Students with medical needs policy (including children with Health Needs who cannot attend school)

Version	Author	Date	Changes
4	N Daniel (Headteacher)	November 2025	Evident in red
3	N Daniel (Headteacher)	15/11/24	Evident in red
2	N Daniel (Associate Head)	18/11/23	Evident in red
1	SENDCo R Tindall (Deputy Head Teacher)	12/12/20	
Distribution **Essential reading for:** **Information for:**		All staff, parents of students with medical needs All stakeholders of the school	

This policy will be reviewed according to The Mercian Trust's Policy Schedule. If there are any changes in legislation or legal requirements, an earlier review will be conducted to ensure compliance and relevance.

Rationale and Equal Opportunities

Queen Mary's High School provides a fully inclusive educational and pastoral system. We aim to enable any pupil with a long-term medical condition to be able to attend school or have minimum disruption to their education. Queen Mary's High School believes it is every student's right to access education safely and we ensure we cater for the needs of individual students. This policy offers support to staff in managing students with diagnosed medical conditions.
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.

The purpose of this policy is to:

- Ensure that pupils with medical conditions are well supported in school and have full access to education, including school trips and physical education
- Ensure that there is clarity around the holding and administering of medication at school
- Ensure that information about a child's needs is shared appropriately by health professionals, school staff, parents and pupils
- Ensure that all parties understand how Queen Mary's High School will support pupils with medical conditions
- Develop staff knowledge and training in all areas necessary for our pupils
- Ensure suitable education is arranged for pupils on roll who cannot attend school due to health needs
- Ensure pupils, staff and parents/carers understand what our school is responsible for when education is being provided by the local authority (LA)

In delegating responsibility to the SENDCo and Senior Leadership Team, the Local Governing Board will implement this policy by

- Ensuring that sufficient staff are suitably trained
- Making staff aware of pupil's conditions, where appropriate
- Making sure there are arrangements to ensure someone is always available to support pupils with medical conditions
- Providing visitors to the school with appropriate information about the policy and relevant pupils
- Developing and monitoring individual healthcare plans

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 (DfE)'s statutory guidance on supporting pupils with medical conditions at school.

The following legislation gives guidance on how schools should deal with students with medical conditions and school procedures for administering first aid:

- The Education Act 2005
- The Education and Inspections Act 2006
- The Education (Parenting Contracts and Parenting Orders) (England) Regulations 2007
- The Education (Penalty Notices) (England) Regulations 2007 and amendments
- The Education and Skills Act 2008
- Children and Families Act 2014
- Statutory guidance for supporting pupils at school with medical conditions February 2015

Roles and Responsibilities

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 Headteacher 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 pupils in this way
- Manage cover arrangements in the case of staff absence or turnover, to make sure a suitable staff member is always available, and supply staff are briefed appropriately about pupils' medical needs
- Contact the school nursing service in the case of any pupil 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
- 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 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.

Those staff who take on the responsibility to support pupils 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 pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

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 that medicine provided to school is in date and exchanged prior to the expiration date

Pupils:

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils 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.

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. They may also support staff to implement a child's IHP.

Healthcare professionals, such as GPs and paediatricians, will liaise with the school's nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

Notification of students with medical conditions

Queen Mary's High School asks parents to keep us informed of all medical conditions as and when they are diagnosed. Reception is available for parents to inform school of new or changed medical conditions. Parents can either make school aware of medical conditions either;

- Using the Personal Information Form on enrolment
- Via email or telephone contact with the school

The school administrator records and maintains medical information the medical condition using SIMS and updates staff. If necessary, parents will be asked to complete an individual healthcare plan in collaboration with the SENDCo.

For students moving to Queen Mary's High School in year seven healthcare plans will be updated at the point of transition. For in year admissions healthcare plans will be updated within a month window of the student's start date to Queen Mary's High School.

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 pupils who are new to our school.

Individual Healthcare Plans

The Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to the SENCo working alongside the Lead First Aider and Senior Leadership Team. The SENCo and Lead First Aider oversee the individual healthcare plans, working with parents of the students and healthcare professional to ensure they are accurate, appropriate and give staff clear guidance on what to do in an emergency. A template Queen Mary's High School Healthcare Plan can be found in appendix A. Healthcare plans are reviewed annually at the beginning of an academic year, or earlier if there is evidence that a pupil's needs have changed.

Parents have a responsibility to keep the school informed of any changes and are asked to review the healthcare plan each year.

If a child has a special educational need or disability and has an Education and Health Care Plan (EHCP) the healthcare plan will reflect the content ensuring that where appropriate the targets from the EHPC are being met. If a pupil has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP.

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 no consensus, the headteacher will make the final decision.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The SENCo will consider the following when deciding what information to record on IHPs:

- The medical condition, 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
- 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

Managing medicines

Prescription 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.

Pupils under 16 will not be given medicine containing aspirin 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 always 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.

Students who are competent should be encouraged to take responsibility for managing their own medicines and procedures. Wherever possible, students should be allowed to carry their own medicines and relevant devices or should be able to access their medicines for self-medication, quickly and easily. Students will be able to come to the reception to administer medication.

