



POLICY: Supporting Students with Medical Needs Policy

STATUTORY: Yes

DATE AGREED: March 2026

REVIEW DATE: March 2027

RESPONSIBLE MEMBER OF STAFF: R French and H Newnes

TRUSTEE COMMITTEE: Personnel & Welfare (approval by FTB)

SIGNED HEADTEACHER: J Holmes

SIGNED CHAIR OF TRUSTEES: R Whitehouse and M Clayton



JMHS Supporting Students with Medical Needs Policy

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1. Aims

This policy aims to ensure that:

- Pupils, staff and parents understand how our school will support pupils with medical conditions
- Pupils with medical conditions in terms of both physical and mental health are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities

This policy is implemented by:

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

The named people with responsibility for implementing this policy are Hayley Newnes (SENDCO) and Rebecca French (School Business Manager).

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 trustee boards to make arrangements for supporting pupils at their school with medical conditions.

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

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

3. Roles and responsibilities

3.1 The Trust Board

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

3.2 The Headteacher

The headteacher is responsible for:

- ensuring the policy is developed effectively with partner agencies;
- making sure all staff are aware of this policy and understand their role in its implementation;
- taking overall responsibility for the MCPs (Medical Care Plans); and

- ensuring the correct level of insurance is in place for staff who support students in line with this policy.

The headteacher has overall responsibility for the oversight of the MCPs; this has been delegated to the SENDCO. Plans will be reviewed annually or earlier if there is evidence that the student's needs have changed.

3.3 The SENDCO

The SENDCO is responsible for:

- liaising with healthcare professionals and appropriate staff where MCPs and EHCPs interlink;
- ensuring systems are in place for reviewing information annually where a student has an MCP and EHCPs; and
- Ensuring that Medical Care Plans (MCPs) are developed for all students.

3.4 The Lead First Aider

The lead first aider is responsible for:

- Contributing to the development of Medical Care Plans (MCPs);
- ensuring systems are in place for obtaining information about a student's medical needs and that this information is kept up to date;
- liaising with healthcare professionals and appropriate members of staff regarding the training required for staff;
- ensuring a sufficient number of trained members of staff are available to implement the policy and deliver MCPs in normal, contingency and emergency situations; and
- contacting healthcare professionals in the case of any student who has a medical condition.

3.5 Staff

Staff members are responsible for:

- taking appropriate steps to support students with medical conditions within lessons and school life;
- administering medication, if they have agreed to undertake that responsibility (administering medication trained members of staff);
- undertake training to achieve the necessary competency for supporting students with medical conditions; and
- familiarising themselves with procedures and protocols detailing how to respond when they become aware that a student with a medical condition needs help.

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.

Those who are asked to take on responsibility to support students with medical conditions will receive sufficient and suitable training.

3.6 Parents and carers

Parents and carers are responsible for:

- keeping the school informed about any changes to the student's health;
- where necessary be involved in the development and review of their child's MCP with staff members and healthcare professionals;
- complete a parental agreement as part of a Medical Care Plan for JMHS to administer medicine;
- ensure they provide as part of the implementation of the MCP medicines and equipment where appropriate; and discuss medications with the child prior to requesting that a staff member administers the medication; and
- ensuring the child is aware of the school procedures and protocols that are in place.

3.7 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 MCPs, as they are expected to comply with the written detail.

- Students who are competent will be encouraged to take responsibility for managing their own medicines and procedures once confirmed in their MCP;
- Where appropriate, students will be encouraged to take their own medicines under the supervision of the lead first aider, or another suitably qualified person on duty;
- Where possible, students will be allowed to carry emergency medicines and devices e.g. epi-pens.
- Other prescription medication will be located in a secure cabinet;
- If students refuse to take medication or to carry out a necessary procedure parents/carers will be informed, alongside their year leader so that alternative options can be explored.

3.8 School nurses and other healthcare professionals

School nurses and other healthcare professionals are responsible for notifying the school when a student has been identified with having a medical condition and will require support in school. This will be before the student starts school wherever possible. Healthcare professional such as GPs and paediatricians will liaise with the school nurses and notify them of any students identified as having medical conditions.

4. Equal Opportunities

The school will adhere to the legal responsibilities under the Equality Act 2010 and will not unlawfully discriminate against any pupils. Our school 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.

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.

5. 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 a MCP.

The school will make every effort to ensure that arrangements are put into place within two weeks, or by the beginning of the relevant term for pupils who are new to our school.

See Appendix 1.

6. Medical Care Plans

The headteacher has overall responsibility for the oversight of the MCPs; this has been delegated to the SENDCO. Plans will be reviewed 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:

- Key contacts
- Symptoms and management including medication
- The identification and management of what to do in an emergency

Not all students with a medical condition will require a MCP. It will be agreed with a healthcare professional and the parents/carers when a MCP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents/carers and a relevant healthcare professional. The student will be involved wherever appropriate. MCPs will be linked to or become part of an education health and care plan (EHCP). If a student has SEN but does not have a statement or EHCP the SEN will be mentioned in the MCP. The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed.

