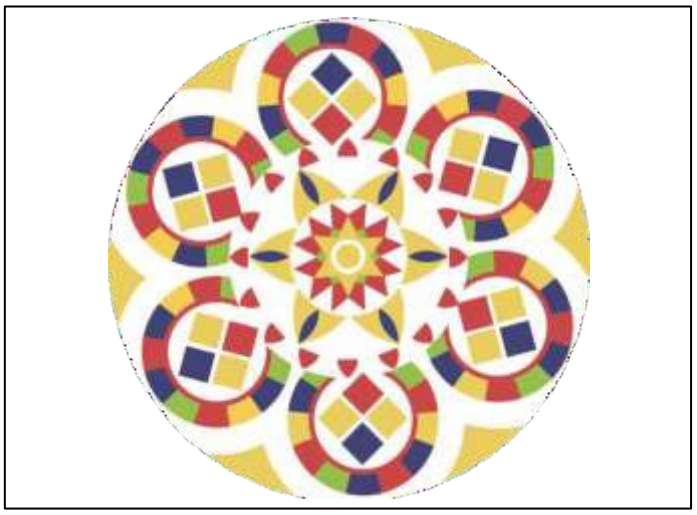
SPARKENHOE COMMUNITY PRIMARY SCHOOL



MANAGING MEDICINES AND HEALTHCARE NEEDS IN SCHOOL POLICY

2026

This policy should be read alongside:

The approved guidance of Leicester City Council in the guidance: Administration of Medicines and Healthcare, effective from June 2026. The LA guidance supersedes any previous guidance and includes the most recent guidance given in Health & Safety Management Standard Issue 8, issued in June 2026.

The school's Allergy Policy

Policy Date:	September 2026			
Policy Review Date:	September 2028		Headteacher R Jones	30th September 2026
Ratified by Governing Body: 4th July 2022				
Jo Webb			Chair of Governors	9th November 2026

Contents

1. Aims 2
2. Legislation and statutory responsibilities 2
3. Roles and responsibilities 3
4. Admissions 4
5. Equal opportunities 5
6. Day trips, residential visits and sporting activities 5
7. Being notified that a child has a medical condition 4
8. Individual healthcare plans 6
9. Managing medicines 8
10. Emergency procedures 10
11. Defibrillators 10
12. Training 10
13. Record keeping 11
14. Liability and indemnity 11
15. Complaints 11
16. Monitoring arrangements 11
17. Links to other policies 12

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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 are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities

The named person with responsibility for implementing this policy is Deputy Head (Pastoral) P Cooper

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

It is also based on the Department for Education's statutory guidance: Supporting pupils at school with medical conditions.

3. Roles and responsibilities

3.1 The governing board

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

The governing board will implement this policy by:

- Reviewing this policy alongside the headteacher and pastoral lead.
- Ensuring that this policy is readily accessible to parents and school staff.
- Fulfilling its statutory duties under legislation.
- Ensuring that arrangements are in place to support pupils with medical conditions.
- Ensuring that pupils with medical conditions can access and enjoy the same opportunities as any other pupil at the school.
- Ensuring that the focus is on the needs of each pupil and what support is required to support their individual needs.
- Instilling confidence in parents and pupils in the school's ability to provide effective support.
- Ensuring that all members of staff are properly trained to provide the necessary support and are able to access information and other teaching support materials as needed.
- Ensuring that pupils' health is not put at unnecessary risk. As a result, the board holds the right to not accept a pupil into school at times where it would be detrimental to the health of that pupil or others to do so, such as where the child has an infectious disease.
- Ensuring that policies, plans, procedures and systems are properly and effectively implemented.
- Ensuring that the school's policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support pupils and sets out the procedures to be followed whenever a school is notified that a pupil has a medical condition.
- Ensuring that the school's policy covers the role of individual healthcare plans, and who is responsible for their development, in supporting pupils at school with medical conditions.
- Ensuring that individual health care plans are reviewed at least annually, or earlier if evidence is presented that the child's needs have changed.

