



SUPPORTING CHILDREN / YOUNG PEOPLE WITH MEDICAL CONDITIONS POLICY

TO BE USED IN CONJUNCTION WITH
PG505 - Supporting pupils with Medical Conditions in
School / DfE document "Supporting pupils at school with
medical conditions"

Last reviewed: January 2025

To be reviewed: January 2026

Written by: LCC, SLT and Office

Ratified by the Governors on: January 2025

This policy is written to support those children and young people with individual medical conditions and outlines how their conditions will be met at **Greenside Primary School**.

This policy and the supporting guidance PG505 - Supporting Children / young persons with Medical Conditions in School / DfE document “Supporting children / young persons at school with medical conditions” should be read together and aim to ensure that:

1. Children / young people, staff and parents / carers understand how our school will support children / young people with medical conditions.
2. The whole school environment is inclusive and favourable to children and young people with medical conditions. This includes the physical environment, as well as social, sporting, and educational activities.
3. Our staff are trained in the impact medical conditions can have on children and young people in order to be safe, welcoming, and supportive of children and young people with medical conditions.
4. Our school understands that children and young people with the same medical condition will not necessarily have the same needs.
5. Our staff understand their duty of care to children and young people with medical conditions and know what to do in the event of an emergency.

2. Policy Statement

We are an inclusive community that welcomes and supports children and young people with medical conditions. We provide all children and young people with equal opportunities in our school.

This policy and supporting guidance PG505 - Supporting Children / young persons with Medical Conditions in School / DfE document “ Supporting children / young persons at school with medical conditions” / 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 children and young peoples at their school with medical conditions. It is also based on the Department for Education’s statutory guidance on [supporting children / young persons with medical conditions at school](#).

This policy and supporting guidance PG505 - Supporting Children / young persons with Medical Conditions in School / DfE document “Supporting children / young persons at school with medical conditions” describe the essential criteria for how we will meet the needs of children and young people with short, long-term and / or complex medical conditions, including diabetes and asthma. No child or young person will be denied admission or prevented from taking up a place in this school because arrangements for their medical condition have not been made. However, in line with our safeguarding duties, we must ensure that children / young person’s health is not put at unnecessary risk from, for example, infectious diseases. There may be times we cannot accept a child / young person in school where it would be seriously detrimental to the health of that child / young person or others to do so.

All relevant staff understand the medical conditions that affect children and young people at our school. We also make sure all our staff understand their duty of care to children and young people in the event of them requiring medical intervention. We accept responsibility for members of staff who give or supervise children and young people with the taking of medication / medical procedures during the school day.

The named member of our staff responsible for this medical conditions policy and its implementation is Mrs Sarah Fuller, Headteacher.

3. Roles and Responsibilities.

3.1 Our Governing Body.

Our governing body has ultimate responsibility to make arrangements to support children and young people with medical conditions. Our governing body will also ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

They will do this by:

- Regular reviews of the medical conditions and provision of support in school,
- Reporting by the school to Governing body meetings.

3.2 Our Headteacher

Our headteacher will:

- make sure all staff are aware of this policy and supporting guidance in PG505 - Supporting Children / young persons with Medical Conditions in School / DfE document "Supporting children / young persons at school with medical conditions" 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 (IHCPs), 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 and monitoring of IHCPs,
- contact the school nursing service in the case of any children and young people who have 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 information about a child's medical conditions and that this information is kept up to date,
- ensure that supply and peripatetic staff are made aware of relevant information to support children with medical conditions.

3.3 Our Staff.

Supporting children and young peoples 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 children and young people with medical conditions, although they will not be required to do so unless this is specifically part of their role in school. This includes the administration of medicines.

Our staff will take into account the conditions of children and young people with medical conditions that they teach. All staff will know what to do and how to respond accordingly when they become aware that a child or young person with a medical need requires help.

Our school staff are responsible for:

- following the procedures outlined in this policy and supporting guidance document PG505 - Supporting Children / young persons with Medical Conditions in School / DfE document "Supporting children / young persons at school with medical conditions",
- retaining confidentiality within policy guidelines,
- contacting parents / carers and/or emergency services when necessary and without delay,
- if they have children or young persons with medical conditions in their class or group; understanding the nature of the conditions in order to adequately support them. This information will be provided to them.

