

# Braywood C of E First School



## Supporting Children at School with Medical Conditions Policy

*"Through the nurturing hands of God, we aspire for all our children to become confident, emotionally resilient and compassionate individuals who achieve personal excellence through strength of character and a love of learning"*

**'For with God, nothing shall be impossible' Luke 1:37**

Governors' Committee Responsible	FGB
Status	Statutory
Review Cycle	Annual
Date written	May 2026
Date of next review	May 2027

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## Introduction

This policy describes how, at Braywood CE First School, pupils with medical conditions are supported in school. Pupils at school with medical conditions, wherever possible, will be supported so that they have full, equitable access to education, including school trips and physical education. The school will liaise with health and social care professionals, pupils and parents/carers to ensure that the needs of children with medical conditions are effectively supported.

In line with safeguarding duties, the school will not put any pupil at unnecessary risk (for example, from infectious diseases). The school may therefore not accept a pupil in school at times where it would be a detriment to the health of that pupil or others.

## Scope

This policy applies to all pupils who attend Braywood CE First School.

## Objectives

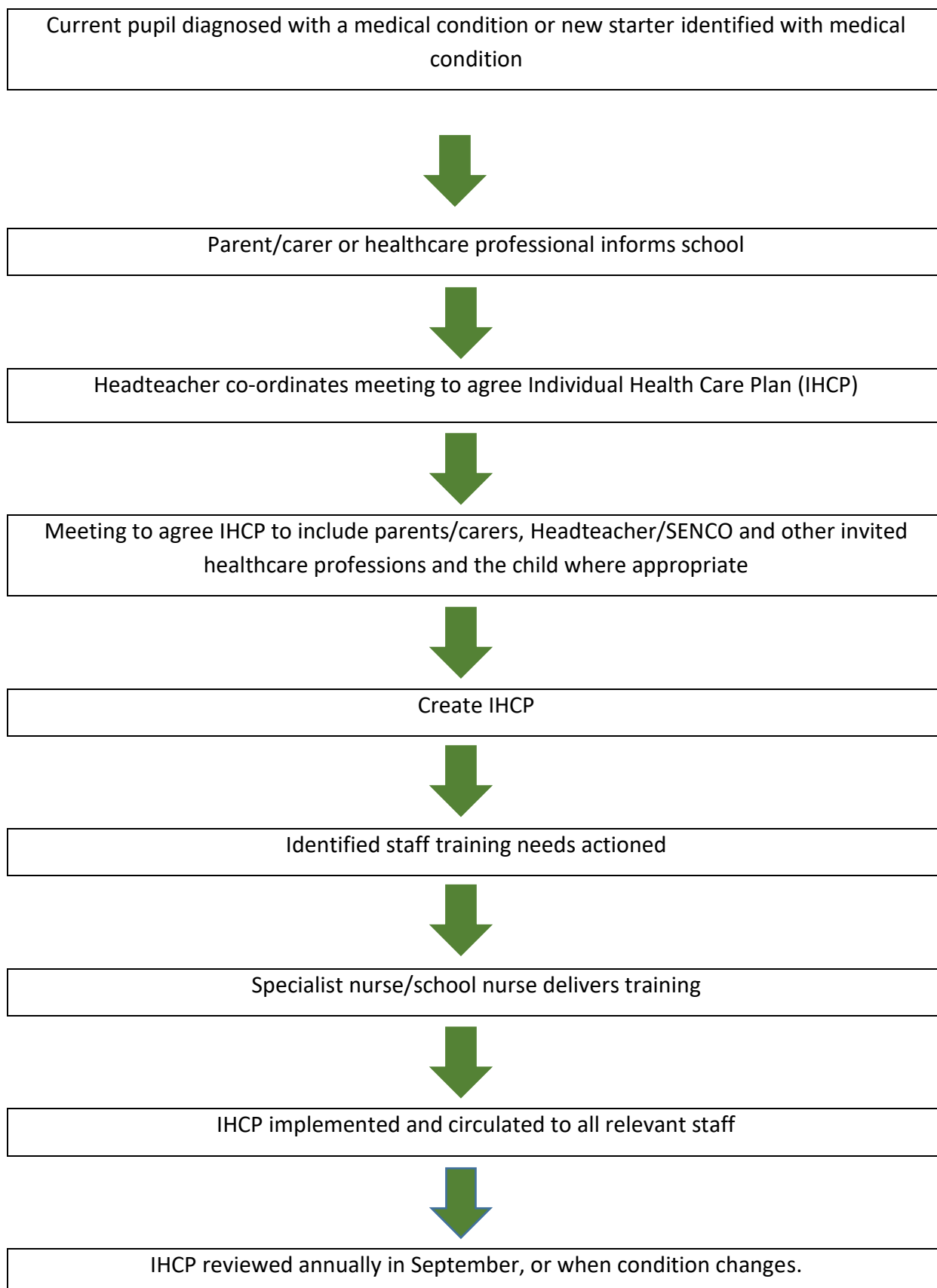
The objectives of this policy are to outline the school's responsibilities in relation to children with medical conditions and to describe how to fulfil this obligation.

