



# SEND CHURCH OF ENGLAND PRIMARY SCHOOL

## Supporting Children with Medical Needs in School Policy

**Agreed: Autumn term 2025**

**Review Autumn term 2027**

**Bi-Annual**

### 1. Introduction and Scope

Send CofE Primary School is committed to ensuring that children with medical conditions are properly supported so that they can have full access to education, including school trips and physical education.

This policy has been developed in line with the school's statutory duty under Section 100 of the Children and Families Act 2014 and the Department for Education (DfE) statutory guidance, *Supporting pupils at school with medical conditions* (December 2015) and is based on Surrey County Council Guidance. It applies to all pupils with a medical condition, temporary or long-term, from the point they are identified as having a medical need.

The Governing Body will ensure that arrangements are in place to support pupils with medical conditions. This policy will be reviewed every two years, or sooner if required by changes to statutory guidance or school needs, and will be made publicly accessible.

This policy covers major transitions (school trips, sporting activities) but also requires staff to be sensitive to internal transitions (e.g., between activities, returning to school after an extended absence, or moving between key stages) where a child with medical needs may require additional, planned support or continuity of care.

### 2. Aims of the Policy

The core aims of this policy are to:

- Ensure that every child with a medical condition is safe and fully included in school life
- Provide a clear process for the development, implementation, and review of Individual Healthcare Plans (IHCPs).
- Ensure that staff are appropriately trained and competent to support pupils' medical needs.
- Establish clear procedures for the administration of medicine and emergency response.
- Promote partnership between the school, parents, healthcare professionals, and the pupil.

### 3. Roles and Responsibilities

Role	Responsibility
Governing Body	Responsible for setting the strategic vision for supporting pupils with medical conditions and ensuring the policy is implemented.

<b>Headteacher</b>	Overall responsibility for the day-to-day management of the policy, ensuring staff training is current, and ensuring confidentiality is maintained. They will designate a lead person for medical conditions (e.g., a member of the Senior Leadership Team).
<b>School Staff (Teaching &amp; Support)</b>	Understand their role in supporting pupils with medical needs, follow IHCPs, be aware of emergency procedures, and administer medicine only if trained and delegated to do so. Staff supporting pupils with medical needs will be mindful that changes in a child's behaviour, mood, or engagement may be a form of communication related to their medical condition, pain, anxiety, or medication side effects. These factors will be considered and discussed with the medical team/parent before escalating to standard behaviour protocols.
<b>Parents/Carers</b>	Provide the school with sufficient and up-to-date information about their child's medical condition, medicine, and management plan. They are responsible for ensuring medication is in-date and refilled as necessary.
<b>Pupils</b>	Where appropriate, contribute to the development of their IHCP, know who to approach for help, and manage their own medication (e.g., carrying an inhaler) if deemed competent to do so.

#### **4. Individual Healthcare Plans (IHCPs)**

IHCPs are central to the effective support of children with long-term or complex medical needs. The school will use DfE Template A for the IHCP format.

##### **4.1 When an IHCP is Required**

An IHCP is essential where a medical condition is complex, requires specialist knowledge, or requires specific support for the child's safety and inclusion (e.g., severe allergies, asthma, diabetes, epilepsy). The school will use a robust risk assessment process to determine if a plan is needed.

##### **4.2 Development and Review**

- The Headteacher (or delegated staff member) will invite the parents and the child (where appropriate) to contribute to the IHCP. DfE Template G may be used for this invitation.
- The school will seek assistance from relevant healthcare professionals (e.g., School Nurse, GP, Paediatrician) to inform the plan.
- The IHCP will clearly outline:
  - The medical condition and its symptoms.
  - What constitutes an emergency and the action to be taken (including contact details).
  - The dose, frequency, and side effects of any required medication.
  - Any specific support, dietary requirements, or environmental adaptations needed.
- IHCPs will be formally reviewed at least annually, or sooner if the child's condition changes or following a significant medical event.

##### **4.3 Promoting Independence and Voice**

Where appropriate and agreed within the IHCP, the school will actively support the pupil in developing

the skills and language to self-manage their condition and communicate their needs, thereby fostering their confidence and independence in a safe and monitored way.

## 5. Administering Medication

### 5.1 General Principles

- Prescription medication will only be administered to a child with written consent from the parents and the prescribing doctor. DfE Template B (Parental Agreement) and Template C/D (Record of Medicine Administered) will be used for logging all administrations.
- Non-prescription medicine (e.g., pain relief) will generally not be administered by school staff, except where specified in an IHCP (e.g., long-term pain management) or in exceptional circumstances with specific parental instructions.
- All medication must be stored safely and securely.

### 5.2 Storage

- Medication must be clearly labelled, in its original container, and delivered to the school by the parent/carer.
- Inhalers, adrenaline auto-injectors (AAIs), and other emergency medications will be kept in an easily accessible, unlocked location (such as the main office or a central medical room) unless the IHCP states the child will self-carry.
- A commitment is made not to prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary, provided they are competent to do so.

## 6. Day Trips, Residential, and Sporting Activities

The school is committed to ensuring that pupils with medical conditions can participate fully in all school activities, including day trips and residential.

- **Risk Assessment:** Planning for off-site visits will include a specific risk assessment for pupils with medical conditions, well in advance of the trip.
- **IHCP Review:** For residential, the pupil's IHCP will be reviewed with parents to ensure arrangements for the extended period are clearly documented and agreed upon.
- **Staffing:** Staff accompanying the trip will be trained and fully briefed on the specific medical needs and emergency protocols for all relevant pupils. There will be sufficient trained staff to cover planned activities, including night-time needs for residential.
- **Emergency Supplies:** Appropriate medication, supplies, and communications equipment will be readily accessible during the trip.
- **Inclusion:** We will not prevent children from participating in school trips, e.g., by requiring parents to accompany the child, unless this is the only feasible way to ensure the child's safety and is agreed upon in advance.

## 7. Commitment to Good Practice and Inclusion

Send CofE Primary School is committed to fostering an inclusive environment. In line with the principles of effective support, staff should use their discretion and judge each case on its merits with reference to the child's Individual Healthcare Plan (IHCP).

The following practices are explicitly deemed **unacceptable** by this school policy, and staff are prohibited from carrying them out:

It is not acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or 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 individual healthcare plans;
- if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise children 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 child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs; or
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

## **8. Emergency Procedures and Training**

### **8.1 Emergency Response**

A clear emergency protocol will be documented in every IHCP, specifying:

- Symptoms of a medical emergency for the individual child.
- Immediate action required by staff (e.g., administration of emergency medication).
- Who to contact (parents, emergency services).
- The school will use DfE Template F (Contacting Emergency Services) as a guide for all emergencies.

### **8.2 Training**

The Headteacher is responsible for ensuring that all staff who volunteer or are required to support pupils with medical conditions receive adequate and up-to-date training. Training will be specific to the condition and the child, provided by a healthcare professional, and recorded using DfE Template E (Staff Training Record).

## **9. Confidentiality and Record Keeping**

All records, including IHCPs, parental consent forms, and medicine administration logs, will be kept securely and confidentially. Information will only be shared with staff on a need-to-know basis to ensure the child's safety and support.