



Supporting pupils with medical conditions Policy

Policy Owner:	Director of Inclusion
Approved by:	Trust Board
Last reviewed:	December 2025
Next review due by:	December 2026

Due to the evolving nature of The CAM Academy Trust, procedures behind this policy will be reviewed and amended accordingly to reflect changes.

At the heart of our work lie the six core principles of The CAM Academy Trust. These drive everything that we do.



Aims

This policy aims to ensure that:

- Pupils, staff and parents/carers understand how our schools will support pupils with medical conditions affecting physical and/or mental health
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities and play a full and active role in the life of the school, remain healthy

and achieve their academic potential

The Trust will implement this policy by:

- Making sure sufficient staff are suitably trained in each school
- 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) and ensuring that all staff within each school are aware of and follow them, particularly with reference to what to do in an emergency. This duty extends to staff leading activities out of normal school hours or off-site. In the absence of an IHP, the school's standard emergency procedure will be followed.

Each school will have a named person with responsibility for implementing this policy. The name of this person can be obtained from the school office or via the general enquiries email address for each school.

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 statutory guidance on [supporting pupils with medical conditions at school](#) and the Early Years Foundation Stage statutory framework from the Department for Education (DfE).

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

Roles and responsibilities

The Trust

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

The Principal

The Principal 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
- 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 (or other equivalent local 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 nursing service.
- Ensure that systems are in place for obtaining, recording and sharing information about a child's medical needs and that this information is kept up to date and made available to those who need it in a secure manner

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. A record of what specific training has been undertaken, when and by whom will be held by the designated person in each school with responsibility for implementing this policy.

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.

Staff who bring medication into school for their personal use must ensure that these are stored securely and that pupils do not have access.

Parents/Carers

Parents/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 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
- Ensure that they or a nominated adult is 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.

The Local Authority

Local authorities are commissioners of school nurses for maintained schools and academies. Under Section 10 of the Children Act 2004, they have a duty to promote co-operation between relevant partners – such as proprietors of academies, clinical commissioning groups and NHS England – with a view to improving the wellbeing of children with regard to their physical and mental health, and their education, training and recreation. Local authorities and clinical commissioning groups (CCGs) must make joint commissioning arrangements for education, health and care provision for children and young people with SEN or disabilities (Section 26 of the Children and Families Act 2014).

Local authorities should provide support, advice and guidance, including suitable training for school staff, to ensure that the support specified within individual healthcare plans can be delivered effectively.

Local authorities should work with schools to support pupils with medical conditions to attend full-time.

Where pupils would not receive a suitable education in a mainstream school because of their health needs, the local authority has a duty to make other arrangements.

Statutory guidance for local authorities sets out that they should be ready to make arrangements under this duty when it is clear that a child will be away from school for 15 days or more because of health needs (whether consecutive or cumulative across the school year).

School nurses and other healthcare professionals

Our local school nursing service should notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible.

Healthcare professionals, such as GPs and pediatricians, should liaise with the school's pupil support team and notify them of any pupils identified as having a medical condition.

Equal opportunities

The school will adhere to the legal responsibilities under the Equality Act 2010 and will not unlawfully discriminate against any pupils. Our schools are clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, school shows and performances and before- and after-school clubs and not prevent them from doing so because of their medical condition, except where evidence from a clinician, such as a GP, indicates that this is not possible.

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, school shows and performances and before- and after-school clubs.

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/carers and if necessary, any relevant healthcare professionals will be consulted.

In line with safeguarding duties, schools must ensure that pupils' health is not put at risk from, for example, infectious diseases. Schools, therefore, do not have to accept a pupil on-site (or for off-site activities) at times when it is considered this would be detrimental to the health of the individual pupil or others even if they have appropriate medication, support or an IHP in place.

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. This process will be followed by all schools in the Trust.

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 the school.

See Appendix 1.

