



**SUPPORTING PUPILS WITH MEDICAL CONDITIONS
& ADMINISTERING MEDICATION POLICY
OCTOBER 2026**

Policy Date: October 2026

Review Cycle: Annually

Responsible Body: Trust Board

Policy under review ahead of Trust Board meeting on 22.10.26

Version Control

Review Date	Updates
V1 October 2025	
V2 October 2026	

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Aims

This policy aims to ensure that:

- Pupils, staff and parents/carers understand how our Trust 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 will implement this policy by:

- Making sure sufficient staff are suitably trained where appropriate
- Making staff aware of pupils' conditions, where appropriate
- Ensuring someone is always available to support pupils with medical conditions
- Developing and monitoring individual healthcare plans (IHPs)

Legislation

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 (DfE)'s statutory guidance on [supporting pupils with medical conditions at school](#). This policy also complies with our funding agreement and articles of association.

Roles and responsibilities

School nurses and other healthcare professionals	• notify the school when a pupil has been identified as having a medical condition that will require support in school, 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's nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.
The Headteacher/Head of School	• Ensure staff are aware of this policy and understand their role in its implementation

	• Availability of staff training to implement this policy and deliver against individual healthcare plans (IHPs) • The development of IHPs • Ensure systems are in place for obtaining information about a child's medical needs and that this information is reviewed and updated where necessary
Staff	• 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. • Teachers will take into account the needs of pupils with medical conditions that they teach and respond accordingly when they become aware that a pupil with a medical condition needs support
Pupils	• Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be 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.
Parents/Carers	• 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 • 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.

Equal opportunities

Our Trust 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 Trust 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/carers and any relevant healthcare professionals will be consulted.

Being notified that a child has a medical condition

When the Trust 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 Trust school will make every effort to ensure that arrangements are put into place within a reasonable timeframe, or by the beginning of the relevant term for pupils who are new to the school.

See Appendix 1.

Individual healthcare plans (IHPs)

The Headteacher/Head of School has overall responsibility for the development of IHPs for pupils with medical conditions in conjunction with other senior leaders. Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed. Plans will be developed with the pupil's best interests in mind and will set out what needs to be done, when and 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 no consensus, the Headteacher/Head of School will make the final decision.

Plans will be drawn up in partnership with the school, parents/carers and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise 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 special educational needs (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 governance committee and the Headteacher/Head of School/ leader with responsibility 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 Headteacher/Head of School 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 and contingency arrangements

Managing medicines

Prescription and non-prescription medicines will only be administered at a Trust 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 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. 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

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. 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. Schools will have spare inhaler devices for use in case of emergencies.

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

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

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, 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.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Headteacher/Head of School. Training will be kept up to date. Training will ensure that staff are competent and have confidence in their ability to support the pupils, fulfil the requirements in the IHPs and 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

