

SUPPORTING PUPILS WITH MEDICAL CONDITIONS

This Policy was ratified by the GLC Board	Autumn 2025
This policy will be reviewed on	Autumn 2026

GLC Mission Statement

The GLC's mission is to develop active and thriving citizens within a diverse, truly fair and equal community.

This will be achieved through:

- High quality teaching that deliberately develops competencies of curiosity, creativity, communication and critical-thinking;
- An inspiring and meaningful curriculum;
- The development of productive relationships by instilling the values of compassion, resilience, responsibility and aspiration to prepare our young people for learning and life;
- A commitment to the wellbeing of our staff;
- A culture of professional generosity, collaboration, challenge and support throughout the GLC;
- The development of effective external partnerships for the benefit and wellbeing of our community.

Equalities Statement

The GLC's commitment to equality is enshrined in our mission statement to develop 'active and thriving citizens within a diverse, truly fair and equal community'.

We are a vibrant, innovative and successful organisation: we work hard to be the place of choice to work and to learn. Across the 5 academies of the GLC, we pledge that everyone enjoys an equality of opportunity. We work tirelessly to ensure that individual characteristics including age, ethnicity, socio-economic background, academic ability, disability, gender, religious beliefs, sexual orientation are not discriminated against in any way. We create inclusive environments characterised by mutual respect where difference is celebrated.

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Supporting Pupils with Medical Conditions Policy

1. 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 where possible.

2. Legislation and statutory responsibilities

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on the board of trustees to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education's [DfE] statutory guidance: [Supporting pupils at school with medical conditions](#).

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

3. Roles and responsibilities

3.1 The Board of Directors

The board of directors has ultimate responsibility to make sure there are arrangements to support pupils with medical conditions across the trust. Although the trust directors have certain duties to different levels as outlined below, the board is still accountable for making sure the trust is compliant with the requirements in the above legislation and guidance.

The board will also determine and approve this policy.

Governors on the Health and Safety committee will:

- Help to decide what information should be recorded on individual care plan
- Monitor that there is a sufficient number of trained staff available in their school
- Monitor that records of children's medical needs and medicines that have been administered are kept up to date
- Review how well this policy is locally applied and make recommendations to the board of trustees as necessary
- Support and challenge the Head of School to make sure that all children with medical conditions are supported to ensure their fullest participation in all aspects of school life

3.2 CEO

The CEO will:

- Oversee and support the Head of School and/ or governors of each school in carrying out their duties.
- Highlight any issues found across the trust to the board of directors.

3.3 The Head of School

The Head of School is responsible for the implementation of this policy, including:

- Delegating the day-to-day responsibilities contained within this policy to appropriately trained staff;
- Making sure all staff are aware of this policy and understand their role in its implementation;

- Ensuring that there is a sufficient number of trained staff available to implement this policy and deliver against all care plans, including in contingency and emergency situations.

Delegated responsibilities:

- Co-ordinate and attend meetings to discuss and agree on the need for care plans;
- Take overall responsibility for the development of care plans;
- Contact the school nursing 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 nurse;
- Make sure systems are in place for obtaining information about a child's medical needs and that this information is kept up to date;
- Make sure cover arrangements are made in the case of staff absence, and that supply teachers are briefed.

3.5 All Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person.

The Department for Education states that:

Any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so.

Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help:

- Ensuring they know which pupils have specific medical conditions;
- Follow procedures as stated in this policy and care plans,, including medication or observation recording sheets;
- Ensuring they know who the delegated staff in school are for recording and updating care plans;
- Informing the Head of School, the SSM or their line manager of any specific health conditions.

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.

3.6 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 care plan and may be involved in its drafting;
- Carry out any action they have agreed to as part of the implementation of the care plan,, e.g. provide medicines and equipment.

3.7 Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them.

Where appropriate, pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their care plans. They are also expected to comply with their care plans.

3.8 Healthcare services

Healthcare professionals have a duty to notify the relevant 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. They may also support staff to implement a child's care plan.

Healthcare professionals, such as GPs and paediatricians, will liaise with our school nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing care plans.

4. Equal opportunities

Our trust is clear about the need to actively support pupils with medical conditions to attend school, participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The trust and the individual school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely in all educational opportunities, including regular school attendance, 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. The risk assessment forms part of the care plan; additional, individual risk assessments will be carried out for specific tasks or visits as deemed necessary. This will be completed by the trip lead in collaboration with the parent/carer and other staff.

