

The Abbey Primary School

Supporting Children with Medical Needs in School Policy



Approved by: Emma Killick

Last reviewed on: 5th January 2026

Next review due by: 5th January 2027

The Abbey Primary School

Supporting Pupils with Medical Needs in School Policy (Including children with health needs who cannot attend school)

This policy sets out the duty on the school's governing body under Section 100 of the Children and Families Act 2014, which came into force on 1 September 2014.

School Context

The staff at The Abbey Primary School are committed to providing pupils with a high-quality education whatever their health needs, disability or individual circumstances. We believe that all pupils should have access to as much education as their medical condition allows, so that they maintain the momentum of their learning whether they are attending school or going through periods of treatment and recuperation. We promote inclusion and will make all reasonable adjustments to ensure that children and young people with a disability, health need or SEN are not discriminated against or treated less favourably than other pupils.

Principles

This policy and any ensuing procedures and practice are based on the following principles.

- All children and young people are entitled to a high-quality education;
- Disruption to the education of children with health needs should be minimised;
- If children can be in school they should be in school. Children's diverse personal, social and educational needs are most often best met in school. Our school will make reasonable adjustments where necessary to enable all children to attend school;
- Effective partnership working and collaboration between schools, families, education services, health services and all agencies involved with a child or young person are essential to achieving the best outcomes for the child;
- Children with health needs often have additional social and emotional needs. Attending to these additional needs is an integral element in the care and support that the child requires; and that
- Children and young people with health needs are treated as individuals and are offered the level and type of support that is most appropriate for their circumstances; staff should strive to be responsive to the needs of individuals.

As a school we will not engage in unacceptable practice, as follows:

- Send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;

- If a child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- Penalise children for their attendance record if their absences are related to their medical condition e.g. hospital appointments;
- Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child. Individual healthcare plans will be used to address issues linked to medical conditions, such as toileting. No parent should have to give up working because the school is failing to support their child's medical needs; nor
- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child.

Definition of health needs

For the purpose of this policy, pupils with health needs may be:

- Pupils with **chronic or short-term health conditions or a disability** involving specific access requirements, treatments, support or forms of supervision during the course of the school day or
- **Sick children**, including those who are physically ill or injured or are recovering from medical interventions, or
- Children with **mental or emotional health problems**.

This policy does not cover self-limiting infectious diseases of childhood, e.g. measles.

Some children with medical conditions may have a disability. A person has a disability if he or she has a physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision.

The school's Local Academy Committee (LAC) will ensure that the school complies with its duties under the Equality Act 2010.

Roles and Responsibilities

All staff have a responsibility to ensure that all pupils at this school have equal access to the opportunities that will enable them to flourish and achieve to the best of their ability. In addition, designated staff have additional responsibilities as well as additional support and training needs.

Named person in school with responsibility for medical policy implementation

The member of staff responsible for ensuring that pupils with health needs have proper access to education is Natalie Jones (SENDCo). The SENDCo will be the person with whom parents/carers will discuss arrangements to be made in connection with the medical needs of a pupil. It will be the responsibility of the SENDCo to pass on information to the relevant members of staff within the school. The SENDCo will liaise with other agencies and professionals, as well as parents/carers, to ensure good communication and effective sharing of information and will contact the school nursing service in the case of any child 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. This will enhance pupils' inclusion in the life of the school and enable optimum opportunities for educational progress and achievement.

Parents/carers and pupils

Parents hold key information and knowledge and have a crucial role to play. Both parents and pupils will be involved in the process of making decisions. Parents are expected to keep the school informed about any changes in their children's condition or in the treatment their children are receiving, including changes in medication. Parents will be kept informed about arrangements in school and about contacts made with outside agencies.

School staff

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. Staff must familiarise themselves with the medical needs of the pupils they work with. Training will be provided in connection with specific medical needs so that staff know how to meet individual needs, what precautions to take and how to react in an emergency.

The Headteacher

The headteacher is responsible for ensuring that all staff are aware of this policy and understand their role in its implementation. The headteacher will ensure that all staff who need to know are aware of a child's condition. The headteacher will also ensure that sufficient numbers of trained staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. The headteacher has overall responsibility for the development of individual healthcare plans. S/he will also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way.

School health teams

School health teams are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they should do this before the child starts at the school. They may support staff on implementing a child's individual healthcare plan and provide advice and liaison.

Other healthcare professionals

It is NHS policy that GPs and Paediatricians will notify the school nurse when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans.

Hospital and Outreach Education work with schools to support pupils with medical conditions to attend full time.

Staff training and support

In carrying out their role to support pupils with medical conditions, school staff will receive appropriate training and support. Training needs will be identified during the development or review of individual healthcare plans. The relevant healthcare professional will lead on identifying and agreeing with the school, the type and level of training required, and how this can be obtained. The school will ensure that training is sufficient to ensure that staff are competent and confident in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual healthcare plans.

