



St Ambrose College

Supporting Students
with
Medical Conditions Policy

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1. Aim

This policy aims to ensure that:

- Students, staff and parents understand how our school will support students with medical conditions
- Students with medical conditions are properly supported to allow them to access the same education as other students, including school trips and sporting activities

The governing board will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of students' conditions, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support students with medical conditions
- Providing supply teachers with appropriate information about the policy and relevant students
- Developing and monitoring individual healthcare plans (IHPs)

Introduction

St Ambrose College is an inclusive community that aims to support and welcome students with medical conditions and aims to provide all students with medical conditions the same opportunities as others at school.

At St Ambrose College we understand that medical conditions should not be a barrier to learning, so we will ensure that staff understand their duty of care to children and young people in the event of an emergency and feel confident in knowing what to do in an emergency.

Students with medical conditions are encouraged to take control of their condition and the school will make every effort to ensure that they are confident in the support they receive to help them do this. This school aims to include all students with medical conditions in all school activities and there will be an expectation that medical intervention in school time should be minimised to ensure full access to the curriculum.

This school understands that certain medical conditions are serious and can be potentially life-threatening, particularly if ill managed or misunderstood. Therefore, we will ensure that staff understand the common medical conditions that affect children at this school and receive training on the impact this can have on students.

3. Legislation and statutory responsibilities

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

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

4. Roles and responsibilities

The governing body

The governing body has ultimate responsibility to make arrangements to support students with medical conditions. The governing body will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

Designated Safeguarding Lead

The Designated Safeguarding lead 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 (IHPs), including in contingency and emergency situations
- Ensure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development of IHPs
- Make sure that school staff are appropriately insured and aware that they are insured to support students in this way
- 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 students 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 students 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 students 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 students with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a student with a medical condition needs help.

Parents

Parents 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 IHP and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times

- Ensure any medication that is required to be stored at school is monitored and replaced prior to expiry date
- Ensure all changes to medical conditions and medication is updated on their child's IHP.

Students

Students with medical conditions will often be best placed to provide information about how their condition affects them. Students should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

School nurses and other healthcare professionals

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

Healthcare professionals, such as GPs and paediatricians, will liaise with the SENDCo and notify her of any students identified as having a medical condition. They may also provide advice on developing IHPs.

5. Equal opportunities

St Ambrose College has a clear understanding about the need to actively support students 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 students to participate fully and safely on 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 students with medical conditions are included. In doing so, students, their parents and any relevant healthcare professionals will be consulted.

Being notified that a child has a medical condition [\(Appendix A\)](#)

When the school is notified that a student has a medical condition, the process outlined below will be followed to decide whether the student 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 students who are new to our school.

Individual healthcare plans [\(Appendix B & C\)](#)

The Designated Safeguarding Lead has overall responsibility for the development of IHPs for students with medical conditions.

Students with an existing IHP from their Primary School education will be identified during the transition process, parents will be contacted to complete an IHP. All new parents will be invited to contact the school to provide medical information. Parents will update the school if their child's medical circumstances have changed

Plans will be reviewed at least annually, or earlier if there is evidence that the student's needs have changed.

Plans will be developed with the student's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all students 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 SENCO and Designated Safeguarding Lead will make the final decision.

If a student is diagnosed with mild asthma and parents/health professionals are confident the student can administer their own medication, a Healthcare Plan is not deemed necessary. Parents must ensure they complete the Asthma form [Appendix F](#) to inform the school of the severity of the condition.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the student's specific needs. The student will be involved wherever appropriate.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a student 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 governing body and the Designated Safeguarding Lead will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments
- The student'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 such as travel time between lessons
- Specific support for the student'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 student 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 student'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 student's condition and the support required
- Arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the student 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 student can participate, e.g. risk assessments
- Where confidentiality issues are raised by the parent/student, the designated individuals to be entrusted with information about the student's condition
- What to do in an emergency, including who to contact, and contingency arrangements

6. Managing medicines ([Appendix D](#))

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

- When it would be detrimental to the student's health or school attendance not to do so and
- With parents' written consent

The only exception to this is where the medicine has been prescribed to the student without the knowledge of the parents.

Students under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a student any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed.

The school will only accept prescribed medicines that are:

- In-date
- Labelled
- 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 in the main office, with the exception of insulin which will be stored in the fridge in the PE medical room. Students 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 students 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 student 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 student to use. All other controlled drugs are kept in a secure cupboard in the school office 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.

Students managing their own needs

Students 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.

Students will be allowed to carry their own medicines and relevant devices wherever possible. Staff will not force a student 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 student's IHP, but it is generally not acceptable to:

- Prevent students from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every student with the same condition requires the same treatment
- Ignore the views of the student or their parents
- 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 IHPs

- If the student becomes ill, send them to the school office unaccompanied or with someone unsuitable
- Penalise students for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- Prevent students 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 student, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- Prevent students from participating, or create unnecessary barriers to students participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child
- Administer, or ask students to administer, medicine in school toilets

7. Emergency procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All students' IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a student needs to be taken to hospital, staff will stay with the student until the parent arrives, or accompany the student to hospital by ambulance.