EYFS settings: Obtaining information about medicines

For new starters we will send a form to all parent/carers of pupils after their place at the school has been confirmed, but before their first school year starts, to confirm any medicine(s) their child needs. Where a pupil has a new diagnosis and/or a pupil has moved to the school mid-term, we will send a form and put arrangements in place within 2 weeks

We will send a reminder to parents/carers at the start of each year either by email, by letter or through the school newsletter about the need to inform the school about medications they need to take. The school will also ensure that parents know how to access a form to record these medications and provide details of who this should be submitted to if their child requires certain medicine(s).

We ask that parents/carers proactively inform us by either phone call to the school or by email if their child's medical needs change during the school year.

Individual healthcare plans

The Principal has overall responsibility for the development of IHPs for pupils with medical conditions. This responsibility may be delegated within a school. The name of the person to whom it has been delegated in a specific school can be obtained from the school office or general enquiries email address.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed. This may be reviewed in conjunction with a pupil's Education, Health and Care Plan, if applicable.

Plans will be developed with the pupil's best interests in mind and will ensure that schools assess and manage risks to a pupil's education, health and social wellbeing and minimise disruption. An IHP 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/carers when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the principal 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 pediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate. Where a pupil has an emergency health care plan prepared by their lead clinician, this should inform the IHP.

IHPs will be linked to, or become part of, any education, health and care plans (EHCPs). If a pupil has a special educational need or disability (SEND) but does not have an EHCP, the SEND 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 principal (who is likely to delegate this to the member of staff responsible for developing IHPs) 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/carers and the principal 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/carer or pupil, the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency, including who to contact, contact numbers, and contingency arrangements

Managing medicines

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

- When it would be detrimental to the pupil's health or school attendance not to do so and
- Where we have parents'/carers' written consent

The person administering the medicine will keep a written record. Parents/carers will always be informed on the same day the medicine has been administered, or as soon as reasonably possible.

The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents/carers.

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

Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Records will be kept of the pupil name, date, time and dosage administered and by whom and parents/carers 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
- Prescribed for the individual pupil to whom it is being administered

Prescribed medicines which do not fulfil these criteria will not be administered. 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 and securely. Medicines which need to be kept in the fridge will be stored in a separate fridge. 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 metres and adrenaline pens will always be readily available to pupils, including when they are engaging in activities off-site, and not locked away.

Medicines will be returned to parents/carers to arrange for safe disposal when no longer required or out of date. Sharps boxes should always be used for the disposal of needles

and other sharps.

Controlled drugs

Controlled drugs are prescription medicines that are controlled under the [The Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

A pupil 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 pupil to use. This is at the discretion of the school. All other controlled drugs are kept in a secure cupboard in the school's designated place for storing medication 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. This will be discussed with parents/carers and it will be reflected in their IHPs.

Pupils will be allowed to carry their own medicines and relevant devices wherever possible. No child will be expected to take on responsibility until they are ready for it and appropriate supervision will still be given if required. 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/carers immediately so that an alternative option can be considered, if necessary.

If refusal to take medicine or carry out a procedure results in an emergency, the school's emergency procedures should be followed.

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/carer
- 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 (unless the IHP makes it clear this is appropriate) or with someone unsuitable
- Penalise pupils for their attendance record if their absences are specifically related to their medical condition, e.g. hospital appointments. Although working with the family in a supportive way to improve attendance where appropriate would be encouraged

- 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/carers, 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/carers 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, a member of staff will stay with the pupil until the parent/carer arrives or accompany the pupil to hospital by ambulance.

Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

Relevant professionals will lead on identifying the type and level of training required and will agree this with the designated lead member of staff in school. Training will be kept up to date and records kept.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
- Fulfil the requirements in the IHPs
- 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.

Record keeping

The school will ensure that written records are kept of all medicine administered to pupils.

Parents/carers will be informed if their pupil has been unwell at school.

IHPs are kept securely to preserve confidentiality in a readily accessible place which all staff are aware of. These records will be maintained in line with relevant guidelines.

Liability and indemnity

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

Cover is currently provided to the Trust and its schools by Zurich.

Complaints

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

Monitoring arrangements

This policy will be reviewed and approved annually by the Trust Board.

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 reports and policy

Appendix 1: Being notified a child has a medical condition