## Responsibilities

The Headteacher is responsible for ensuring that the system and processes detailed in this policy are followed.

## Implementation

For implementation of this policy, follow the flow chart below:



## Staff training

Every member of staff who is supporting a pupil with medical needs in school will receive suitable training provided by the appropriate health professionals. Training will be sufficient to ensure that members of staff are competent and have confidence in their ability to support pupils with medical conditions and to fulfil the requirements as set out in Individual Health Care Plans (IHCP). They will need to understand the specific medical conditions they are being asked to deal with, their implications and preventative measures. All staff who join the school will attend basic awareness sessions in severe allergic reactions, asthma and epilepsy. Where it is felt appropriate, staff will attend the school nursing refresher courses in severe allergic reactions, asthma and epilepsy.

## Managing medicines on the school premises

Staff will ensure that they read all the prescriptive information on any medication for a child carefully before administering it to the child.

Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so. Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours. No child under 16 should be given prescription or non-prescription medicines without their parent's/guardian's written consent.

The school will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date but will generally be available to schools inside an insulin pen or a pump, rather than in its original container.

All medicines will be stored safely either in the medical fridge in the staff room, in medical cabinets in the classrooms or, in the case of auto-injectors, in the staff rest room which is used for storing medical equipment. Expiry dates of medication held within school will be monitored monthly and parents informed if medication is near the expiry date, requesting a replacement of the medication to be brought into school.

Pupils should know where their medications are at all times and be able to access them immediately with the help of an adult. Pupils who can take their medicines themselves or manage procedures should be allowed to do so with supervision. If it is not appropriate for a pupil to self-manage, then classroom staff will administer medicines and manage procedures for them. Where medication has been administered unexpectedly, parents/carers will be informed.

The school will keep a record of all medicines administered to individual pupils, stating what was administered, how much was administered, when and by whom. Any side effects of the

medication will be noted on the pupil's Administering Medication in School Record Sheet. This form includes a consent from parents/carers.

When no longer required, medicines will be returned to the parent /carer to arrange for safe disposal. The Sharps boxes will always be used for the disposal of needles and other sharps.

Parents/carers of children with an Asthma inhaler in school will have a personal asthma action plan. The school will hold an emergency Salbutamol Asthma inhaler and Epi-pen for use in emergency for those children who have these in school as provided by parents/carers. These will be used if the child's own medication is broken, empty or out of date. Parents will sign a consent form for the school's medication to be used in the event of an emergency.

Parents will be asked to collect Volumatic spacers at the end of each half term to take them home and wash them, before returning them for the start of the next half term.

