Brooke Primary Academy

Supporting pupils with medical conditions Policy

1	Summary	Supporting Pupils with Medical conditions	
2	Responsible person	Vikki Watson	
3	Accountable SLT member	Vikki Watson	
4	Applies to	☒All staff ☐Support staff ☐Teaching staff	
5	Who has overseen development of this policy	Vikki Watson	
6	Who has been consulted and recommended policy for approval	Governors Staff	
7	Approved by and date	01/09/2026	
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11	Disseminated to	☒Trustees/governors ☒All staff ☐Support staff ☐Teaching staff	
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Purpose and scope

This policy sets out Brooke Primary Academy's approach to supporting pupils with medical conditions so that they can access education safely and fully, in line with the school's vision and values. The policy will be reviewed annually and be available through our website.

Objectives:

- Ensure timely, safe and effective support for pupils with medical conditions.
- Clarify roles and responsibilities of staff, parents/carers, pupils and partner agencies.
- Encourage inclusion and minimise educational disruption due to health needs.
- Comply with legal duties and national best practice.

Legal framework and guidance

This policy conforms to statutory and best-practice guidance including:

- Children and Families Act 2014 (where medical needs intersect with EHCPs and SEND duties)
- Equality Act 2010 (reasonable adjustments for disability)
- Keeping Children Safe in Education (safeguarding and staff training)
- Supporting pupils at school with medical conditions (DfE statutory guidance)
- Arranging education for children who cannot attend school because of health needs (DfE statutory guidance, Dec 2023)

- Working Together to Improve Attendance (DfE)
- Local NHS and Trust policies where relevant (e.g. school nursing, CAMHS)
- Allergy Safety in Schools – Department for Education statutory guidance (July 2026).
- Health and Safety at Work Act and associated guidance on medication handling

School vision and principles

Brooke Primary Academy believes every pupil has the right to a high-quality education and to be supported to achieve their potential regardless of medical condition.
We will work collaboratively, treating parents/carers as partners and involving pupils according to age and maturity.
We will make reasonable adjustments and ensure staff are trained and competent to meet pupils' individual healthcare needs.

Roles and responsibilities

Principal

- Overall responsibility for policy implementation, safety and quality assurance.
- Appoint and publicise the school's named person for medical conditions (see Named Officer below).
- Ensure staff receive necessary training and that risk assessments and individual healthcare plans (IHPs) are in place.
- Ensure that the school has effective arrangements for identifying, assessing and supporting pupils with medical conditions, including regular review of the school's first-aid and medical needs.

Named person for medical conditions – Jade Chowings: Safeguarding and welfare officer

- Act as first point of contact for parents, staff and health professionals.
- Maintain central records of pupils with medical conditions and IHPs.
- Coordinate training, storage arrangements, liaison with the local school nurse service.
- Ensure information is shared appropriately with staff and that confidentiality is maintained.

Class teachers and support staff

- Be aware of pupils in their class with medical conditions and follow IHPs and emergency procedures.
- Support access to learning, with reasonable adjustments as required.
- Communicate concerns to Jade Chowings or Principal.

The following staff are willing to give/supervise the taking of prescribed medication, but all requests to have medicines administered in school must be made through the school office:

- Mrs Jade Chowings (Safeguarding and welfare Officer)
- Mrs Jo Whitfield (Senior Administrative Assistant)
- Mrs Jemma Cuttell (Senior Administrative Assistant)

Identification, Individual Healthcare Plans (IHPs) and consent

Identification: On admission and annually, collect medical information on all pupils. Parents are asked to supply details of long-term or chronic conditions, allergies, medication and emergency contact details.

IHPs: IHPs: An IHP will be developed where it is considered necessary to ensure effective support for a pupil's medical condition. This will usually include pupils with a long-term, complex or potentially life-threatening condition (e.g. diabetes, epilepsy, severe allergies, asthma requiring inhaler management, significant mental health needs) an IHP is developed. IHPs should contain:

- Pupil details, emergency contacts, GP and consultant details
- Description of condition and impact on education
- Daily care requirements and medication (dose, timing, administration method)
- Signs of deterioration and emergency actions
- Who is responsible for each element of care
- Arrangements for school trips, transitions, or out-of-hours care
- Consent for sharing information and for staff to administer medicines
- Review dates and signatures

Review: IHPs will be reviewed at least annually or earlier if condition changes. Parents/carers and relevant healthcare professionals will be involved as appropriate.

Healthcare procedures and administration of medicines

The school will only administer medication when essential to keep a pupil in school (e.g. prescribed medication that must be given during school hours). Written parental consent is required for administration of any prescribed medication.
Only named, trained staff may administer medicines.
Prescription medicines must be in original container, clearly labelled with child's name, dose and expiry date.
Short-term courses (e.g. antibiotics) — school can administer if timing requires and with parental consent.
Over-the-counter medicines: only given if there is written parental consent and a clear reason.
Record-keeping: medicine administration log is completed each time using Medical Tracker.
Medicines will be checked regularly for expiry dates and parents/carers contacted to replace expired or out-of-date medication.
If medication is missed, refused, administered incorrectly or a dose is uncertain, the incident will be recorded and appropriate medical advice will be sought. Parents /carers will be informed where appropriate.
If a pupil refuses medication, staff will not force administration. The incident will be recorded and appropriate medical advice and/or parental support sought where necessary.
Where appropriate, pupils may be supported to self-manage their medication, subject to an assessment of their competence, age, maturity and individual healthcare needs.
Arrangements will be documented in the pupil's IHP where appropriate.