3.2 The Headteacher

The headteacher will be responsible for:

- Reviewing this policy alongside the governing board and pastoral lead.
- The overall implementation of this policy.
- Ensuring that this policy is effectively implemented with stakeholders.
- Ensuring that all staff are aware of this policy and understand their role in its implementation.
- Ensuring that all staff who need to know are aware of the child's condition.
- Ensuring that a sufficient number of staff are trained and available to implement this policy and deliver against all individual healthcare plans (IHPs), including in emergency situations.
- Considering recruitment needs for the specific purpose of ensuring pupils with medical conditions are properly supported.
- Having overall responsibility for the development of IHPs alongside the pastoral lead.
- Ensuring that staff are appropriately insured and aware of the insurance arrangements.
- Contacting the school nurse or other appropriate medical professionals where a pupil with a medical condition requires support that has not yet been identified.

- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

3.3 Staff

Staff will:

- Understand that supporting pupils 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 pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.
- Take into account the needs of pupils with medical conditions in their lessons when deciding whether or not to volunteer to administer medication.
- Receive sufficient training and achieve the required level of competency before taking responsibility for supporting pupils with medical conditions.
- Through training, know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

3.4 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
  provide sufficient contact details to ensure that they, or another nominated adult are contactable at all times

3.5 Pupils

Pupils will:

- Be fully involved in discussions about their medical support needs, where applicable.
- Contribute to the development of their IHP, if they have one, where applicable.
- Engage with and follow their IHP, if they have one, where applicable.
- Be sensitive to the needs of any pupils with medical conditions.

3.6 School nurses and other healthcare professionals

Our school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible.

Healthcare professionals, such as GPs and pediatricians, will liaise with the schools nurses and notify them of any pupils identified as having a medical condition.

4. Admissions

- Admissions will be managed in line with the school's Admissions Policy.
- No child will be denied admission to the school or prevented from taking up a school place because arrangements for their medical condition have not been made; a child may only be refused admission if it would be detrimental to the health of the child to admit them into the school setting.

- The school will not ask, or use any supplementary forms that ask, for details about a child's medical condition during the admission process apart form understanding what the school may need to put in place to support the child.

5. Equal opportunities

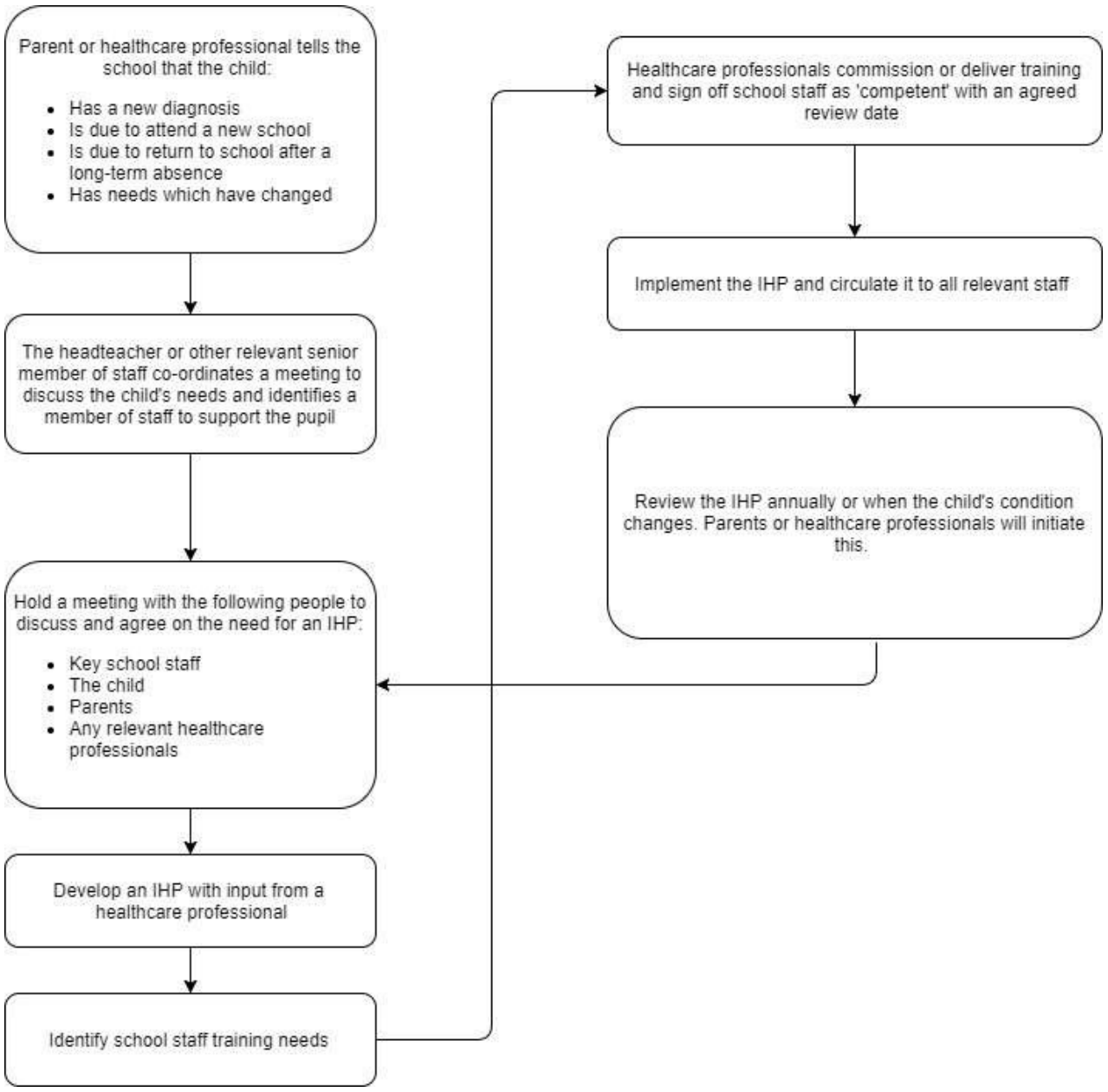
- Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.
- The school will consider what reasonable adjustments need to be made to enable these pupils to participate 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.