The headteacher has overall responsibility for the development of IHCPs for children / young persons with medical conditions. The day to day management, production and oversight of IHCPs has been delegated to Mrs Emily Hair, SENCo.

3.4 Our Parents / Carers.

We expect that our parents / carers:

- will provide the school with sufficient and up-to-date information about their child / young persons medical conditions,
- will be involved in the development and review of their child / young persons IHCP and may be involved in its drafting,
- will carry out any action they have agreed to as part of the implementation of the IHCP, e.g. provide medicines and equipment.
- are responsible for making sure their child / young person is well enough to attend school. Parents / carers should keep children / young people at home when they are acutely unwell.
- will provide medicines and equipment in line with this policy and supporting guidance in PG505 - Supporting Children / young persons with Medical Conditions in School / DfE document “Supporting children / young persons at school with medical conditions” e.g. in original labelled containers, in date and sufficient for the child / young person’s conditions,
- will provide up to date contact information and ensure that they or another responsible adult are contactable at all times for if their child / young person becomes unwell at school,
- will only request medicine or medical procedures to be administered at school when it would be detrimental to their child / young person’s health or school attendance not to do so,
- will provide written agreement before any medicines can be administered to their child / young person,

If an IHCP is required for their child / young person, it is expected that our parents / carers will work with our school and healthcare professionals to develop and agree it.

3.5 Our Children and Young People.

Children and young people with medical conditions will often be best placed to provide information about how their condition affects them. Our children and young people will be involved as far as possible in discussions about their medical support needs and contribute as much as possible to the development of their IHCPs. They are also expected to comply with their IHCPs.

3.6 School Nurses and Other Healthcare Professionals.

We will work with our Local Health Authority School Health Service and Nursing Team to support the medical needs of children and young persons in our school. This may include assistance with supporting medical conditions, assistance with IHCPs, and assistance with supplementing information provided by the child’s or young person’s parents / carers or GP. We will also seek their advice for where specialist local health teams can be contacted for particular conditions e.g. asthma, diabetes, epilepsy etc.

The School Health Service and Nursing Team are also the main contacts for advice on training for staff to administer medication or take responsibility for other aspects of support.

The School Health Service and Nursing Team will notify our school when a child or young person has been identified as having a medical condition that will require support in school. This will be before the child or young person starts our school, wherever possible. They may also support staff to implement a child’s IHCP.

Healthcare professionals, such as GPs and paediatricians, will liaise with the School Health Service and Nursing Team and notify them of any children and young people identified as having a medical condition. They may also provide us advice on developing IHCPs.

Should a medical condition prevent a child from attending school for 15 or more days, we will make a referral to the Leeds CC Medical Needs Teaching Service (referral forms can be accessed on www.mntsleeds.org and emailed to the email address on the form).

4. Storage, administration and management of medications.

4.1 Provision of medication.

We will allow essential medications to be brought to school if they cannot be taken at home and it would be detrimental to a child or young person's health if a dose was not administered during the 'school day'.

Wherever possible, parents / carers are advised to request that any prescription is such that the child / young person does not need to take any medication whilst at school e.g. a dose-frequency of 3 times per day rather than 4 times per day dose.

We will only accept medication in its original container and with the prescriber's instructions for administration if the medication is prescribed.

We will allow non-prescription medication to be provided if it is essential (as above) and needs to be taken during the school day. We will follow the same procedures for all medication.

4.2 Administration of medication.

We will administer medication / medical procedures or supervise the self-administration of medication / medical procedures only where there is specific prior written permission from the parents / carers. Such written consent will need to state the name of the medicine, the dose to be taken and the time to be taken, along with full details of the medical procedure, if necessary.

We will follow the detailed guidance in PG505 - Supporting Children / young persons with Medical Conditions in School / DfE document "Supporting children / young persons at school with medical conditions" regarding administration of medication / medical procedures including disposal of out of date medication, record keeping and training for staff.

