

Title	Supporting Learners with Medical Conditions Policy
Year	2026/2027
Policy Reference	Browne Jacobson LLP
Staff Link	SENCo
Trust Link	SEND Trustee
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As a proprietor of one or more academies, Wootton Park Academy Trust has a legal duty to make arrangements for supporting learners with medical conditions attending a Trust school. The board of Wootton Park Academy Trust has delegated this responsibility to the school.

Each school within the Trust has adopted this policy to set out the arrangements it has put in place for its learners with medical conditions.

Overriding principles

Children and young people with medical conditions are entitled to a full education. The Trust is committed to ensuring that learners with medical conditions are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

This policy is designed to support the management of medication and medical care in school and to support individual learners with medical needs. The policy is drawn up under guidance issued in section 100 of the Children and Families Act 2014, whereby all schools have a duty to make arrangements for learners with medical conditions.

In the case of learners with medical needs, the responsibility of the Trust is to make sure that safety measures cover the needs of all learners attending a Trust school. This may mean making reasonable adjustments or special arrangements for particular learners so that they can, in as far as is reasonably possible, access their full and equal entitlement to all aspects of the curriculum. This will include actively supporting learners with medical conditions to participate in school trips/visits and/or in sporting activities.

The Trust is aware that some learners with medical conditions may have a disability. Where this is the case the Trust ensures that each school complies with the duties under the Equality Act 2010. Some learners may also have Special Educational Needs (SEN) and may have an Education, Health and Care (EHC) Plan which brings together health and social care needs, as well as their special educational provision. For learners with SEND, this guidance should be read in conjunction with the SEND Code of Practice 2015 and the relevant school's Special Educational Needs and Disabilities Policy.

1 Definition of “medical condition”

1.1 For the purposes of this policy, a medical condition is any illness or disability which a learner has. It can be:

- physical or mental
- a single episode or recurrent
- short-term or long-term
- relatively straightforward (e.g. the learner can manage the condition themselves without support or monitoring) or complex (requiring on-going support, medicines or care whilst at school to help the learner manage their condition and keep them well)
- involving medication or medical equipment
- affecting participation in school activities or limiting access to education

1.2 Medical conditions may change over time, in ways that cannot always be predicted.

2 Policy implementation

2.1 The person with overall responsibility for the successful administering and implementation of this policy is the Head of School/Headteacher.

2.2 The Head of School/Headteacher has overall responsibility for ensuring:

- that sufficient staff are suitably trained to meet the known medical conditions of learners at the school

- all relevant staff are made aware of the learner's medical condition and cover supervisors are properly briefed
- cover arrangements are in place to cover staff absences/turnover to ensure that someone is always available and on site to support learners with medical conditions
- risk assessments for school visits, holidays and other school activities outside of the normal timetable are completed
- individual healthcare plans are prepared where appropriate and are monitored

3 Notification that a learner has a medical condition

- 3.1 Ordinarily, the learner's parent/carer will notify the school that their child has a medical condition. Parents/carers should ideally provide this information in writing addressed to the Head of School/Headteacher, however they may sometimes pass this information on to a class teacher or another member of staff. Any staff member receiving notification that a learner has a medical condition should notify the Head of School/Headteacher as soon as practicable.
- 3.2 A learner themselves may disclose that they have a medical condition. The staff member to whom the disclosure is made should notify the Head of School/Headteacher as soon as practicable.
- 3.3 Notification may also be received direct from the learner's healthcare provider or from a setting from which a child may be joining the school. The school may also instigate the procedure themselves where the learner is returning after a long-term absence.

4 Procedure following notification that a learner has a medical condition

- 4.1 Except in exceptional circumstances where the learner does not wish their parent/carer to know about their medical condition, the learner's parents/carers will be contacted by the Head of School/Headteacher, or someone designated by them, as soon as practicable to discuss what, if any, arrangements need to be put into place to support the learner. Every effort will be made to encourage the learner to involve their parents while respecting their right to confidentiality.
- 4.2 Unless the medical condition is short-term and relatively straightforward (e.g. the learner can manage the condition themselves without any support or monitoring), a meeting will normally be held to:
- discuss the learner's medical support needs
 - identify a member of school staff who will provide support to the learner where appropriate
 - determine whether an individual healthcare plan (IHP) is needed and, if so, what information it should contain
- 4.3 Where possible, the learner will be enabled and encouraged to attend the meeting and speak on their own behalf, taking into account the learner's age and understanding. Where this is not appropriate, the learner will be given the opportunity to feed in their views by other means, such as setting their views out in writing.
- 4.4 The healthcare professional(s) with responsibility for the learner may be invited to the meeting or be asked to prepare written evidence about the learner's medical condition for consideration. Where appropriate, their advice will be sought on the need for, and the writing of, an IHP.
- 4.5 In cases where a learner's medical condition is unclear, or where there is a difference of opinion, the Head of School/Headteacher will exercise their professional judgement based on the available evidence to determine whether an IHP is needed and/or what support to provide.
- 4.6 Learners with medical conditions have the same right of admission to school as other learners and cannot be refused admission or excluded from school on medical grounds alone. For learners joining the school at the start of the school year, where possible, any support arrangements will be made in time for the start of the school term. In other cases, such as a new diagnosis or a learner moving to the school mid-term, every effort will be made to ensure that any support arrangements are put in place within two weeks.

- 4.7 In line with our safeguarding duties, the school will ensure that learner's health is not put at unnecessary risk from, for example infectious diseases. The school will not accept a learner into the school at times where it will be detrimental to the health of that learner or others.