6. Day trips, residential visits and sporting activities

- Pupils with medical conditions will be supported to participate in school trips, sporting activities and residential visits.
- Prior to an activity taking place, the school will conduct a risk assessment to identify what reasonable adjustments should be taken to enable pupils with medical conditions to participate. In addition to a risk assessment, advice will be sought from pupils, parents and relevant medical professionals. The school will arrange for adjustments to be made for all pupils to participate, except where evidence from a clinician, e.g. a GP, indicates that this is not possible.

7. Being notified that a child has a medical condition

- When the school is notified that a pupil has a medical condition that requires support in school, the pastoral lead will inform the headteacher. Following this, the school will arrange a meeting with parents, healthcare professionals where appropriate and the pupil, with a view to discussing the necessity of an IHP, outlined in detail in the IHPs section of this policy.
- The school will not wait for a formal diagnosis before providing support to pupils. Where a pupil's medical condition is unclear, or where there is a difference of opinion concerning what support is required, a judgement will be made by the headteacher based on all available evidence, including medical evidence and consultation with parents.
- For a pupil starting at the school in a September uptake, arrangements will be put in place prior to their introduction and informed by their previous institution. Where a pupil joins the school mid-term or a new diagnosis is received, The school will make every effort to ensure that arrangements will be put in place within two weeks, or by the beginning of the relevant term for pupils who are new to our school.



8. Individual healthcare plans

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to deputy headteacher (Pastoral lead), P Cooper

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed. Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all pupils 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 not a consensus, the headteacher will make the final decision.

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

IHPs can be linked to, or become part of, any statement of special educational needs (SEN) or education, health and care (EHC) plan. If a pupil has SEN but does not have a statement or EHC plan, the SEN can 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 board and the headteacher/SENDCo/pastoral lead, will consider the following when deciding what information to record on IHPs:

- The medical condition along with its triggers, signs, symptoms and treatments
- The pupil'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, e.g. crowded corridors, travel time between lessons
- Specific support for the pupil'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 pupil 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 pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- Cover arrangements for when a named member of staff is unavailable
- Who in the school needs to be aware of the pupil'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 pupil 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/pupil, the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency, including who to contact, and contingency arrangements
- Where a pupil has an emergency healthcare plan prepared by their lead clinician, this will be used to inform the IHP.
- The IHP will be developed with the child's best interests in mind. In preparing the IHP the school will assess and manage risks to the child's education, health and social wellbeing, and minimise disruption.
- IHPs will be easily accessible to those who need to refer to them, but confidentiality will be preserved.
- Where a child is returning from a period of hospital education, alternative provision or home tuition, the school will work with the LA and education provider to ensure that their IHP identifies the support the child will need to reintegrate.
- All IHPs will be reviewed at least annually, or earlier if evidence is presented that the child's needs have changed.