## Medication errors

A medication error is when the administration deviates from the instruction of the medical professional and parent/carers. In order to reduce the risk of this happening, two members of staff will be present when administering medication. Any medication error must be reported to the Headteacher and parents and an incident report form completed and copied to the corporate H&S team and the Local Authority (RBWM).

## Emergency procedures

Where it is deemed appropriate, children will have in Individual Health Care Plan (IHCP) which will clearly define what constitutes an emergency and the procedures that must be followed.

If a child needs to be taken to hospital, a member of staff will stay with the child until the parent/carer arrives or accompany the child to hospital by ambulance. Members of Staff must not take children to hospital in their own car other than in exceptional circumstances.

## Day trips, residentials and sporting activities

The school will consider reasonable adjustments that might be required to enable children with medical needs to participate fully and safely on school trips or sporting activities. A risk assessment will be completed in good time by the relevant person so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. This may require consultation with parents/carers and pupils and advice from the school nurse or other healthcare professionals who are responsible for ensuring that pupils can participate.

## Complaints

Should parents/carers be dissatisfied with the level of support provided, they should discuss their concerns with the Headteacher.

## Monitoring

The Headteacher will monitor the application of this policy and report back, through the relevant committee to the Governing Board.

## Appendix 1

### Individual Health Care Plans (IHCP)

In certain circumstances, for example complex conditions, it will be necessary to develop an IHCP. These will be co-ordinated by the Headteacher and delegated to the SENCO. The IHCP will be formulated in collaboration with relevant healthcare professionals, parents/carers and pupils.

The plan may include:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication (its side affects and its storage) and other treatments, dose, time, facilities, equipment, dietary requirements and environmental issues e.g. crowded corridors
- Specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete tests, use of rest periods or additional support in catching up with lessons
- The level of support needed including in emergencies
- 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
- Who in the school needs to be aware of the pupil's condition and the support required
- Written permission from parents/carers and the Headteacher for medication to be administered by a member of staff, or self-administered by individual pupils 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, the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency, including whom to contact, and contingency arrangements

## Appendix 2 Form 1 Individual Healthcare Plan



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

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)


### Clinic/Hospital Contact

Name

Phone no.


### G.P.

Name

Phone no.


Who is responsible for providing support in school

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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

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 an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

**Form 2 Parental agreement for setting to administer medicine**



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

Date for review to be initiated by

Name of school/setting

Name of child

Date of birth

Group/class/form

Medical condition or illness


Name/type of medicine  
*(as described on the container)*

Expiry date

Dosage and method

Timing

Special precautions/other instructions

Are there any side effects that the school/setting needs to know about?

Self-administration – y/n

Procedures to take in an emergency


**NB: Medicines must be in the original container as dispensed by the pharmacy**

**Contact Details**

Name

Daytime telephone no.

Relationship to child

Address

I understand that I must deliver the medicine personally to [agreed member of staff]


The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

**Form 3**

**Record of medicine administered to an individual child**



Name of school/setting

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Name of child

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Date medicine provided by parent

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Group/class/form

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Quantity received

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Name and strength of medicine

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Expiry date

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Quantity returned

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Dose and frequency of medicine

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Staff signature: \_\_\_\_\_

Signature of parent: \_\_\_\_\_

Date

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Time given

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Dose given

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Name of member of staff

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Staff initials

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Date

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Time given

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Dose given

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Name of member of staff

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Staff initials

--	--	--

Date

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Time given

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Dose given

--	--	--

Name of member of staff

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Staff initials

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**Form 3      Record of medicine administered to an individual child (Continued)**

Date  
Time given  
Dose given  
Name of member of staff  
Staff initials


Date  
Time given  
Dose given  
Name of member of staff  
Staff initials


Date  
Time given  
Dose given  
Name of member of staff  
Staff initials


Date  
Time given  
Dose given  
Name of member of staff  
Staff initials


Date  
Time given  
Dose given  
Name of member of staff  
Staff initials
