma inhalers. This will be discussed with parents and it will be reflected in their IHPs.

Pupils will be allowed to carry their own medicines and relevant devices wherever possible. Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered, if necessary.

### **School trips and residential visits**

Staff supervising excursions should be aware of any medical needs, and relevant emergency procedures. Sometimes an additional supervisor or parent might accompany a particular pupil.

If staff are concerned about whether they can provide for a pupil's safety, or the safety of other pupils on a trip, they will request that parents seek written medical advice from the child's GP.

Staff understand that there may be additional medication, equipment or other factors to consider when planning residential visits.

### **Sporting activities**

Children with medical needs will be encouraged to take part in sporting activities appropriate to their own abilities. Any restrictions on a pupil's ability to participate in PE will be included in their individual health care plan.

Some pupils may need to take precautionary measures before or during exercise and/or need to be allowed immediate access to their medication if necessary.

Teachers should be aware of relevant medical conditions and emergency procedures.

### **Emergency Procedures**

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

In an emergency, staff will:

1. Assess the situation and call for help
2. Follow the emergency procedures set out in the pupil's IHP
3. Call 999 if necessary, and inform them that the pupil has a specific medical condition
4. Contact the pupil's parents/carers immediately
5. Ensure that a member of staff accompanies the pupil if they are taken to hospital

If a pupil needs to be taken to hospital:

- Two members of staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance
- Staff will take the pupil's IHP and any medication with them
- Staff will not take the pupil to hospital in their own car

After an emergency:

- The incident will be recorded

- Parents will be informed
- The IHP will be reviewed to see if any changes are needed
- Staff involved will be offered support if needed"

### **Confidentiality**

The school will treat medical information confidentially. The school will agree with the parents who will have access to records and information about a pupil.

If information is withheld from staff, they cannot be held responsible if they act incorrectly in giving medical assistance but otherwise in good faith.

### **Unacceptable practice**

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable 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
- 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 school activities, including lunch, unless this is specified in their IHPs
- 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 pupil, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

### **Emergency procedures**

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

If a pupil needs to be taken to hospital, two members of staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance.

### **Training**

The school will provide two types of training:

**1. Whole-school awareness training** All staff will receive training so that they are aware of this policy and understand their role in implementing it. This will include:

- What we mean by 'medical needs'
- How the school supports pupils with medical needs
- What individual healthcare plans are and how we use them
- How we support pupils' social and emotional needs
- Preventative and emergency measures so they can recognise and act quickly when a problem occurs

This training will be provided during staff induction and updated regularly.

**2. Specific medical condition training** Staff who are responsible for supporting pupils with specific medical conditions will receive suitable and sufficient training to do so. This training will be identified during the development or review of IHPs and will be led by relevant healthcare professionals, as appropriate.

The training will ensure that staff are competent and have confidence in their ability to support pupils, fulfil the requirements in the IHPs, and have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The school will make every effort to ensure that arrangements are put into place within 2 weeks of notification, or by the beginning of the relevant term for pupils who are new to our school. However, in practice, this will depend on factors such as the complexity of the child's needs and the availability of healthcare professionals to provide advice.

### **Record keeping**

The Headteacher will ensure that records are kept of all medicine administered to pupils for as long as these pupils are at the school and this will be monitored by the Local Governance Committee. Parents will be informed if their pupil has been unwell at school.

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

### **Children with Health Needs who cannot attend school**

The school recognises that some pupils may be unable to attend school due to their medical needs. In such cases, the school has a duty to arrange suitable education for these pupils.

Determining whether a pupil is well enough to attend school:

- This is ultimately a decision for parents/carers, in consultation with healthcare professionals
- The school will not send pupils home frequently for reasons associated with their medical condition unless this is specified in their IHP
- The school will work with parents and healthcare professionals to support pupils to attend school wherever possible

If a pupil is unable to attend school due to their medical needs:

Short-term absence (less than 15 school days):

- The school will provide work for the pupil to complete at home where appropriate
- The school will maintain contact with the pupil and family
- The school will plan for the pupil's reintegration

Long-term absence (15 school days or more): Initially, the school will attempt to make arrangements to deliver suitable education for the pupil. This will include:

- Setting learning remotely using the school's online platform, e.g., Google Classroom
- Providing regular pastoral information and support including letters from peers, newsletters, etc.
- The SENCO working with parents to determine what work is appropriate and a timescale for reintegration

If the school cannot make suitable arrangements: The school will discuss the situation with the Specialist Teaching team at [Cambridgeshire County Council/Peterborough City Council] who will work with the school to support suitable education for these children.

If the local authority makes arrangements: The school will:

- Work constructively with the local authority, providers, relevant agencies and parents to ensure the best outcomes for the pupil
- Share information with the local authority and relevant health services as required
- Help make sure that the provision offered to the pupil is as effective as possible and that the child can be reintegrated back into school successfully
- Provide information about the pupil's capabilities, educational progress and outcomes
- Maintain contact with the pupil and family

When reintegration is anticipated: The school will work with the local authority to:

- Plan for consistent provision during and after the period of education outside the school
- Enable the pupil to access the same curriculum and materials that they would have used in school

### **Liability and indemnity**

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

We will ensure that we are a member of the Department for Education's risk protection arrangement (RPA).

### **Complaints**

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

### **Links to other policies**

This policy links to the following policies:

Accessibility plan

- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding & Child Protection
- Special educational needs information report and policy

**Appendix 1: Being notified a child has a medical condition**