5. 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 a care plan. 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.

6. Individual healthcare plans

The Head of School has overall responsibility for the development of care plans for pupils with medical conditions and this will be delegated this to the First Aid Lead within each school of the GLC.

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;
- By whom

Not all pupils with a medical condition will require a care plan. It will be agreed with a healthcare professional and the parents/carers when a care plan would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the 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.

Care plans will be linked to, or become part of, any education, health and care [EHC] plan. If a pupil has special educational needs or a disability [SEND] but does not have an EHC plan, the SEN will be mentioned in the care plan.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The Head of School and/ or delegated individual, will consider the following when deciding what information to record on care plans:

- 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 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.

7. Managing medicines

Prescription and non-prescription medicines will only be administered at the 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 Department for Education states that:

No child under 16 should be given prescription or non-prescription medicines without their parent's written consent – except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents.

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.

Schools will only accept prescribed medicines that are:

- In-date;
- Labelled;
- Provided in the original container, as dispensed by the pharmacist, and including instructions for administration, dosage and storage.

Schools 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. All medicines will be held in a designated place with clearly defined access.

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

7.1 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 [as agreed and stated on the care plan]**, but they must not pass it to another pupil to use. All other controlled drugs will be kept in a secure cupboard in the school office and only named staff will 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.

7.2 Pupils managing their own needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures in line with medical guidance. This will be discussed with parents/carers and it will be reflected in their care plans, particularly around the pupil's ability to be independent whilst supervised.

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 care plan and inform parents/carers so that an alternative option can be considered, if necessary.

7.3 Unacceptable practice

Staff should use their discretion and judge each case individually with reference to the pupil's care plan, but it is generally not acceptable to:

- Prevent pupils from easily accessing their inhalers and medication, or 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/carers;
- 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 care plans;
- If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- Penalise pupils 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/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/carer 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.

8. Emergency procedures

Staff will follow the school's normal emergency procedures [for example, calling 999]. All pupils' care plans 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.

9. 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 care plans. 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 Head of School /delegated named individual. Training will be kept up to date.

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 care plans;
- 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 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.

10. Record keeping

The Health & Safety 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.

Care plans will be kept in a readily accessible place which all staff are aware of.

11. Liability and indemnity

The board of directors will ensure that the appropriate level of insurance is in place and appropriately reflects the trust's level of risk.

The details of the insurance policy are: Zurich Insurance Services.

Our insurance arrangements cover staff providing support to pupils with medical conditions.

Our insurance policy provides liability cover relating to the administration of medication and individual cover is arranged if required for any healthcare procedures.

