



MEADOW PARK SCHOOL

Supporting Students with Medical Conditions

Approved by: Eve Fraser

Date: September 2025

Last reviewed on: September 2025

Next review due by: September 2026

Contents

1. Introduction	3
2. Aims	3
3. Legislation and Guidance	3
4. Roles and responsibilities	4
5. Equal opportunities	5
6. Notifying school of a medication condition	6
7. Individual Health Care Plans	6
8. Medication in school	7
9. Unacceptable practice	10
10. School Trips	10
11. Sporting Achievements	11
12. SEND	11
13. Confidentiality	11
14. Emergency procedures	11
15. Training	11
16. Liability & Indemnity	12
17. Links to other policies	12

1. Introduction

Most students will at some time have a medical condition that may affect their participation in school activities. For many this will be short term. Other students have medical conditions that, if not properly managed, could limit their access to education. Such students are regarded as having medical needs. Most of these students will be able to attend school regularly and take part in normal school activities. This policy outlines responsibilities and procedures for supporting students at Meadow Park School who have medical needs. The aim is to ensure that students with medical conditions, in terms of physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

Students may be self-conscious about their condition, and some may be bullied or develop emotional disorders such as anxiety or depression around their medical condition. Long-term absences due to health problems affect students' educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health. Reintegration back into school should be properly supported so that students with medical conditions fully engage with learning and do not fall behind when they are unable to attend. Short-term and frequent absences, including those for appointments connected with a student's medical condition (which can often be lengthy), also need to be effectively managed and appropriate support put in place to limit the impact on the student's educational attainment and emotional and general wellbeing.

2. Aims

This policy aims to ensure that:

- Students, staff and carers understand how our school 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 school trips and sporting activities.

3. Legislation and 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 school with medical conditions.

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

Other relevant pieces of legislation are:

- [The Management of Health and Safety at Work Regulations 1999](#), which require employers to carry out risk assessments, decide to implement necessary measures, and arrange for appropriate information to be disseminated and provide training opportunities.
- [The Education \(Independent School Standards\) Regulations 2014](#), which require that suitable space is provided to cater for the medical and therapy needs of students

4. Roles and responsibilities

4.1 Appointed person

The school's appointed person is the Physical and Mental Health Lead who is currently Eve Fraser and they are responsible for:

- The implementation of this policy.
- The creation and review of Individual Health Care Plans (IHCP) that support the needs of students with medical needs.
- The creation and review of Risk Assessments for students that have short term injuries impacting on their ability to move around school and access their education.
- For informing all staff of which students have IHCPs and where they are stored.
- That medical conditions are evidenced and documented on Bromcom and the medical alert is activated so staff can easily see which students will require additional support.
- That any medication that is kept in school is correctly labelled and procedure is following by all first aiders when administering medication.
- Ensuring that all medical equipment across the school is in date and in good working order.

4.2 The Local Governing Body (LGB)

The LGB has ultimate responsibility to make appropriate arrangements to support students with medical conditions but delegates that responsibility to the Headteacher and staff.

4.3 Headteacher

The Headteacher is responsible for the implementation of this policy, including:

- Ensuring 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 the adjustments stated in the IHCPs, including in contingency and emergency situations
- Ensure that a procedure is in place so all staff who need to know are aware of a child's condition
- 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
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

- **4.4 Staff**

It is the responsibility of all staff:

- To be aware of the medical needs of the students that they support.
- To read all IHCPs relevant to them and sign to state they have read it, via the documents in MP-staffroom.
- To make the suggested adjustments and accommodations in the classroom and social spaces.
- To know what to do in the event of requiring first aid support or an emergency.
- To know what to do and respond accordingly when they become aware that a student with a medical condition needs help.

4.5 Carers

Carers 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 IHCP.
- Carry out any action they have agreed to as part of the implementation of the IHCP, e.g. provide medicines and equipment.

4.6 Students

Students will:

- Be involved in the discussions about their medical needs and contribute to the development of their IHCP.
- Comply with their IHCP.
- Talk to a trusted adult if they feel that their medical needs are impacting on her ability to engage in lessons, their attendance or their emotional wellbeing.

5. Equal opportunities

Our 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 carers and any relevant healthcare professionals will be consulted.

6. Notifying school of a medical condition

6.1 Short term medical needs

Students may be required to finish a course of medication at school, where possible, the administration of the medication should be outside of school hours. Where this is not possible an adult with parental responsibility is required to provide the school with the prescribed medication in its original container and complete a consent form for its administration.

Students who have sustained an injury that will impact their mobility around school or limit their engagement in lessons will require a risk assessment that outlines the adjustments to be made before they can return to school.

Some short-term medical conditions may require a temporary toilet pass which can be issued by the Physical and Mental Health Lead.

6.2 Long term medical needs

Carers will need to provide the school with medical evidence of any long-term medical needs; this can be from any medical professional but must be on headed

paper. Medicines should only be administered at school when it would be detrimental to a student's health or school attendance not to do so.

An Individual Health Care Plan (including a risk assessment) will then be created alongside the student, the carers and relevant health professionals.

The risk assessment may indicate that a Personal Emergency Evacuation Plan (PEEP) is required, which will also be written in conjunction with the student, carers and health professionals.

The IHCP and/or PEEP is shared with all staff who will support the student and made available for all staff to read.

7. Individual Health Care Plans (IHCPs)

The Headteacher has overall responsibility for the development of IHCPs for students with medical conditions. This has been delegated to the Physical and Mental Health Lead.