The SENDCO will consider the following when deciding what information to record on the MCP: the medical condition, its triggers, signs, symptoms and treatments;

- the student's resulting needs, including medication (doses, 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 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/carers 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/carer/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.

7. Managing medicines

Prescription medicines 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

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

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. 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.

7.1 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 who has been prescribed a controlled drug may have it in their possession if they are competent to do so in agreement with school staff and parents, but they must not pass it to another

pupil to use. All other controlled drugs are kept in a secure locked box in the medical room 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.

7.2 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 MCPs.

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 MCP and inform parents so that an alternative option can be considered, if necessary.

7.3 Avoiding unacceptable practice

JMHS School staff should use their discretion and judge each case individually with reference to the pupil's MCP, 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 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 MCPs;
- If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. hospital appointments;
- 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 pupil, 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 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.

8. Emergency procedures

- A first aid trained member of staff will lead the emergency and will call 999.
- If a student needs to be taken to hospital, a member of staff will remain with the student until their parent/carer arrives. Parents/carers will be notified as soon as practicably possible.
- Where a Medical Care Plan (MCP) is in place, it should detail:
 - What constitutes an emergency
 - What to do in an emergency
 - What will be shared with the ambulance if called.

9. Training of staff

- All staff should read and understand annually the Supporting Students with Medical Needs Policy;
- Staff will receive regular and ongoing training as relevant to their role;
- ALL staff who undertake responsibilities under this policy with a first aid role will receive the following training:
 - Epipen Training
 - First Aid Training –to the level required by the H&S executive
 - Other as required
- A record of first aid training of staff is maintained by the lead first aider;
- Other staff may receive any additional training deemed practical, relevant and necessary by the MCP;
- No staff member may undertake any health care specific/specialised procedures without undergoing training specific to responsibility;
- No staff member may administer drugs by injection unless they have received training in this responsibility.

10. Record keeping

The trustee board will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parents/carers will be informed if their child has been unwell at school.

MCPs are kept in a readily-accessible place that all staff are aware of.

11. Liability and indemnity

Insurance

- Staff who undertake responsibilities within this policy are covered by the school's insurance.
- Risk Protection Arrangement is our insurance provider, details are available from the School Business Manager.

12. Complaints

The details of how to make a complaint can be found in the Complaints Policy.

13. Monitoring arrangements

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

14. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Child protection and safeguarding
- Concerns and complaints
- Equality and diversity
- First aid
- Health and safety
- Special educational needs information report and policy

15. Asthma Policy

The school recognises that asthma is a serious medical condition for a very large number of students and that these students must have access to their reliever medications (inhalers).

It is essential that we are notified regarding a student's asthma and informed of the medications in information given to the school on entry to JMHS by parents/carers.

- Specifically with asthma, most students would not be expected to have a MCP, however JMHS requests that any student who is under the care of the hospital for asthma or who has been hospitalised with asthma in the last 12 months has a MCP. Please see Appendix 3, asthma criteria for medical care plan.

All relevant parties would be expected to comply with the following:

- inhalers should be labelled and carried with the student at all times so they can administer; spares can be kept in the medical room;
- inhalers must be taken on school trips and any updated information regarding acute illnesses relevant shared with appropriate staff;
- all staff will allow students to take their medication when they need to;
- there is an emergency inhaler in school for emergency use only – we request parents'/carers consent to the use of this in an emergency situation through consents given on entry to JMHS.