Emergency procedures

- IHPs must include clear emergency signs and steps. All staff should know the location of emergency medication (e.g. epi-pen), who has responsibility and the emergency contacts.
- Emergency medication must be readily accessible at all times and must accompany the pupil on educational visits and activities away from their usual classroom. Staff responsible for the pupil must know where emergency medication is stored and how to access it.

In medical emergencies:

- Immediately call emergency services (999). Inform the Principal and Jade Chowings.
- Send a staff member with the child's details and medication to the ambulance.

- Contact parents/carers as soon as possible.
- Record the incident and review procedures after the event.

Supporting attendance and access to education

Where a pupil cannot attend school because of their health needs, the school will work with the local authority, parents/carers, healthcare professionals and other relevant services to ensure that suitable education is arranged in accordance with statutory requirements.
The school will support reintegration when the pupil is medically able to return.
For pupils absent for health reasons (short-term or long-term), the school will:

- Maintain contact through welfare calls and home visits as per the attendance policy.
- Use IHPs, phased returns and reasonable adaptations to support return.
- Liaise with the hospital education teams for prolonged absence
- Ensure pupils with medical needs are included in curriculum planning.

Attendance monitoring: The school will flag pupils with repeated health-related absence and work with parents and relevant services.

Training and competence

Training needs will be assessed for staff with responsibilities for pupils with medical needs (including first aiders, staff supporting injection/epipen/diabetes care).
Training types:

- Basic first aid (statutory requirement)
- Condition-specific clinical training by health professionals (e.g. insulin administration, seizure management)
- Awareness training for all staff to understand common conditions and how to respond
- Training records and competency checks will be maintained by the named person.
- The school will ensure that sufficient trained staff are available to provide cover during staff absence, breaks, lunchtimes and educational visits.
- Staff must not undertake clinical procedures or administer medication for which they have not received appropriate training. Training will be refreshed at intervals recommended by the relevant healthcare professional or training provider, and sooner where a pupil's needs change.

Record-keeping, confidentiality and information sharing

All IHPs, medicine administration records and incident logs will be retained securely in line with data protection law (UK GDPR).
Share information only on a need-to-know basis to safeguard pupil welfare and support education provision.
First aid incidents and relevant medical incidents will be recorded using Medical Tracker in accordance with the First Aid Policy. Medication administration records will be maintained using the school's approved recording system.
Parental consent must be obtained for sharing clinical information beyond required staff, but urgent safeguarding overrides consent in emergencies.
Retain records for agreed period as per school or trust retention schedule.

Safe storage and disposal of medicines and equipment

Safe, labelled storage: medicines in a locked cabinet (refrigerated where needed) with access protocols.

Emergency meds (e.g. epi-pens, inhalers) may be kept in a secure but accessible location in the classroom or with the pupil; staff must know locations.
Sharps and clinical waste disposed of in appropriate containers and collected via approved contractor or NHS community arrangements.
Controlled drugs must be stored securely and audited regularly.

Infection control and healthcare needs in school settings

- Staff should follow standard infection control guidance and local NHS advice for communicable illnesses.
- Exclusion periods for infectious diseases to follow public health guidance and school nurse advice.
- Safe handling protocols for bodily fluids and personal care (including intimate care) must be followed with appropriate PPE.

Staff will follow appropriate hand hygiene procedures and use suitable PPE when providing personal care or handling bodily fluids. Where a pupil requires intimate or personal care, the school's Intimate Care Policy will also apply.

Hospital education and long-term absence (health-related)

- When a pupil is admitted to hospital or absent long-term, the named person will:
- Liaise with hospital teaching staff, the LA named officer and the pupil's home school (if different).
- Work with the local authority, hospital education service and relevant professionals to ensure appropriate education provision and support continuity of learning.
- Support reintegration planning and phased return, coordinating with CAMHS, therapists and other professionals.
- Maintain regular contact with parents and the pupil to reduce isolation and support learning.

Inclusion, SEND and reasonable adjustments

- Liaise with the SENDCO for pupils with SEND or EHCPs. Ensure that health needs identified in EHCPs are reflected in provision.
- Reasonable adjustments include adapted timetables, rest areas, access to lifts, sensory considerations and exam arrangements.
- For pupils in the SEMH unit, ensure integration of medical support with therapeutic and behavioural approaches.
- Medical conditions must not automatically prevent a pupil from participating in educational visits or activities. Reasonable adjustments and appropriate risk management will be considered to enable participation wherever reasonably practicable.

Risk assessment, trips and off-site activities

- Prior to off-site activities the organiser must:
- Check IHPs, medicines and emergency arrangements for participants.
- Complete an activity-specific risk assessment that includes medical risks.
- Ensure staff on trips are aware of actions to take and have access to necessary medicines and records.
- Residential trips: additional planning to ensure staffing, storage, training and emergency access.

Monitoring, review and quality assurance

The named person, Principal and governors will:

- Monitor implementation and effectiveness of the policy annually.
- Audit IHPs, training records and medicine administration logs.
- Report findings to governors and use them to update the policy and procedures.
- Monitor / review serious incidents, near misses, medication errors and allergy incidents to identify learning and improve practice.

Local links and multi-agency working

- Allergy-specific arrangements will be managed in conjunction with the school's Allergy and Anaphylaxis Policy and relevant healthcare professionals.
- Maintain engagement with local authority named officer for health-related absence, community nursing, CAMHS, educational psychologists and hospital teaching services.
- Service level agreements or multi-agency meetings should be used where appropriate to co-ordinate care.