If a student 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 should be informed.

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/carers and it will be reflected in their IHPs.

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 IHP and inform parents/carers 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 pupil's IHP, 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/carers
- 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 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/carers, 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/carer 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/carers to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

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.

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 SENCo. 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.

Communication and complaints

If you wish to discuss your child's medical needs or are unhappy about any issues regarding the school's response to meeting these needs, please contact the school.

Children with Health Needs who cannot attend school.

Responsibilities of the school

Initially, our school will attempt to make arrangements to deliver the same high standard of education for children with health needs who cannot attend school.

- The Designated Safeguarding Lead and/or Deputy Headteacher will be responsible for making and the regular monitoring of these arrangements.
- The arrangements for the provision of education will be considered on a case by case basis depending on the child's condition and needs. This may include participation in virtual lessons on a full or part time basis, setting and assessing of work on teams, the use of hospital school amongst other options.
- These decisions will be made with the student and their family to help us find a balance between student educational and medical need.
- We will maintain contact with the student on at least a weekly basis to keep them updated on school life.
- A reintegration plan will be developed with the student and their family once the child is able to return to school.

Responsibilities of the Local Authority.

Given the nature of our intake, Queen Mary's High School works across a number of local authorities. The illustrative example below is from Walsall, the local authority in which the school is located.

If our school cannot make suitable arrangements, or if it is clear that a child will be away from school for 15 days (consecutive or over the course of the year) or more because of their health needs the student's local authority will become responsible for arranging suitable education for these children.

When the local authority arranges alternative education, the education should begin as soon as possible, and at the latest by the 6th day of the child's absence from school.

Where full-time education is not in the child's best interest for reasons relating to their physical or mental health, the local authority must arrange part-time education on whatever basis it considers to be in the child's best interests.

Summary Table Walsall LA Processes for Children with Medical Needs

Step	Action	Who is Responsible	Timeline
1	Identify need and support in school	School/DSL	Ongoing
2	Referral to LA if needs cannot be met	DSL/Staff	Immediate
3	LA decision on provision	Walsall Council	1 working day
4	Arrange alternative provision	Walsall Council	As soon as possible
5	Ongoing review and reintegration	School & LA	Regularly

In cases where the local authority makes the arrangements, our school will:

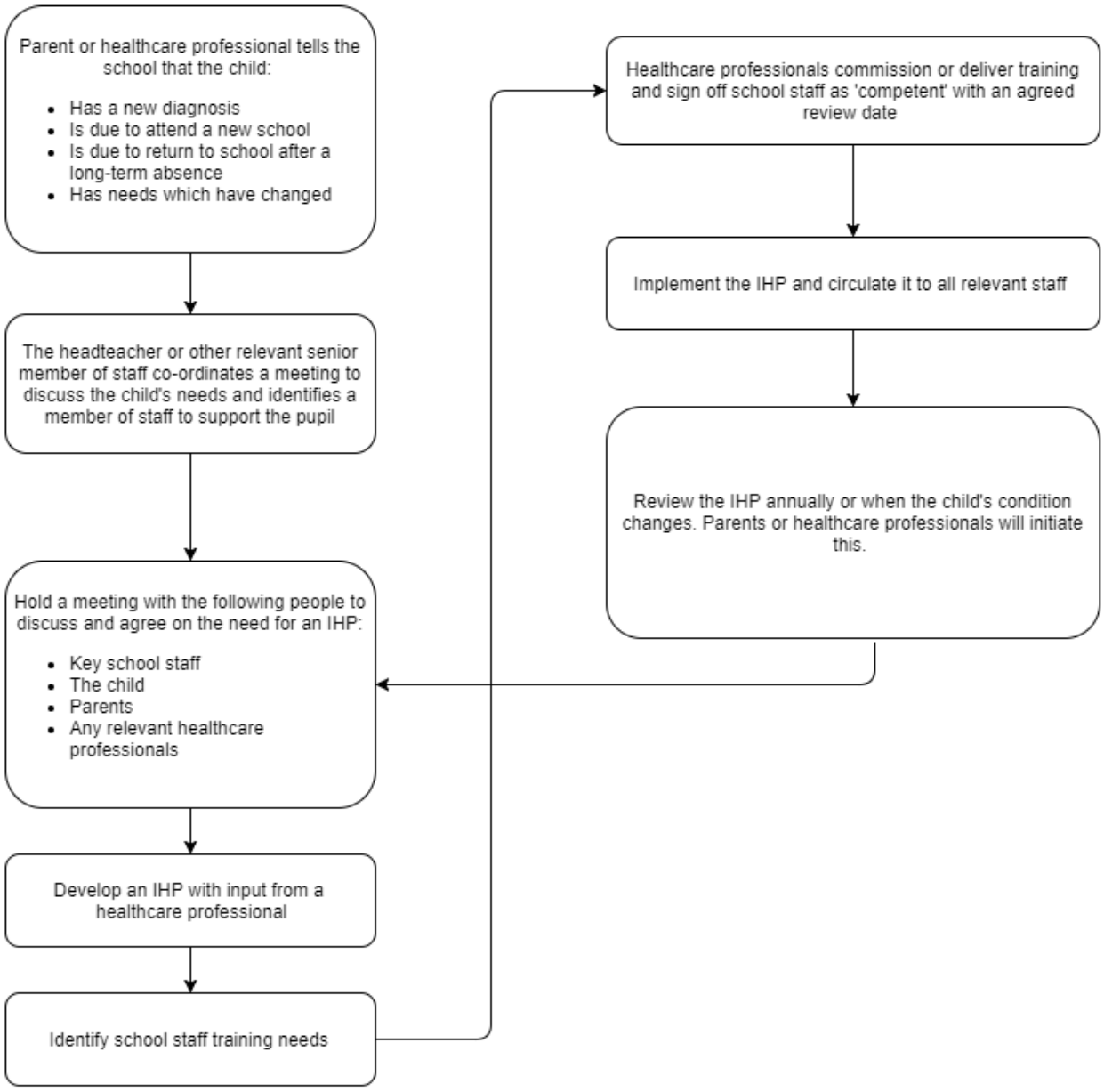
- Work constructively with the local authority, providers, relevant agencies and parents/carers to ensure the best outcomes for the child
- Collaborate with the local authority to ensure continuity of provision and consistency of curriculum, including making information available about the curriculum

