Avishayes Primary School
& Early Years Centre

Medical Conditions Policy
Supporting pupils with medical conditions

Responsibility:	**Governors**
Reviewed:	**November 2025**
Next review date:	**November 2027**
Key legislation:	**Equality Act 2010** **Children Act 1989**
This policy should be read in conjunction with:	
Exclusion Policy **Anti-bullying policy** **Special Educational Needs (SEN)** **Equal Opportunities Policy** **Safeguarding and Child Protection Policy** **Behaviour Policy** **KCSIE part 1** **Asthma Policy** **Trips and Visits Policy**	

Aims

We aim to ensure that all children, including those with medical conditions can continue to enjoy learning, friendships and play.

Parents have the prime responsibility for their child's health and are required to provide the school (via the Headteacher/ SENCO/School Office) with information about their child's medical condition before they are admitted to the school, or as soon as the child first develops a particular medical need.

If there is a medical emergency and an ambulance needs to be called the member of staff dealing with the incident should dial 999 or ask a colleague in the vicinity to do so (School Postcode TA20 1NS). That person must then inform the school office (Ext 100 or 115) who will inform the Headteacher (Ext 105) / Assistant Head (Ext 111) with details of the incident.

Pupils with Short – Term Medical Needs

If children are unwell and unable to cope with a busy school day or if the child has an infectious or contagious condition they should not be sent to school. If they become ill during the day, parents/carers will be contacted by a teaching assistant, lunchtime supervisor or member of the office staff in order that the child can be taken home.

Many children will need to take medicines at some time during their time in school. This will usually be for a short period only, perhaps to finish a course of prescribed antibiotics. Where possible doses should be given before or after school, however medicines may be brought into school if it would be detrimental to the child not to do so. Medicines should be brought to school office in the original containers with the labels attached.

Parents should inform the school (using the forms available from the school office) about the medicines that their child needs to take and provide details of any further support required.

Responsibility for administering medication

The school will ensure that there are sufficient members of support staff who are employed, appropriately trained and willing to manage medicines. The type of training necessary will depend on the individual case. If they are in doubt about any procedure, staff will not administer the medicines but will check with the parents or a health professional before taking further action.

Each child's medicine will be placed in a named box/bag when it arrives at school. This will ensure that the child's name is checked twice (the box/bag and the medicine bottle/packet). If medication is not named/labelled then Office staff will ensure that this is done on receipt of the medication from the parent.

The medicine will be administered by two office staff or TAs. This will be done in the School Office (doors to be closed)/School Business Manager's Office/Assistant Headteacher's office or the Headteacher's office where there will be no interruptions (NIZ – No interruption zone).

Both members of staff will ensure that they check carefully the name of the child and the medicine against the consent form prior to the medicine being administered.

Record-keeping
Staff will complete and sign a record each time they give medicine to a child. (These are filed in the medicine folder and stored in the school office)

Refusal to take medicine
If a child refuses to take medicine, staff will not force them to do so, but will note this in the records and inform parents of the refusal immediately.

If a refusal to take medicines results in an emergency, then the usual emergency procedures will be followed.

Storage of medication and school's spare inhalers and adrenaline auto-injector (AAI) pen
All emergency medicines, such as asthma inhalers and adrenaline pens, will be safely stored and will be readily available. They will not be locked away and where children are considered safely able to take care of their own medicines they will be supported to do so.
Some medicines need to be refrigerated. These will be kept in the fridge in the staff room. Other medicines will be kept in a locked cupboard in the school office. The school holds 5 spare Inhalers which are stored in - The Bridge First Aid Box, First Aid room in Year 2 area, Reception Class First Aid Box, School Business Managers Office + Adult/Disabled Toilet KS2. The School also holds 1 EpiPen (Jnr Adrenaline Auto-Injector 150mcg) this is stored in the medicine cabinet in the school office.

Absence from school for more than 15 days

For those children who attend hospital appointments or are admitted to hospital on a regular basis, special arrangements may also need to be considered. In this event, advice will be sought from The Medical Tuition Service and referrals made where appropriate.

Children with medical needs may be unable to attend school for many reasons relating to their condition and in this event, the school may make arrangements to link the child to suitable learning opportunities and will facilitate their links with other children so that friendships are sustained.

Absence from school for more than 5 days due to a Medical Need

For those children who will be absent from school due to a medical need for a period of more than 5 days the parents will need to inform the school and give copies of any documentation explaining the need and the treatment that may be occurring. If appropriate a short term Medical Health Care Plan will be put in place so all adults who support the pupil are fully informed and know the actions that need to be taken.

Pupils with Long Term or Complex Medical Needs

Where a child's needs are particularly complex and could affect their ability to access the full curriculum or participate in other areas of school life, then special arrangements will be made. The PIMS Team and SENITAS may be contacted to support any adaptations to the curriculum.

In some cases this might take the form of dedicated adult support, at certain times of the school day. Alternatively, the child's needs could be such that modifications to the learning environment and /or the provision of specialist aids will need to be considered.