Training

Staff who are responsible for supporting students 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 students 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 Principal. 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 students
- 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.

8. Record keeping [\(Appendix E\)](#)

The governing body will ensure that written records are kept of all medicine administered to students for as long as these students are at the school. Parents will be informed if their student has been unwell at school.

IHPs are kept in individual green medical boxes and are readily accessible in the main office. The box contains relevant information should there be an emergency situation and no access to electronic records.

9. Liability and indemnity

The governing body will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

10. Complaints

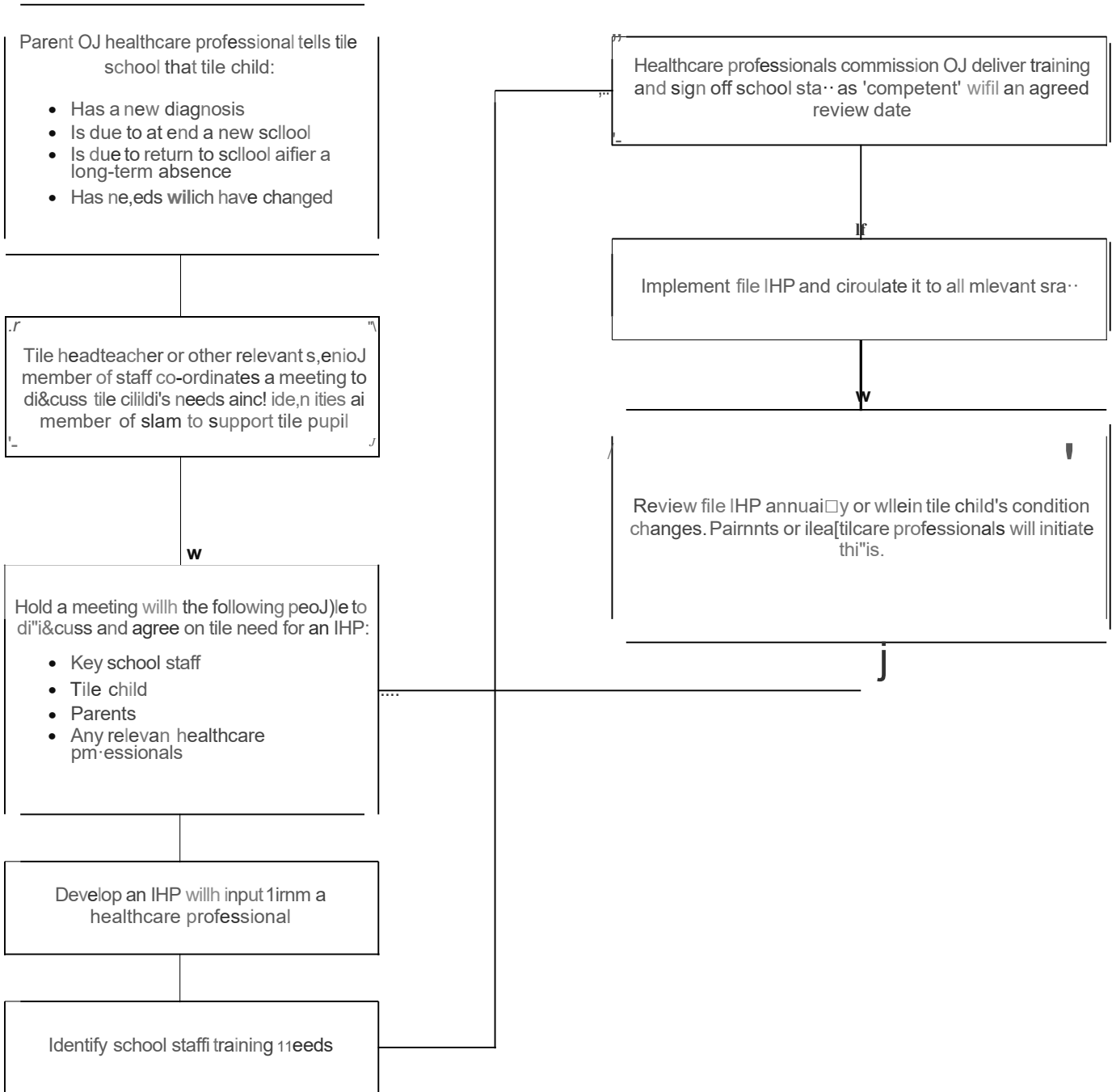
Parents with a complaint about how the school is supporting their child's medical condition should discuss these directly with the SENCO or Designated Safeguarding Lead in the first instance. If the matter cannot be resolved, parents can access the school's complaints procedure which is available on the school website.