12. Complaints

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

13. Monitoring arrangements

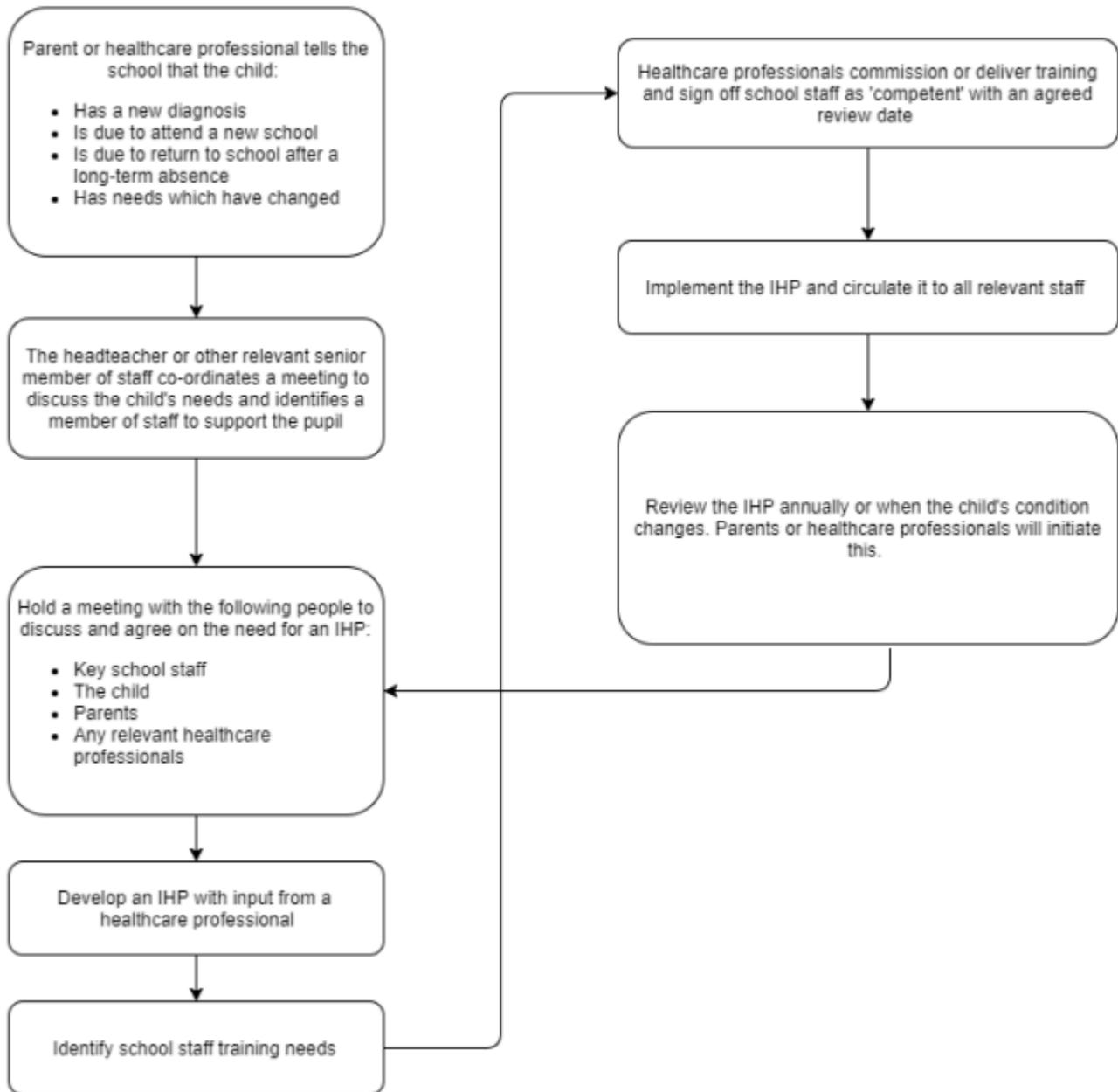
This policy will be reviewed and approved by the board of trustees every 2 years.

14. 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 and disabilities information report and policy

Appendix 1: Being notified a child has a medical condition



Appendix 2: Care Plan

Managing Medicines in School

Parental agreement for school to administer prescribed medication to students:

The Academy will not give your child prescribed medicine unless you complete and sign this form and the school has a policy that staff can administer medicine.

School		Date	
Name of student			
Date of Birth		Tutor Group	
Emergency Contact Name			
Emergency Contact Number (s)			
Doctor/Clinic/Hospital Contact and telephone number			

Give name and details of diagnosis/condition:

Date condition diagnosed: Diagnosed by who:

Give details of child's symptoms:

Give details of what constitutes an emergency for your child and the actions you expect if this occurs:

Give details of medication(s) and dosage your child takes:

Does your child need medication in school Yes/no

Does your child self-administer medication in school Yes/no

Are there side effects to these medications Yes/no

I understand it is my responsibility to ensure all medications for my child are in date and current. It is my responsibility to update the school with all necessary changes relating to my child's health and well-being.

Signed:..... (Parent/Carer) Date.....

Care Plan/Review

Date:

Review Date:

Student Name/Year	
School Name	
Student date of birth	
Emergency Contact Name	
Contact Telephone No:	
Second Contact Name and telephone No:	
Medical Diagnosis/Condition	
Medication and Dose <i>Only medication prescribed by a GP, in its original packaging within the expiry date and with the dispensing label visible, will be administered by staff</i>	
Clinic/Hospital Contact and telephone No:	
GP Name and No:	
Actions to be taken in case of an emergency, <i>(Please describe your child's symptoms/ requirements and what constitutes an emergency and what action you expect to be taken.)</i>	

It is parent/carer's responsibility to keep the school informed of any changes to their child's medical conditions or medication.

Signed.....Date.....

(Parent/Carer)