- Along with the local authority, regularly review the provision offered to ensure it continues to be appropriate for the child and that it is providing suitable education
- Share information with the local authority and relevant health services as required
- When a child has complex or long-term health issues, work with the local authority, parents/carers and the relevant health services to decide how best to meet the child's needs (e.g. through individual support, arranging alternative provision or by them remaining at school, being supported at home and back into school after each absence)
- Where possible, allow the child to take examinations at the same time as their peers, and work with the local authority to support this
- Help make sure that the child can be reintegrated back into school successfully
- When reintegration is anticipated, work with the local authority to:
  - Plan for consistent provision during and after the period of education outside the school, allowing the child to access the same curriculum and materials that they would have used in school as far as possible, including through digital resources
  - Enable the child to stay in touch with school life (e.g. through newsletters, emails, digital learning platforms, social media platforms, invitations to school events or internet links to lessons from their school), and, where appropriate, through educational visits
  - Create individually tailored reintegration plans for each child returning to school, which includes extra support to fill any gaps arising from the absence
  - Consider whether any reasonable adjustments need to be made

This policy should be read in conjunction with:

SEND policy
First Aid Policy
Allergy management policy

Being notified a child has a medical condition



Appendix A

QUEEN MARY'S HIGH SCHOOL
INDIVIDUAL HEALTH CARE PLAN

For ongoing medical conditions or where medicine is stored in school on a long-term or emergency only basis

Student's Details

Pupil Name	
Form Group	
Date of Birth	
Home Address	
Summary of Medical Condition(s)	

Doctor's Details

GP Name	
Surgery Address	
Surgery Contact	

Specialist Consultant or Care Professional's Details

Name	
Address	
Contact Number	

Date of Plan		**Proposed Date of Review**	

Describe your child's medical needs and give details of symptoms, signs, triggers, etc.

Details of medication required in school including the dose, method, timing, side-effects, contra-indicators, etc. Please also state who is responsible for administering the medication (self-administered, supervised, etc) and if there are any specific storage requirements (e.g. to be kept in a fridge).

Please inform us of any other daily care requirements needed in school, including if there is any specific support required for pupil's educational, social and emotional needs.

Please state any other or different arrangements required for school visits or trips.

Is there any other relevant information we need to be aware of?

Parental and Pupil Agreement

I give consent for staff to supervise medication / medical care as indicated above in accordance with the school's Supporting Student's with Medical Needs Policy. I agree that medical information contained in this plan may be shared with individuals involved with my child's care and education (including emergency services). I understand that it is my responsibility to notify the school if there are any changes in these arrangements and to ensure that current, in-date medication is provided where required.

Pupil's Signature:		**Date:**	
Parent's Signature:		**Date:**	
Parent's Name: (BLOCK CAPITALS)		**Parent's Contact Number:**	

School Notes or Remarks

EMERGENCY ARRANGEMENTS

Briefly describe what constitutes an emergency for your child.

Details of emergency medication (including dosage and how it is to be administered, etc) and any other emergency action required.

Who should we contact in an emergency and at what point? This question relates to less serious emergencies. If staff have an immediate concern for life, they will always phone 999.

Asthma (pupils with a medical diagnosis of Asthma)
Do you consent to your child using the emergency asthma inhaler kit, should their personal inhaler not be available?

Yes / No

Anaphylaxis (pupils with a medical diagnosis of Anaphylaxis and who have been prescribed an adrenaline auto-injector / EpiPen)
Do you consent to your child using the emergency adrenaline kit, should their personal adrenaline auto-injector not be available?

Yes / No