11. Monitoring arrangements

This policy will be reviewed and approved by the governing body every two years.

- This school's Medical Condition Policy is reviewed, evaluated and updated every 2 years.
- New DFE and Department of Health guidance will feed into the review.
- In evaluating the policy, this school seeks feedback on the effectiveness and acceptability of the Medical Conditions Policy with a wide-range of key stakeholders within the school and health settings. These key stakeholders include:
 - Students
 - Parents
 - School nurse and/or school healthcare professionals
 - SENCO
 - Designated Safeguarding Lead
 - Principal
 - Teachers
 - First aider(s)
 - All other school staff
 - Local emergency care service staff (including accident & emergency and ambulance staff)
 - Local health professionals
 - The Local Authority
 - School governors

Appendix A



Saint Ambrose College

EXAMPLE

Supporting Students with Medical Conditions Individual Healthcare Plan

Name: _____

Academic Year	Parent / Career Signature to confirm the information is accurate & has been updated where necessary	School Administrator	SENCO &/or Designated Safeguarding Lead
Year 7 2023 – 2024			
Year 8 2024 – 2025			
Year 9 2025 – 2026			
Year 10 2026 – 2027			
Year 11 2027 – 2028			
Year 12 2028 – 2029			
Year 13 2029 - 2030			

St Ambrose College
Individual Healthcare Plan

Name of school/setting:

Saint Ambrose College

Child's name:

House Tutor Group:

Date of birth:

Child's address:

Medical condition / diagnosis

Is your child considered to be disabled under the definition set out in the equality act 2010?

Emergency contact Information

Priority 1:

Name:

Relationship to child:

Phone no. (work):

(home):

(mobile):

Emergency contact Information

Priority 2:

Name:

Relationship to child:

Phone no. (work):

(home):

(mobile):

G.P.

Name:

Phone no.

Who is responsible for providing support in school:

Office staff, SENCO & DSL / Deputy DSL

Medical condition and summary:

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 student'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:

In the case of emergency, I give permission for my son to be administered with the college emergency medication.
Please delete as appropriate: YES/NO/NOT APPLICABLE

In the case of emergency, I give permission for my son's medical details / Healthcare Plan to be shared with the appropriate authorities: YES/NO/NOT APPLICABLE

Parent's signature: _____ Date: _____

Print Name: _____

Appendix C
Communication letter

Dear Parent/Guardian,

I am writing with reference to your son and, in particular, to his medical condition recently identified.

Statutory guidance has recommended that schools, in partnership with parents, create Individual Healthcare plans to ensure that students with medical conditions, which may affect their learning in school, are effectively supported. We require an annual update of our records.

This document aims to provide all relevant information for staff who may need to assist or treat a student with an identified medical condition.

Information might include:

- The medical condition, its triggers, signs, symptoms and treatments.
- Treatment, including medication (dose, side effects and storage) and other treatments, time, facilities, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues e.g. travel time between lessons.
- The level of support needed (some children will be able to take responsibility for their own health needs) including in emergencies. If your son is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring.
- What to do in an emergency, including whom to contact.
- Who in the school needs to be aware of the condition and the support required.
- Written permission from parents for medication to be administered by a member of staff; or self-administered by the student during school hours.
- Details of any additional arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure that your son can participate.

A member of staff will be designated to monitor the healthcare plans and will update these whenever medication/treatment has been necessary.

I would be grateful if you could please complete the form provided with the information required appertaining to your son's needs. If you would like additional guidance, a phone conversation or a meeting to discuss your son's needs in greater detail, please do not hesitate to contact the school office.

Yours faithfully

Mr P Groves
Vice Principal
& Designated Safeguarding Lead

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.

Medicine

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

Name of child
Date of Birth
Year group
Medical condition(s) / illness

Name/type of medicine <i>(as described on the container)</i>
Expiry date
Dosage & 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

Contact Details

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

Name
Daytime telephone number
Relationship to child
Address
I understand that I must deliver the medicine personally to

Signature(s) _____

Date _____

Date for review: _____

Appendix F
Consent Form

Use of Emergency Salbutamol Inhaler

Students Name: _____

Date of Birth: _____

Year / Tutor Group: _____

- I can confirm that my child has been diagnosed with asthma and has been prescribed an inhaler.
- My son has a working, in-date inhaler, which he will bring to school every day and carried on his person
- I will provide an additional/spare inhaler to be stored in the school office, clearly labelled with his name. I understand it is my responsibility to ensure the inhaler is replaced when out of date.
- In the event of my son displaying symptoms of asthma, and his inhaler is not available or unusable; I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.
- My son's asthma is considered as: (please tick)
 - Mild
 - Moderate
 - Severe

Signed: _____

Date: _____

Additional information regarding my son's condition:

In the event of an emergency please contact:

Priority preference	Relationship	Name	Contact number
Priority 1			
Priority 2			