- No pupil under 16 should be given prescription or non-prescription medicines without their parent's/carer's written consent.
- No child or young person under the age of 16 will be given aspirin.
- Parents must sign a consent form (short or long term) and all medicines should be handed in and collected from the main school office by a parent/carer or other childcare provider.
- Parent/carers have the responsibility for ensuring that any utensils for measuring correct dosage are provided when signing over the medicine.
- Medicine should always be an adult-to-adult transaction from the school office. Medicine must never be given to a child to take home (in the case of other childcare providers, the medicine must be collected from the school office by the childcare provider).
- Office staff will alert class-based staff to any medicines via an email, which clearly states the name of the child, name of medicine, dosage and time period. Medicine will then be administered to the child at appropriate points by a member of staff who has been fully trained to administer medication.
- Inhalers will be kept in an accessible place in the school and should be taken out for PE and on all outings. Spare inhalers and spacers are kept in a labelled container in the medical room.
- Epi-pens will be kept in an accessible place in the school, usually securely stored in the child's classroom, and should be taken out for PE and on all outings.
- Should a short-term medicine (such as an antibiotic) require refrigeration, it will be placed in the medicine chiller in the medical room.

- Trips and Residential – all relevant paperwork will be completed and taken on the school trip/residential. All medication will be taken and stored appropriately. Medication will be administered and recorded by a qualified member of staff.

All relevant staff understand the medical conditions that affect pupils at our school. We also make sure all our staff understand their duty of care to children and young people in the event of them requiring medical intervention.

Only staff qualified to administer medication may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they are not obliged to do so.

4.3 Self-Management.

We will allow and encourage children and young people who are competent to do so, to manage their own medication. This will be based on discussions with the child / young person and their parents / carers. Specific written consent from parents / carers will still be required. Where necessary we will supervise the child or young person whilst they are taking it.

Our school allows the following medication / medical equipment to be carried by our children and young people where it is deemed they are competent, and it is safe to do so:

- Asthma inhalers,
- Auto Injection devices,
- Diabetes devices / insulin,
- Other medication may be requested and will be considered on a case by case basis.

4.4 Refusal to Take Medicine.

We will not force a child or young person to take medication / undergo a medical procedure should they refuse.

If information provided by the parent / carer and/or GP suggests that the child or young person is at great risk due to refusal we will contact parents / carers immediately and may also seek medical advice and/or emergency services support.

Where the information provided indicates that they will not be at great risk, but parents / carers have informed us that the medication / medical procedure is required we will contact the parent / carer as soon as possible.

4.5 Storage of Medication / Medical Devices.

We will store, manage, and dispose of out of date medication and medical devices in line with the detailed guidance in PG505 - Supporting Children / young persons with Medical Conditions in School / DfE document "Supporting children / young persons at school with medical conditions".

We will ensure that any medication required critically in the case of an emergency e.g. asthma inhalers , Adrenaline Auto Injectors (AAI), insulin, is always readily available wherever the child or young person is on our school premises or off site on school visits / activities.

We will keep a supply of emergency asthma inhalers in school.

4.6 Emergency Situations.

Our staff will follow our school's normal emergency procedures (for example, calling 999). All children / young person's IHCPs will clearly set out what constitutes an emergency and will explain what to do.

If a child or young person needs to be taken to hospital, our staff will stay with them until the parent / carer (or designated adult) arrives, or accompany a child / young person taken to hospital by ambulance and stay with them until the parent / carer (or designated adult) arrives.

5. IHCPs and Individual Children and young people Risk Assessments (IPRAs).

We will follow the detailed guidance in PG505 - Supporting Children / young persons with Medical Conditions in School / DfE document "Supporting children / young persons at school with medical conditions" regarding both the development and monitoring of IHCPs and when an IPRA may be required.

We will review IHCPs at least annually, or earlier if evidence is presented that the child / young person's needs have changed.

5.1 Being Notified that a Child has a Medical Condition.

When our school is notified that a child / young person has a medical condition, the process outlined below will be followed to decide whether the child / young person requires an IHCP.

Our 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 children / young persons who are new to our school.

When notification of a child with a medical condition is received, our school will:

- Gather all the required information by providing parents / carers with the appropriate form and having follow-up conversations where necessary.
- Where possible, make appropriate arrangements for staff to administer any medication or medical procedures and to receive whatever training is necessary.
- Where required, instigate an IHCP.

