

GARSTANG ST THOMAS CHURCH OF ENGLAND SCHOOL
POLICY: SUPPORTING PUPILS WITH MEDICAL CONDITIONS

Links with other policies: Allergy Safety; First Aid and Medicines; Safeguarding and Child Protection; SEND; Equality; Accessibility; Attendance; Educational Visits; Health and Safety.

Regard to documentation: Children and Families Act 2014 (section 100); DfE statutory guidance 'Supporting pupils at school with medical conditions' (current 2014 guidance, updated 2017); Equality Act 2010; SEND Code of Practice: 0 to 25 years; Children's Wellbeing and Schools Act 2026 and DfE 'Allergy safety in schools' statutory guidance (for allergy-specific arrangements).

1. Policy statement and statutory duty

The Governing Body must make arrangements to support pupils at school with medical conditions. The school will ensure that pupils with medical conditions are properly supported so that they can access education, including physical education and educational visits, remain healthy and achieve their academic potential.

No pupil will be denied admission or prevented from taking up a place because arrangements for their medical condition have not yet been made. Pupils will not be excluded from school or school activities on medical grounds alone where reasonable arrangements can be made safely.

Some medical conditions may amount to a disability under the Equality Act 2010. The school will make reasonable adjustments and have regard to its equality and accessibility duties. Some pupils may also have SEND; this policy operates alongside the SEND framework.

2. Aims

- Support pupils with medical conditions to participate fully in education and school life.
- Ensure roles, responsibilities and communication are clear.
- Ensure staff receive sufficient information, instruction and, where required, appropriate training.
- Use Individual Healthcare Plans (IHPs) where they are needed to specify individual arrangements.
- Involve pupils and parents/carers in decisions and take account of advice from healthcare professionals.
- Manage medicines safely and enable competent pupils to self-manage where appropriate.
- Ensure medical needs are considered in educational visits, sport and extracurricular activities.
- Record and learn from serious incidents and near misses.
- Ensure allergy-specific arrangements comply with the school's separate Allergy Safety Policy and the 2026 statutory allergy guidance.

3. Roles and responsibilities

- The Governing Body is responsible for ensuring arrangements are in place and that sufficient staff are suitably trained and available to support pupils with medical conditions, including contingency and emergency arrangements.
- The Headteacher has overall responsibility for implementing this policy, ensuring staff are aware of it, ensuring appropriate training is available and that relevant information is shared safely.
- The Inclusion Leader coordinates Individual Healthcare Plans where required and supports reviews and transition arrangements.
- School staff must take account of the needs of pupils with medical conditions. Any member of staff may be asked to provide support, including administering medicines, although staff

should not undertake healthcare procedures for which they have not received appropriate information/training.

- Parents/carers should provide sufficient and up-to-date information, prescribed medicines and supplies, and participate in developing and reviewing IHPs.
- Pupils should be involved as far as appropriate in discussions about their medical support and, where competent, may manage their own medicines and procedures.
- Healthcare professionals provide clinical advice, treatment plans and training/competency support where required. School staff do not make clinical diagnoses or substitute their judgement for clinical advice.

4. Notification and Individual Healthcare Plans

When the school is notified that a pupil has a medical condition, it will consider what arrangements are required. An IHP will be developed where the condition is long-term and complex, fluctuating, carries a significant risk, requires emergency intervention, or where arrangements additional to or different from those generally available are needed.

The school, parent/carer and relevant healthcare professional should agree who will lead development of the IHP. The pupil will be involved where appropriate. The plan should be in place as soon as reasonably practicable and normally within two weeks of notification where possible.

- the medical condition, triggers, signs, symptoms and treatments;
- the pupil's resulting needs, including medication, equipment, dietary requirements, environmental issues and access to rest/toilet facilities;
- specific support for educational, social and emotional needs;
- the level of support required, including who will provide it and contingency arrangements;
- who in school needs to know and any confidentiality issues;
- arrangements for written permission for medicines or procedures where required;
- separate arrangements or procedures for educational visits or other activities; and
- what constitutes an emergency and what action should be taken, including whom to contact.