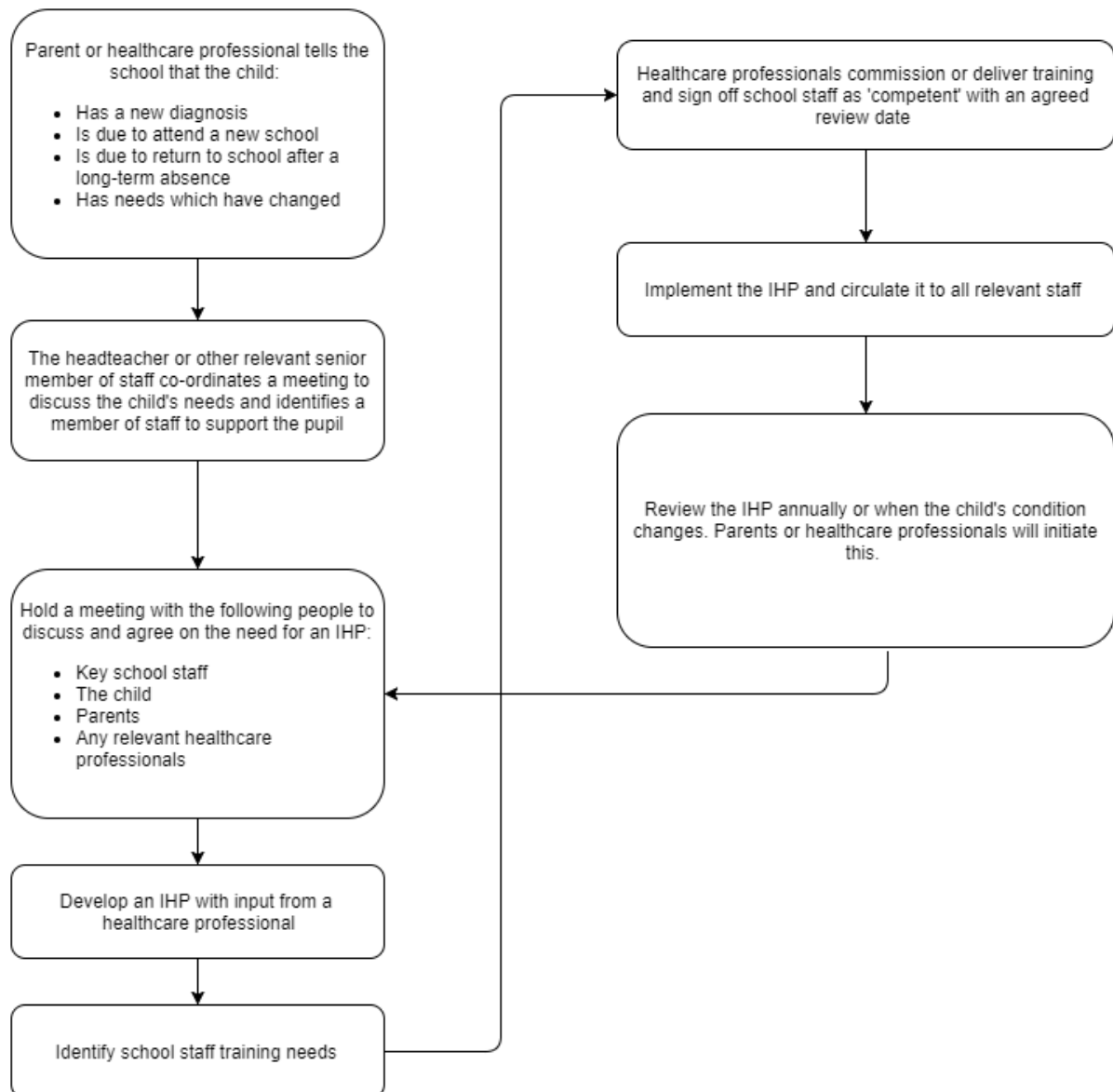
Emergency situation with asthmatic students

In the event a student doesn't have their inhaler then we may use the emergency inhaler as above or in exceptional circumstances may use another student's reliever inhaler (if an ambulance has been called).

Asthma and MCPs

- Information will be asked on entry regarding the severity of a student's asthma;
- We welcome any personal asthma plans to be shared and kept on school records as these may be helpful;
- If there is concern about the level of reliever used the school may also request a MCP be considered and/or should discuss with the family and direct to GP/healthcare for review. This concern should be registered with appropriate members of pastoral team;
- The school also needs to be made aware of any relevant precipitants for specific students so that triggers can be avoided where possible. Generally, the school has no pets, as far as possible does not use chemicals in science or art that may be asthma triggers, and complies with CLEAPPS advice.

Appendix 1: Being notified a child has a medical condition



Appendix 2 Asthma Criteria for Medical Care Plan

Name of student:

	Yes	No
Has your child been hospitalised with asthma in the past year?		
Is your child under the care of a paediatrician?		
Do you as the parent or your child's GP feel the child's condition warrants a healthcare plan?		
Does your child use a reliever inhaler frequently in school, causing concern?		
All students are expected to carry necessary reliever inhalers to school with them. Are you concerned that your child doesn't?		
Would you prefer you child NOT to receive the school salbutamol inhaler in an emergency?		

Conversation between parent and JMHS held on date:	Time:
Name and signature of JMHS staff:	



Appendix 3 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	

Medicine

Name/type of medicine <i>(as described on the container)</i>	
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



Appendix 4: Record of medicine administered to an individual child

Name of school/setting

Name of child

Date medicine provided by parent

Group/class/form

Quantity received

Name and strength of medicine

Expiry date

Quantity returned

Dose and frequency of medicine

Staff signature _____

Signature of parent _____

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

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Name of member of staff
Staff initials

Supporting students with medical needs policy version log

Version	Date	Done by	Comment	Approval
2.0	March 2024	Sally King Rebecca French	Update names of personnel in post Update managing medicines section in line with staff training Include appendices for administering medicine as per DfE templates	FGB 19 March 2024
3.0	March 2025	Rebecca French	Update names of personnel in post	FGB March 2025
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