Staff will not give prescription medicines or undertake health care procedures without appropriate training. A first-aid certificate does not constitute appropriate training in supporting children with medical conditions.

This policy will be publicised to all staff to raise awareness at a whole school level of the importance of supporting pupils with medical conditions, and to make all staff aware of their role in implementing this policy.

Procedures

Notification

Information about medical needs or SEND is requested on admission to the school. The SENDCo will meet with parents/carers, ideally before the pupil attends school, to discuss specific needs and ensure a smooth transition into class. The SENDCo will then access support and training from outside agencies, as applicable.

Medical information supplied by parents/carers is recorded on the school's Arbor MIS. Class Medical lists detailing the medical needs for the pupils in that each class are produced annually at the start of each academic year, and updated throughout the year, as necessary. Class Medical Lists are located in each classroom. Details and photographs of pupils with

severe medical needs are displayed on a noticeboard in the staffroom and are updated when necessary. Confidentiality is assured by all members of staff.

Any medical concerns the school has about a pupil will be raised with the parents/carers and discussed with the school nurse.

Parents and carers are asked to keep the school informed of any changes to their child's condition or treatment.

Individual Healthcare Plans

Not all children with medical needs will require an individual healthcare plan. The school, healthcare professional and parent should agree, based on evidence, when a healthcare plan would be required.

Individual healthcare plans will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. Plans are also likely to be needed in cases where medical conditions are long-term and complex. Plans provide clarity about what needs to be done, when and by whom. A flow chart for identifying and agreeing the support a child needs, and developing an individual healthcare plan is provided at appendix 1.

Individual healthcare plans should capture the key information and actions that are required to support the child effectively. The level of detail within plans will depend on the complexity of the child's condition and the degree of support needed. This is important because different children with the same health condition may require very different support. *A template for individual healthcare plans is provided at appendix 2.*

Individual healthcare plans, and their review, may be initiated, in consultation with the parent, by a member of school staff or a healthcare professional involved in providing care to the child. Plans will be drawn up in partnership between the school, parents, and a relevant healthcare professional, e.g. school, specialist or children's community nurse, who can best advise on the particular needs of the child. Pupils will also be involved whenever appropriate.

Partners should agree who will take the lead in writing the plan, but responsibility for ensuring that it is finalised and implemented rests with the school. Plans are reviewed at least annually, or earlier if evidence is presented that the child's needs have changed. Individual healthcare plans are put in place when there is no link between a child's medical needs and educational needs. When a child's medical needs and educational needs are linked, the healthcare needs of the child will be addressed in the child's Individual Education Plan (IEP). When appropriate, a Personal Emergency Evacuation Plan (PEEP) will also be put in place.

Where a child is returning to school following a period of hospital education, the school will work with the appropriate hospital school or the Hospital and Outreach Education to ensure

that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

Pupils too ill to attend school

When pupils are too ill to attend, the school will establish, where possible, the amount of time a pupil may be absent and identify ways in which the school can support the pupil in the short term (e.g. providing work to be done at home in the first instance). The school should make a referral to the Hospital and Outreach Education as soon as they become aware that a child is likely to be or has been absent for 15 school days. Where children have long-term health needs, the pattern of illness and absence from school can be unpredictable, so the most appropriate form of support for these children should be discussed and agreed between the school, the family, Hospital and Outreach Education and the relevant medical professionals.

Pregnancy

Young women of compulsory school age who are pregnant are entitled to remain at school whenever and for as long as possible. The school will make reasonable adjustments to enable young pregnant women to remain in school. When there is medical evidence that continuing to attend school would be contrary to the young woman's or the unborn child's wellbeing, the school should make a referral to The Complimentary Education Academy. Following the birth of the baby, young mothers may benefit from home tuition for a temporary period before they return to school.

Medicines in school

For the school's policy on medicines please see the Administering Medications Policy.

If a child refuses to take medicine or carry out a necessary procedure, staff will not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents will then be informed so that alternative options can be considered.

Emergency Situations

Where a child has an individual healthcare plan, this will clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. If a child needs to be taken to hospital, staff will stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.

Day trips, Residentials and Sporting Activities

Pupils with medical conditions are actively supported to participate in school trips and visits, or in sporting activities. In planning such activities, teachers will undertake the appropriate risk assessment and will consider how a child's medical condition might impact on their

participation. For residential trips, a risk assessment is carried out for each child with an individual healthcare plan. Arrangements for the inclusion of pupils in such activities with any required adjustments will be made by the school unless evidence from a clinician such as a GP states that this is not in the child's best interests.