An example plan is included in the Allergy Policy

9. Managing medicines

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.

Pupils under 16 will not be given medicine containing aspirin or medicines containing ibuprofen unless prescribed by a doctor.

Anyone giving a pupil 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. 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.

9.1 Non-prescription medicines

Government guidance allows for non-prescription medicines to be given where there is a reasonable request, providing the necessary consent forms are in place.

If a child has a recurring minor illness that parents believe is improved by regular administration of pain medicine, or anti-allergy medicine, then medicine provided by the parent may be administered in school following all of the directives in section 7.0.

All applications for administration of non-prescription medicines must be authorised by the Head Teacher or the Deputy Head Teacher (Pastoral)

9.2 Controlled drugs

Controlled drugs will be stored in a non-portable container and only named staff members will have access; however, these drugs can be easily accessed in an emergency. A record will be kept of the amount of controlled drugs held and any doses administered. Staff may administer a controlled drug to a pupil for whom it has been prescribed, in accordance with the prescriber's instructions.

9.3 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 IHPs.

Pupils will be allowed to carry their own medicines and relevant devices wherever possible.

This policy should be read alongside the Allergy Policy

The school will hold asthma inhalers for emergency use. The inhalers will be stored in the medical room and their use will be recorded. Inhalers will be used in line with the school's Allergy Policy.

The school will hold adrenaline pens for emergency use. The adrenaline pens will be stored in the medical room and their use will be recorded. Adrenaline pens will be used in line with the school's Allergy Policy.

Records will be kept of all medicines administered to individual pupils, stating what, how and how much medicine was administered, when, and by whom. A record of side effects presented will also be held.

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

9.4 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable to:

9.4.1 Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
9.4.2 Assume that every pupil with the same condition requires the same treatment
9.4.3 Ignore the views of the pupil or their parents
9.4.4 Ignore medical evidence or opinion (although this may be challenged)
9.4.5 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
9.4.6 If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
9.4.7 Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
9.4.8 Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
9.4.9 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

9.4.10 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

9.4.11 Administer, or ask pupils to administer medicine in school toilets

10. Emergency procedures

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

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

11. Defibrillators

The school has automated external defibrillators (AED). The AEDs will be stored in on the work surface in the Saxby medical room / The Ark reception desk.

All staff members and pupils will be made aware of the AED's location and what to do in an emergency.

No training will be needed to use the AED, as voice and/or visual prompts guide the rescuer through the entire process from when the device is first switched on or opened; however, staff members will be trained in cardiopulmonary resuscitation (CPR), as this is an essential part of first-aid and AED use.

The emergency services will always be called where an AED is used or requires using.

The AEDs have with adult / paediatric pads.

Maintenance checks will be undertaken on AEDs on a termly basis by the pastoral lead, who will also keep an up-to-date record of all checks and maintenance work.

12. Training

Staff who are responsible for supporting pupils 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 pupils 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 headteacher/ deputy headteacher (Pastoral) / SENDCo

. 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 pupils
- 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.

13. Record keeping

The governing board will ensure that written records are kept of all medicine administered to pupils. Parents will be informed if their pupil has been unwell at school.

IHPs are kept in a readily accessible place which all staff are aware of.

14. Liability and indemnity

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

As stated in **Administration of Medicines & Healthcare Needs**

If those staff, who have volunteered to administer medicines, act in accordance with their training and follow guidelines contained in this bulletin they will be covered by the employers' liability insurance.

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

15. Complaints

Parents with a complaint about their child's medical condition should discuss these directly with the headteacher/ deputy headteacher (*Pastoral) in the first instance. If the headteacher/ deputy headteacher (Pastoral) cannot* resolve the matter, they will direct parents to the Trust's complaints procedure.

16. Monitoring arrangements

This policy will be reviewed and approved by the governing board every 2 years.

17. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Allergy plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding policy
- Special educational needs information report and policy