Individual Medical Health Care Plans

A written, individual medical health care plan will be developed where needed, to clarify for staff, parents and the child, the support that will be provided and what training may be required. This will include:

i. details of the child's medical condition,

ii. any medication,

iii. daily care requirements

iv. action to be taken in an emergency, parents/carers details including emergency contact numbers.

Those who may contribute to a medical health care plan include:

b. The parents/ carers (and the child, if appropriate)
c. The school nurse, specialist nurses, children's community nurses, the child's GP or other health care professionals (depending on the level of support the child needs
d. The Head teacher and SENCO,/SEN Manager
e. The class teacher, care assistant or teaching assistant
f. Support staff who are trained to administer medicines or trained in emergency procedures.
g. PIMS team

The school will agree with parents how often they should jointly review a Medical Health Care Plan. The timing of this will depend on the nature of the child's particular needs. In most cases this will take place at the start of each school year; however, some plans will need to be reviewed more frequently depending on individual needs. Medical Health Care Plans and training are not transferable, even when children have the same condition.

Medical HealthCare Plans will need to be taken by staff when they have an off-site visit so all procedures are followed.

Medical Awareness Posters and Personal Care Plans

A written, individual Medical Awareness Poster and Personal Care Plan will be developed when staff need to be aware of an individual need and how the curriculum may need to be adapted to support them or how the pupil may need support in managing their need. These will clarify for staff, parents and the child, the support that will be provided and what training may be required. An example of when these would be used are toileting and serious food allergies.

Asthma – please see separate asthma policy. If a child has a food allergy and is also asthmatic this will be included on their asthma plan.

Training:

If school staff need to be trained to administer medical procedures the school will contact the relevant health care professional, eg School Nurse, specialist nurse or children's community nurse. Parents cannot be responsible for leading this training but parents and children will be asked to participate in the training and give advice and guidance on how they prefer things to be done.

Parents and school staff cannot cascade training that they have received when the training is specific to an individual child.

School staff who have been trained are responsible for following and delivering the Medical Health Care Plan and if the child's condition alters they will contact an appropriate professional and the parents, making them aware of the change and requesting further training if needed or an alteration to the plan.

a. School staff will request further training when needed, and professional updates at least once a year.

b. Staff who have been trained in the child's care are responsible for following the procedures in children's care plans as they have been trained to do.

c. The SENCO will liaise with health care professionals and the trained staff to support and facilitate training refreshers and updates as needed.

d. Individual staff are responsible for identifying and communicating any changes that they notice in the child's care needs. The Assistant SENCo will inform parents and health care professionals in writing and discuss whether further training is needed.

Communicating Needs

A confidential folder with photographs of pupils with medical needs, together with outlines of their medical condition and action to be taken, is available to all teaching and support staff. In addition, each teacher has a red folder with the information in for the pupils they are teaching.

Medical Health Care Plans for individual children are kept in the classroom where they are accessible to all staff involved in caring for the child.

Further copies and full medical records are stored in the child's SEN file on the school computer system and/or in the SEN office.

In each room/classroom there will be a Walkie Talkie. If an adult needs somebody in an emergency then the adult calls for back up and somebody on call will then support.

Educational visits (see also school's Trips Policy)

Visits and school residentials will be planned so that pupils with medical needs can participate and reasonable adjustments will be made as appropriate to ensure that they are not discriminated against. If a risk assessment indicates that it is not safe for the pupil to participate in part of the experience because of their condition, then reasonable adjustments will be made and an alternative experience will be provided to ensure that they are enabled to join in the curriculum surrounding the trip.

Staff supervising excursions and residentials will always make sure that they are aware of any medical needs, and relevant emergency procedures. Parents of children participating in residential trips will need to complete required consent forms giving details of all medical/dietary needs. All medication or equipment which needs to be administered during the course of the visit should be handed directly to the class teacher in accordance with the school's guidelines before leaving the school at the start of the trip.

A copy of individual medical awareness posters will be taken on visits in the event of the information being needed in an emergency.

Arrangements for taking any necessary medicines will be made and if necessary an additional member of the support staff, or an appropriate volunteer might be needed to accompany a particular child. Children's parents will not be required to accompany their own children on school trips.

If there is any concern about whether the school is able to provide for a child's safety, or the safety of other children on a visit, then parents will be consulted and medical advice sought from the school health service or the child's GP.

Sporting Activities

All children with medical conditions will be encouraged to participate as fully as possible in physical activities and extra-curricular sport. For many, physical activity can benefit their overall social, mental and physical health and well-being. Staff will be sensitive to their individual needs and sufficient flexibility will be incorporated into the lesson delivery for all children to be included in ways appropriate to their own abilities.

Any restrictions on a child's ability to participate in PE will be recorded in their individual health care plan. This will include a reference to any issues of privacy and dignity for children with particular needs.

Some children may need to take precautionary measures before or during exercise, and may also need to be allowed immediate access to their medicines such as asthma inhalers.

Insurance:

This school is an academy. Our insurance arrangements are through the Department for Education – Risk Protection Arrangement (RPA) and gives us unlimited cover through Public Liability.