6. School trips, off site activities and sporting activities.

We will follow the detailed guidance in PG505 - Supporting Children / young persons with Medical Conditions in School / DfE document "Supporting children / young persons at school with medical conditions" regarding school trips, off site activities and sporting activities and ensure that any medical conditions are included in the specific risk assessments for those activities.

All relevant paperwork will be completed and taken on the school trip/residential. All medication will be taken and stored appropriately. Medication will be administered and recorded by a qualified member of staff. If there are complications with the medication during the trip/residential a member of SMT and parent/carer will be contacted.

Once back in school, all paperwork will be returned to the appropriate place in the Medical Room. If medication is held in school for the child, this will be returned to the first aid room and stored appropriately. If the medication has been signed in from home, it will be returned to the parent/carer. If a child walks home alone the parent carer will need to give written confirmation that they consent for their child to take their medication home.

7. Unacceptable practice

Our school staff will use their discretion and judge each case individually with reference to the child / young person's IHCP, but it is generally not acceptable to:

- Prevent children / young persons from easily accessing their inhalers, medication or administering their medication when and where necessary.
- Assume that every child / young person with the same condition requires the same treatment.
- Ignore the views of the child / young person or their parents / carers.
- Ignore medical evidence or opinion (although this may be challenged).

- Send children / young persons 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.
- If the child / young person becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable.
- Penalise children / young persons for their attendance record if their absences are related to their medical condition, e.g. hospital appointments.
- Prevent children / young persons 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 child / young person, including with toileting issues. No parent / carer should have to give up working because the school is failing to support their child / young person's medical needs.
- Prevent children / young persons from participating, or create unnecessary barriers to children / young persons participating, in any aspect of school life, including school trips.
- Administer, or ask children / young persons to administer, medicine in school toilets.

8. Complaints.

If our parents / carers or children / young people have any issues with the support provided they should initially contact Mrs Sarah Fuller, Headteacher, to discuss their concerns. If, for whatever reason, this does not resolve the issue, they may make a formal complaint via the school's complaints procedure which is published on our schools' website.

9. Review.

This policy will be reviewed and approved by our governing body at least annually.

Appendix 1a Individual Healthcare Plan (IHCP)



Template A: Individual Health Care Plan (IHCP)

Members of the Leeds Children’s Hospital, Youth Forum would like a link member of staff they trust and feel comfortable sharing sensitive information with, who understands their condition/s and needs.

Signatures

- * Where possible the child/person should have the opportunity to have their voice heard in producing their IHCP. Therefore we have included an option for their signature.*
- * If the specialist nurse/health representative has attached additional medical information, it is not necessary for them to sign the IHCP.*

You and your child/young person's school should agree how often the healthcare plan will be reviewed. It's advised that this happens at least once a year, but it may need to happen more frequently if your child'/young person’s condition is unstable or their medication changes, for example.

Name of school/setting

Child’s name

Group/class/form

Date of birth

Child’s address

Medical diagnosis or condition

Date

Review date

Family Contact Information

Name

Relationship to child

(home)

(mobile)

me

Who is responsible for providing support in school	

Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Clinic/Hospital Contact	
Name	
Phone no.	
G.P.	
Name	
Address	
Phone no.	

Who needs to know about the child's condition	
Name of staff member	Confirm been informed

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

--

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

--

Specific support for the pupil's educational, social and emotional needs

--

Impact of Learning / behaviour / classroom performance

--

Adjustments required for classroom environment/additional provision/special consideration

--

Daily care requirements

--

Arrangements for school visits/trips etc

--

Other information

--

--

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (<i>state if different for off-site activities</i>)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

Staff signature _____
Signature of parent _____
*Signature of child / young person _____
*Signature of health representative _____

Appendix 1b Letter Inviting Parent/Carer to Contribute to IHCP



Headteacher: Mrs Sarah Fuller
Deputy Head: Mr Dale Lockwood
Greenside Primary School
Chapelton
Pudsey
Leeds
LS28 8NZ
Tel: 0113 257 4509
Email: admin.info@greenside-sch.org

Date

Dear Parent/Carer

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely

Appendix 2 Medication Consent Form



Medication Consent Form

Medication should only be administered during school hours when it is necessary and the medication cannot be given before/after school.

