



**PONTEFRACT**  
ACADEMIES TRUST

## Supporting Pupils with Long Term Medical Conditions Policy



## Summary:

The Supporting pupils with Long-Term Medical Conditions Policy aims to ensure that:

- Pupils, staff and parents understand how the 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.

Author	Director of Inclusion & Safeguarding		
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**Document Control**

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06 March 2023	0.1 draft	New policy created	
01 May 2024	0.2	Updates to policy	DFE documentation sited – latest included.
16 June 2025	0.3	Policy Reviewed	1. Health and Care Plan included. 2. Early Years Statutory Framework included. 3. SPRB replaced with School and Trust. 4. Link to the disability discrimination act included

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## 1. Aims

This policy aims to ensure that:

- Pupils, staff and parents understand how the 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 ensuring that all schools:

- Suitably train sufficient staff to support pupils with long term medical conditions.
- Make staff aware of pupils' conditions, where appropriate.
- Ensure there are cover arrangements to ensure someone is always available to support pupils with medical conditions.
- Develop and monitor individual healthcare plans (IHP's).

## 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 Trust, through its School Performance Review Board (SPRB) to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education's statutory guidance on supporting pupils with medical conditions at school [Supporting pupils with medical conditions at school - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/672222/Supporting_pupils_with_medical_conditions_at_school.pdf)

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

## 3. Links to other policies and legislation

This has been written in reference to (but not limited to) the following legal frameworks:

- The Equality Act 2010
- The Pupil and Families Act 2014
- The UK General Data Protection Regulation
- Health and Care Act 2022

The policy has due regard to statutory and non-statutory guidance including, but not limited to the following:

- SEND Code of Practice 0-25 years
- Statutory Guidance on Supporting pupils/students with medical Conditions
- Statutory Framework for the Early Years Foundation Stage
- Keeping Children Safe in Education
- Working together to Safeguard Pupils 2023
- School Attendance: Guidance for Schools

This policy operates in conjunction with the following school policies:

- Admissions Policy
- Children with health needs who cannot attend school Policy

- Administering Medications Policy
- Educational Visits and School Trips Policy
- Safeguarding and Child Protection Policy
- SEND Policy
- Complaints Policy

#### **4. Roles and responsibilities**

Pontefract Academies Trust has the ultimate responsibility to ensure that arrangements are made to support pupils with medical conditions. The Trust will ensure that the Headteacher has sufficient staff who have received suitable training and are competent before they are responsible for supporting children with medical conditions.

##### **The Senior Leadership Team (SLT)**

The SLT will:

- Make sure all staff are aware of this policy 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 (IHP's), including in the contingency emergency situations.
- Ensure that all staff who need to know are aware of a child's condition.
- Take overall responsibility for the development of IHP's.
- Ensure that school staff are appropriately insured and aware that they are insured to support pupils in this way.
- 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.
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date.

##### **Staff**

Supporting pupils 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 pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

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.

##### **Pupils and Parents / Carers**

Pupils and/or parents/carers with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about what medical support is needed and contribute as much as possible to the development of IHP's. They are also expected to comply with IHP's.

Parents should notify the school when a pupil has been identified as having a medical condition that will require support in school. Parents are responsible for informing the school before a pupil starts at the school to ensure that support is in place and that an IHP is implemented.

### **School nurses and other healthcare professionals**

The school nursing service should also notify the school when a pupil has been identified as having a medical condition that will require support in the school. This will be before the pupil starts at the school, wherever possible. They may also support staff to implement a child's IHP.

Healthcare professionals, such as GP's and paediatricians, will liaise with the school nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs. School will complete IHP's with the school nursing service or healthcare professionals.

## **5. Equal opportunities**

The 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 school 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 in consultation with professionals if necessary and parents. Some children with medical conditions may be considered disabled under the definition set out in the Equality Act 2010, the school must comply with their duties under that act.

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 and any relevant healthcare professionals will be consulted.

## **6. 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 an IHP.

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 Trust.

**See Appendix A.**

## **7. Individual Healthcare Plans (IHP's)**

The Headteacher has overall responsibility for the development of IHP's for pupils with medical conditions. This has been delegated to the member of SLT with responsibility for Inclusion.

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, using the template attached in line with the DFE Supporting Pupils with Medical Conditions:

- Contact details
- What needs to be done.
- When.
- By whom.

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the Headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or pediatrician, 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 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 SPRB and Inclusion Leader, 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 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/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.

## **8. Managing medicines**

Prescription and non-prescription medicines will only be administered at school:

- When it would be detrimental to the pupil's health or school attendance not to do so and;



- Where we have parents' written consent.

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. Details of medication given will be recorded on file.

The school will only accept prescribed medicines that are:

- In-date.
- Labelled with name and medication.
- 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.

Medicines will be returned to parents 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 of secondary age 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 a named location 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 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 so that an alternative option can be considered, if necessary.

### **Unacceptable practice**

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

- Prevent pupils from easily accessing their inhalers and medication, and 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.
- Ignore medical evidence or opinion (although this may be challenged).
- Send pupils 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 IHPs.
- Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. hospital appointments and evidence has been provided.
- 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, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues.
- 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 to accompany their child.
- Administer, or ask pupils to administer, medicine in school toilets.

## 9. 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 arrives, or accompany the pupil to hospital by ambulance.

## 10. 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 school. 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 IHPs.
- 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.