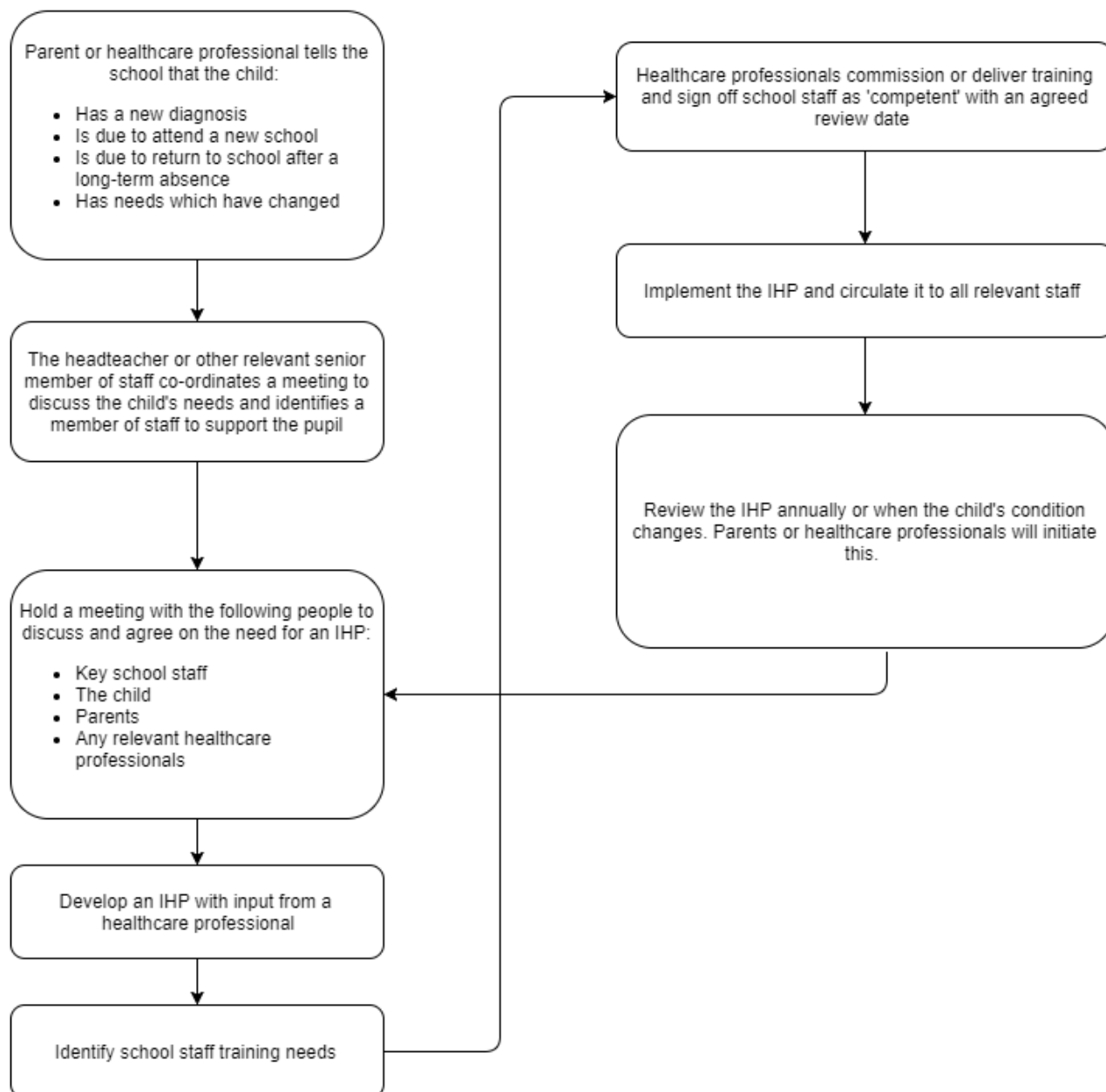
The governance committee will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parents/carers will be informed if their pupil has been unwell at school. IHPs are kept in a readily accessible place that all staff are aware of.

Liability and indemnity

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

This policy will be published on the Trust and each academy's website, and a paper copy will be made available to parents and carers on request, to ensure it is readily accessible in line with statutory requirements.

Appendix 1: Notification a child has a medical condition



Appendix 2: Individual Healthcare Plan

Pupil's name:	
Group/class/form:	
Date of birth:	
Pupil's address:	
Medical diagnosis or condition:	
Date:	
Review Date:	
Family Contact Information	
Name:	
Relationship to pupil:	
Phone number (work):	
Phone number (home):	
Phone number (mobile):	
Clinic/Hospital Contact Information	
Name	
Phone number :	

Child's GP	
Name:	
Phone number:	
Who is responsible for providing support in school?	
Pupil's medical needs and details of symptoms, signs, triggers, treatments, facilities, equipment or devices, environmental issues, etc.:	
Daily care requirements:	
Specific support for the pupil's educational, social and emotional needs:	
Arrangements for school visits and trips:	

Other information:
Describe what constitutes an emergency, and the action to take if this occurs:
Responsible person in an emergency (state if different for off-site activities):
Plan developed with:
Staff training needed or undertaken – who, what, when:
Form copied to:

Appendix 3: Parental Agreement for the School to Administer Medicine

The school will not give your child medicine unless you complete and sign this form.

Administration of medication form	
Date for review to be initiated by:	
Name of child:	
Date of birth:	
Group/class/form:	
Medical condition or illness:	
Medicine	
Name and/or type of medicine (as described on the container):	
Expiry date:	
Dosage and method:	
Timing:	
Special precautions and/or other instructions:	
Any side effects that the school needs to know about:	
Self-administration – Yes/No:	
Procedures to take in an emergency:	

NB: Medicines must be in the original container as dispensed by the pharmacy – the only exception to this is insulin, which may be available in an insulin pen or pump rather than its original container.



Contact Details	
Name:	
Daytime telephone number:	
Relationship to child:	
Address:	
I will personally deliver the medicine to:	Name and position of staff member
The above information is, to the best of my knowledge, accurate at the time of writing and I give consent for school staff to administer medicine in accordance with the relevant policies. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication, or if the medicine is stopped.	
Signature:	
Date:	