Pupil's Full Name:
Date of Birth:
Class Name:

Name/strength of medication:
Dose (e.g. 5ml):
Frequency (e.g. four times a day):
Route (e.g. mouth, ear):
Reason for medication:
Start date of medication:
Time to be taken in school:

I consent for a member of staff to administer my child's medication. Yes <input type="radio"/> No <input type="radio"/>
I will drop my child's medication at the school office each morning and collect at the end of the school day. Yes <input type="radio"/> No <input type="radio"/>
I will provide medication to be stored and kept at school. Yes <input type="radio"/> No <input type="radio"/>

Name of parent/carer:
Relationship to child:
Emergency contact number:
Signed:
Date:

Name of staff:
Signed:
Date:

Appendix 3 Medication Administration Record (MAR Chart)



Medication Administration Record (MAR Chart)

This is a legal document and should be completed accurately in black ink.

Pupil's Full Name:
Date of Birth:
Class Name:

Name/strength of medication:
Dose (e.g. 5ml):
Frequency (e.g. four times a day):
Route (e.g. mouth, ear):
Reason for medication:
Start date of medication:
Time to be taken in school:

Staff name:	Staff Signature:	Date:
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Date:	Date:
Time:	Time:
Dose:	Dose:
Any issues:	Any issues:
Staff name:	Staff name:
Staff signature:	Staff signature:

Date:	Date:
Time:	Time:
Dose:	Dose:
Any issues:	Any issues:
Staff name:	Staff name:
Staff signature:	Staff signature:

Date:	Date:
Time:	Time:
Dose:	Dose:
Any issues:	Any issues:
Staff name:	Staff name:
Staff signature:	Staff signature:

Staff Training Record – Administration of Medicines

Name of school/setting	Pudsey Greenside Primary School
Type of training received	Administering Medication in Schools
Training provided by	CPD Online

The following members of staff have received the training detailed above.

Title	Forename	Surname	Date Trained
Mrs	Sophia	Ali	December 2023
Mrs	Habiba	Begum	December 2023
Mr	Jonathan	Bramley	December 2023
Miss	Julia	Brooks	December 2023
Miss	Laura	Brown	December 2023
Miss	Lucy	Carritt	December 2023
Mrs	Rebecca	Clark	December 2023
Mrs	Charlotte	Crossland	December 2023
Miss	Stacey	Elsworth	December 2023
Mrs	Seema	Fox	December 2023
Mrs	Sarah	Fuller	December 2023
Miss	Sophie	Green	December 2023
Mrs	Johana	Haigh Del Rio	December 2023
Mrs	Emily	Hair	December 2023
Miss	Gemma	Hardaker	January 2024
Mrs	Judith	Hogg	December 2023
Miss	Amy	Johnston	December 2023
Mr	Muhammad	Khan	December 2023
Mrs	Laura	Knowles	December 2023 (Medication and First Aid Lead)
Mrs	Maxine	Lonergan	December 2023
Miss	Phoebe	Morris	December 2023
Miss	Johanna	Nicholas	December 2023
Mrs	Minal	Patel	December 2023
Miss	Millie	Patterson	December 2023
Mrs	Kimberley	Percival	December 2023
Mr	Martin	Phillips	December 2023
Mrs	Kerrie	Pollitt	December 2023
Mrs	Kristia	Randall	December 2023
Mrs	Paula	Ridsdale	December 2023
Mrs	Rachel	Scott	December 2023
Mrs	Sarah	Shoesmith	December 2023
Mrs	Natalie	Smith	January 2024
Mrs	Emma	Waite	December 2023
Miss	Caroline	Walker	December 2023
Miss	Natasha	Ward	December 2023
Miss	Rebecca	Winkley	December 2023

Contacting Emergency Services

Dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

1. your telephone number 0113 257 4509
2. your name (name of person contacting 999)
3. your location (Greenside Primary School, Chapeltown, Pudsey, LS28 8NZ)
4. provide the exact location of the patient within the school setting
5. provide the name of the child and a brief description of their symptoms
6. inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
7. Our address and telephone number are displayed next to every phone.