### **11. Record keeping**

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

### **12. Liability and indemnity**

Pontefract Academies Trust will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk. Pontefract Academies Trust are a member of the Department for Education's risk protection arrangement (RPA).

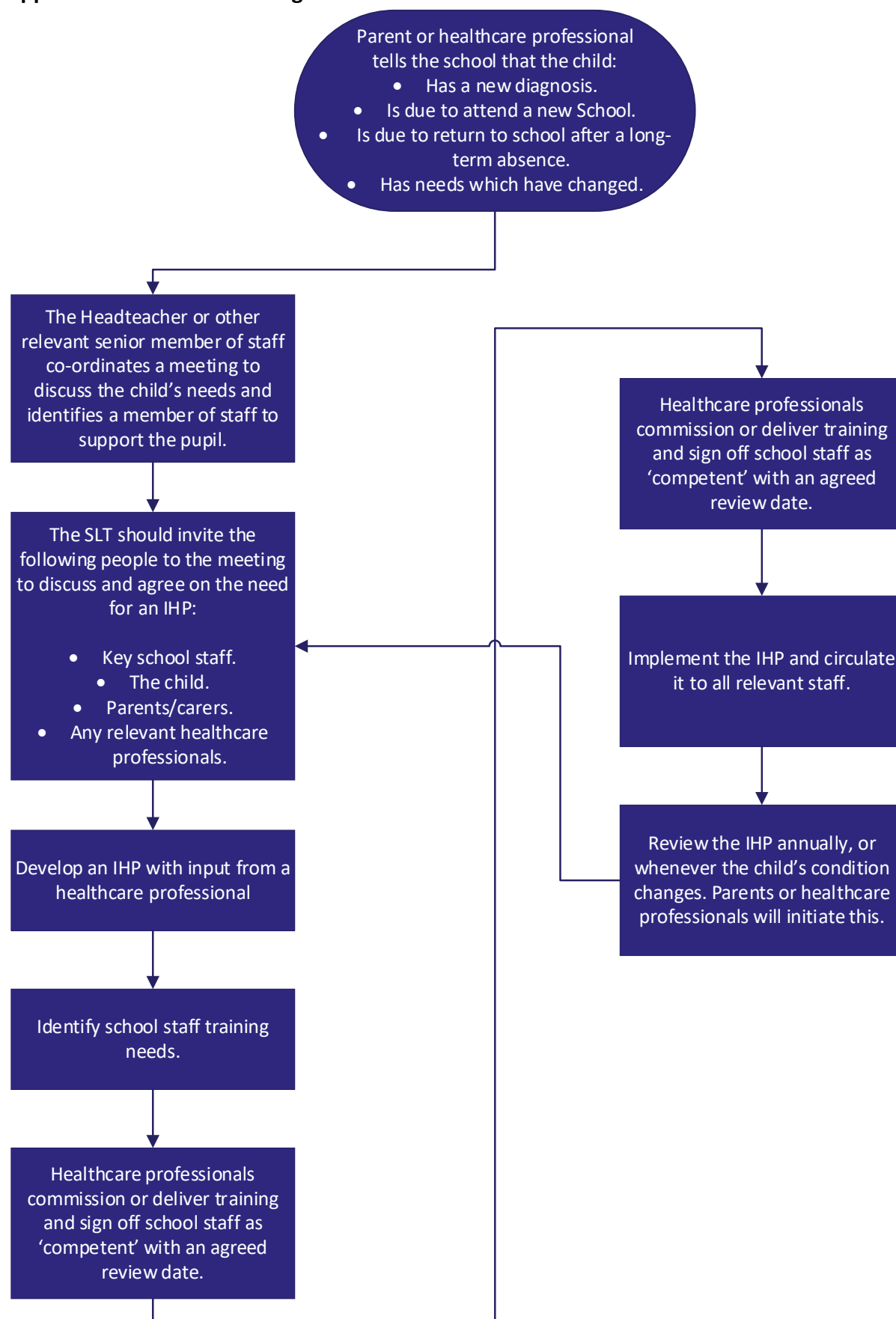
### **13. Complaints**

Parents with a complaint about their child's medical condition should discuss these directly with the Headteacher in the first instance, following the Trust's complaints policy.

### **14. Monitoring arrangements**

This policy will be reviewed and approved by the Trust board annually.

## Appendix A: Process for being notified that a child has a medical condition



**Appendix B: Individual Healthcare Plan (insert onto school headed paper)****Child's Name:****Date:****Review Date:**

<b>Date of Birth</b>		
<b>Address</b>		
<b>Medical Diagnosis / Condition</b>		
<b>Class / Form</b>		
<b>Named Support in School</b>		
<b>Medical Professionals</b> (Name and contact details)	<b>GP</b>	<b>Hospital</b>

**Family Contact Information**

<b>1. Name</b>	
<b>Contact Number</b>	
<b>2. Name</b>	
<b>Contact Number</b>	

**Describe the medical needs and give details of the 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:**

**Daily care requirements:**

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

**Arrangements for school visits / trips etc:**

**Other information:**

**Describe what constitutes as emergency, and then the action to take if this occurs:**

**Who is responsible in an emergency?**

**Plan developed with:**

**Staff training needed / undertaken – who, what, when**

**Health and Care Plan shared (To include signatures)**