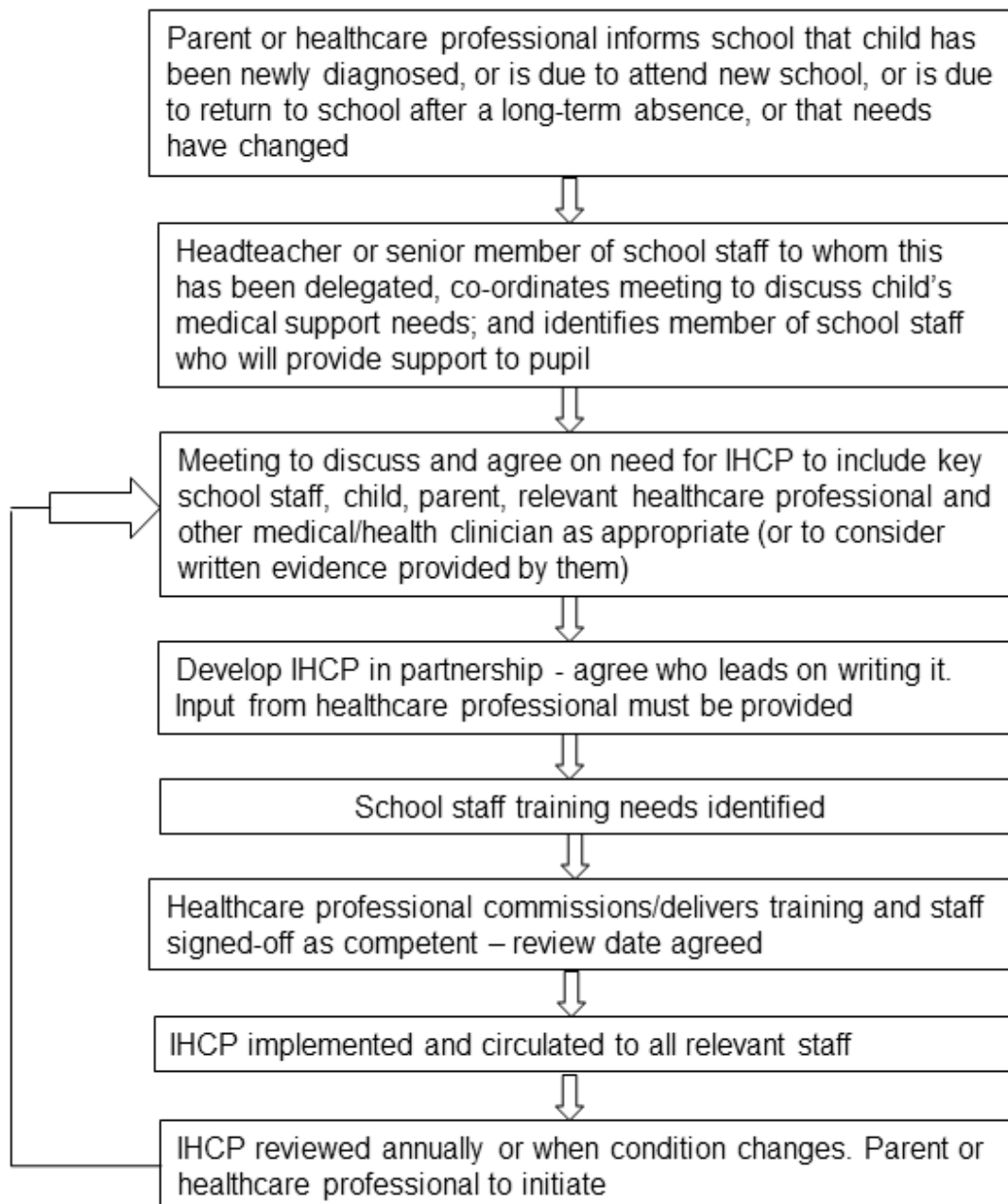
Liability and Indemnity

The school's insurance arrangements are sufficient and appropriate to cover staff providing support to pupils with medical conditions. Staff providing such support are entitled to view the school's insurance policies.

Complaints

If parents or pupils are dissatisfied with the support provided they should discuss their concerns directly with the school in the first instance. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

Appendix 1: Flow chart for developing an individual healthcare plan



Appendix 2: IHP example – template from Edukey

Medical Conditions

Known Medical Conditions

Associated Professionals

Trained Staff in School

Required action

Key staff

Required action

Due by

Completed

add action

Medication

What is taken in school?

Where is medication stored?

Who has access?

Does it need to be monitored?

Does medication affect behaviour/learning?

Does medication have side effects?

Are there any other medications being taken?

Times of the Day

Arrival

Morning Break

Lunch

Afternoon Break

End of Day

After school club

Care at Meal times

During Physical Activities

Trips away from school

Schedule

Drug

Dose

When/Why?

How?

Who?

add target from the library

add blank target

reorder

Summary

Parent / Guardian contribution

Pupil contribution

add additional field

Emergency Situations

What is an emergency?

What are the signs/symptoms?

What are the triggers?

What action must be taken?

Environment and SEMH

Absence from School

Process for catching up

Adaptations to environment

Do they need to leave the classroom?

Rest periods?

Buddy/TA

Signatures

Parent / Carer



SENCo



add additional signature