IHPs will be reviewed at least annually or earlier if evidence indicates that the pupil's needs have changed. For allergy, the school will apply the specific IHP expectations in its Allergy Safety Policy and attach any current Allergy/Asthma Action Plan.

5. Managing medicines

Medicines will be managed in accordance with the school's First Aid and Medicines Policy. Medicines should normally be in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The school will keep appropriate records of medicines administered.

Pupils who are competent to manage their own health needs will be encouraged to do so, with arrangements agreed in the IHP where relevant. Emergency medicines must be readily accessible. Medicines and devices will not be locked away where doing so would prevent prompt emergency access.

6. Unacceptable practice

It is not acceptable, unless supported by an individual risk assessment and medical evidence where appropriate, to:

- prevent pupils from easily accessing their inhalers or medication and administering 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/carers, or ignore medical evidence or opinion;

- send pupils with medical conditions home frequently or prevent them from staying for normal school activities unless this is specified in their IHP;
- penalise pupils for attendance where absences relate to their medical condition, including hospital appointments, contrary to applicable attendance requirements;
- prevent pupils from drinking, eating, taking toilet or other breaks whenever they need to in order to manage their condition effectively;
- require parents/carers to attend school to administer medication or provide medical support as a routine condition of attendance;
- require parents/carers to accompany their child on a school trip as a condition of participation;
- prevent pupils from participating in any aspect of school life, including educational visits, by imposing unnecessary barriers.

7. Educational visits and activities

Reasonable adjustments and risk assessments will be used to enable pupils with medical conditions to participate. Planning will consider the pupil's IHP, emergency arrangements, medication, staff competence, transport and the destination. Parents/carers will be consulted where appropriate but will not routinely be required to accompany their child.

8. Emergency procedures

All relevant staff will know what constitutes an emergency for pupils they support and what to do. In a medical emergency staff will provide first aid/support within their training, call 999 when required and follow the pupil's IHP or healthcare action plan.

- Give the emergency operator the school's location, postcode, best access point and the pupil's details and condition.
- Ensure a member of staff meets the ambulance crew.
- Contact parents/carers as soon as possible; their presence is not required before emergency treatment or ambulance transfer can occur.
- Where a pupil is taken to hospital and a parent/carer is not present, a member of staff will accompany them where reasonably practicable and remain until the parent/carer arrives. Staff will not normally transport a seriously ill or injured pupil in a private vehicle.

Anaphylaxis will be managed in accordance with the separate Allergy Safety Policy. Any member of staff or other person may take reasonable action in a life-threatening emergency, including administering adrenaline.

9. Information, confidentiality and safeguarding

Information about a pupil's medical condition will be shared with staff who need it to keep the pupil safe and support participation, including temporary and supply staff where relevant. Information will be handled in accordance with data-protection requirements. Medical information should be accessible in an emergency without unnecessary disclosure.

A medical condition may affect a pupil's wellbeing, attendance, behaviour or ability to communicate. Staff will remain alert to safeguarding and inclusion concerns and will avoid assumptions that a presentation is solely medical.

10. Serious incidents and near misses

The school will record and review serious medical incidents and near misses so that lessons can be learned. Parents/carers will be informed as appropriate. The designated leader will consider whether the pupil's IHP, risk assessment, training, communication or policy arrangements require revision and whether external/statutory reporting is required.

For allergy-related incidents and near misses, the more detailed recording, reporting, governing-body oversight and learning arrangements in the Allergy Safety Policy apply.

11. Insurance

The Governing Body will ensure that appropriate insurance arrangements are in place and that the level and scope of cover reflect the support provided to pupils with medical conditions. Staff acting within agreed school arrangements and their training will be covered in accordance with the school's insurance arrangements.

12. Complaints

Parents/carers who are dissatisfied with the support provided should raise concerns with the school promptly. If the matter is not resolved informally, the school's Complaints Procedure should be followed.

13. Monitoring and review

This policy will be reviewed annually and sooner where statutory guidance changes, significant needs arise, or learning from a serious incident or near miss indicates that arrangements should change.