IHCPs will be reviewed annually if there hasn't been a change to the student's medical needs. The IHCP should be reviewed immediately if there has been a change to the student's diagnosis, treatment or their ability to attend school and access their education.

An IHCP should include

- The medical condition / diagnosis, symptoms, triggers, signs, equipment / devices and daily care requirements including treatments.
- What constitutes an emergency, what actions are to be taken in the event of an emergency and who is responsible.
- Family contact details
- Specific support for the student's educational, social and emotional needs, including treatments, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons
- Who will provide this support, and if training is required.
- A risk assessment of potential hazards and support that will be put in place to reduce risk.
- Medication to be taken in school, including dose, method of administration and its timing, who it will be administered by and any side effects to be aware of (consent form to also be completed).
- Arrangements for school trips and visits.
- Contact details for GP and relevant health professionals.
- Whoever in the school needs to be aware of the student's condition and the support required

8. Medication in school

8.1 Consent

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 **and**
- Where we have carers' written consent

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

First aiders are the only members of staff to administer medications to students.

The school will only accept prescribed medicines that are:

- In-date
- Have the pharmacy label stating the student's name
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

Parental consent will also give details of the medication to be administered, including:

- Name of medication
- Dose
- Method of administration
- Time and frequency of administration
- Other treatment
- Any side effects
- If the student has taken the medication before

The school will not administer medication that the student has not taken before. The expectation would be for the student to have received the first 24 hours' worth of medication and showed no signs of an allergic reaction.

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date. Parental consent will be held alongside the students Individual Healthcare Plan. The administration of the medication will be reflective of the detail written within the IHCP and consent form. For some students it may be appropriate for two staff members to be present during medicine administration.

8.2 Storage

All medication must be stored in a locked cupboard, either in the medical room or the sixth form Deputy Head of House office, or in the lockable fridge in the medical room.

The medication should be stored in a labelled folder along with the consent form, record of administration and IHCP.

8.3 Administration

Staff will not be able to administer prescription medication without the above completed. All medicines will be stored safely if it is deemed unsafe for the student to take responsibility for it. For these students, they will be informed about where their medicines are kept and how to access them. A limited supply should be left in school, stored with the student's name, name of the drug, dose of the drug and the frequency of administration. Where a student needs two or more prescribed medicines and they are unable to care for them themselves they should be stored in separate containers. It is the student's responsibility to arrive to take their medication with the agreed supervision.

After discussions with carers, students' who are competent should be encouraged to take responsibility for managing their own medicines and procedures. This should be reflected in the IHCP. Where possible, students should be allowed to carry their own medicines and relevant devices or should be able to access their self-medication quickly and easily.

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.

Record keeping

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

IHCPs are kept in a readily accessible place, within Bromcom and MP-staffroom, which all staff are aware of.

8.4 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 will have to store it in the medical room and administer it alongside a first aider. It is an offence to pass it to another student to use. All other controlled drugs are kept in a secure cupboard in the medical room.

The administration and recording of controlled drugs are the same as any medication in school.

8.5 Disposal of medications

Prescribed medication must be returned to carers once the course is complete, non-prescribed medication will be reviewed at the end of each term and returned to carers at the end of the academic year. Carers are responsible for disposal of date expired medicines.

8.6 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 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 carers so that an alternative option can be considered, if necessary.

9. 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 carers
- 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 IHCPs
- 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 manage their medical condition effectively
- Require 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 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 carers to accompany their child

10. School trips

Staff supervising excursions should be aware of any medical needs, and relevant emergency procedures. Sometimes an additional supervisor or carer might accompany a particular student. If staff are concerned about whether they can provide for a student's safety, or the safety of other students on a trip, they will seek medical advice from the School Health Service or the student's GP. The school will carry out risk assessments so that planning arrangements will consider any steps needed to ensure that students with medical needs are included.

11. Sporting Activities

Students with medical needs will be encouraged to take part in sporting activities appropriate to their own abilities. Any restrictions on a student's ability to participate in PE will be included in their IHCP. Some students 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.

12. SEND

Some students with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case Governing Bodies must comply with their duties under that Act. Some may have special educational needs or an Education, Health Care Plan (EHCP). For students with SEND, this guidance should be read in conjunction with the SEND Code of Practice and SEND Policy outlined on the website.

13. Confidentiality

The school will treat all medical information confidentially. The Headteacher will agree with the carers who will have access to records and information about a student. If information is withheld from staff, they cannot be held responsible if they act incorrectly in giving medical assistance but otherwise in good faith.

14. Emergency procedures

Allocated staff have regular training in First Aid and know how to call the emergency services. As part of general risk management processes, all schools should have

arrangements in place for dealing with emergencies for all school activities wherever they take place, including on school trips within and outside the UK. Where a child has an 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.

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

15. 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.

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 and risk assessments
- Help staff to understand the specific medical conditions they are being asked to deal with, their implications and preventative measures
-

16. Liability and indemnity

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

The details of the school's insurance policy are:

- Teachers or staff are suitably trained or qualified to carry out the procedure in question
- The school maintains suitable records, training and documented parental permission is in place and this information is regularly updated.
- It is expected that any training is refreshed and documented as per the guidance from their first aid or medical training provider.

- Any treatment provided is documented as to when and whom and if necessary, why.
- With regard to ad hoc prescriptions such as antibiotics for short term illness, we expect the original package, and instructions are provided to the school along with written parental/guardian permission
- The school will document medications in their records and update this as and when administered
- We will ensure that we are a member of the Department for Education's risk protection arrangement (RPA).

17. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding
- Special educational needs information report and policy