5 Learners with health needs who cannot attend school

- 5.1 Where a learner cannot attend school because of health needs, unless it is evident at the outset that the learner will be absent for 15 or more days, the school will initially follow the usual process around attendance and mark the learner as ill for the purposes of the register.
- 5.2 The school will provide support to learners who are absent from school because of illness for a period shorter than 15 days. This may include providing learners with wellbeing checks, relevant information, curriculum materials and resources.
- 5.3 In accordance with the Department for Education's statutory guidance¹, as soon as it is clear that a learner will be away from school for 15 days or more (either consecutive or over the course of a school year) because of their health needs, the local authority should:
- (i) be ready to take responsibility for arranging suitable full-time education for that learner; and
 - (ii) arrange for this provision to be in place as soon as it is clear that the absence will last for more than 15 days.

The school will inform and work collaboratively with the local authority to support these responsibilities.

- 5.4 The school will work collaboratively with the local authority, relevant medical professionals, relevant education providers, parents and, where appropriate, the learner, to identify and meet the learner's educational needs throughout the period of absence and to remain in touch with the learner throughout.
- 5.5 When a learner is considered well enough to return to full time education at the school, the Head of School/Headteacher or someone designated by them will develop a reintegration plan in partnership with the appropriate individuals/organisations.

6 Individual Healthcare Plans (IHP)

- 6.1 Where a learner has more complex or long-term medical needs, an Individual Healthcare Plan may be created by relevant medical professionals in consultation with parents/carers, school staff and the learner.
- 6.2 Individual Healthcare plans will be written, monitored and reviewed regularly and will include the views and wishes of the learner and parent/carer in addition to the advice of relevant medical professionals.
- 6.3 The local authority will also be asked to contribute where the learner accesses home-to-school transport to ensure that the authority's own transport healthcare plans are consistent with the IHP.
- 6.4 The aim of the IHP is to capture the steps which the school needs to take to help the learner manage their condition and overcome any potential barriers to getting the most from their education. It will be developed with the learner's best interests in mind. In preparing the IHP the school will be required to assess and manage the risk to the learner's education, health and social well-being and minimise disruption.

6.5 IHPs may include:

- details of the medical condition, its triggers, signs, symptoms and treatments
- the learner'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 or travel time between lessons
- specific support for the learner's educational, social and emotional needs – for example, how absences will be managed, possible requirements for supervised medical/rest breaks or assessment for additional time to complete exams, use of rest periods or additional support in catching up with lessons or wellbeing sessions
- the level of support needed, including in emergencies; if a learner 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 learner'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 learner's condition and the support required
- arrangements for written permission from parents/carers and the Head of School/Headteacher for medication to be administered by a member of staff, or self-administered by the learner 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 learner can participate, e.g. risk assessments
- where confidentiality issues are raised by the parent/learner, the designated individuals to be entrusted with information about the learner's condition
- what to do in an emergency, including whom to contact, and contingency arrangements; some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their IHP

6.6 The IHP will also clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. If a learner (regardless of whether they have an IHP) needs to be taken to hospital, staff will stay with the learner until the parent/carer arrives, or accompany a learner taken to hospital by ambulance.

6.7 Where the healthcare provider is better placed to do so, they will create the IHP. School will take the lead in writing the plan if appropriate and will ensure that it is finalised and implemented.

6.8 Where a learner is returning to the school following a period of hospital education or alternative provision (including home tuition), the school will work with the local authority and education provider to ensure that the IHP identifies the support the learner will need to reintegrate effectively.

6.9 Where the learner has a special educational need identified in an Education, Health and Care Plan (EHCP), the IHP will be linked to or become part of that EHCP.

7 Reviewing Individual Healthcare Plans (IHP)

7.1 Every IHP shall be reviewed at least annually. The Head of School/Headteacher (or someone designated by them) shall, as soon as practicable, contact the learner's parents/carers and the relevant healthcare provider to ascertain whether the current IHP is still needed or needs to be changed. If the school receives notification that the learner's needs have changed, a review of the IHP will be undertaken as soon as practicable.

7.2 Where practicable, staff who provide support to the learner with the medical condition shall be included in any meetings where the learner's condition is discussed.

8 Staff training

8.1 The Head of School/Headteacher is responsible for:

- ensuring that all staff (including new staff) are aware of this policy for supporting learners with medical conditions and understand their role in its implementation
- working with relevant healthcare professionals and other external agencies to identify staff training requirements and commission training required
- ensuring all staff have access to the school's Medical Needs Register and are informed of what to do in an emergency
- ensuring all staff managing and supervising self-administration of medicines receive appropriate training and advice from health professionals
- ensuring staff training is provided to support the administration of emergency medications such as Epi-pens or insulin
- ensuring only staff who have received this training administer such medications
- ensuring First Aid Training is provided for staff wishing to complete this course
- ensuring the school keeps a register of staff who have undertaken the relevant training as well as of those who are Paediatric First-Aid trained

8.2 In addition, all members of school staff will know what to do and respond accordingly when they become aware that a learner with a medical condition needs help.

8.3 The school has in place appropriate levels of insurance regarding staff providing support to learners with medical conditions, including the administration of medication. Copies of the school's insurance policies can be made accessible to staff as required.

9 Administering medication

9.1 Written permission from parents/carers and the Head of School/Headteacher is required for prescription and non-prescription medicines to be administered by a member of staff or self-administered by the learner during school hours.

9.2 Medicines will only be administered at school when it would be detrimental to a learner's health or school attendance not to do so. Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside of school hours.

9.3 If a learner requires prescribed medicines or medical devices, such as asthma inhalers, blood glucose testing meters or adrenaline pens, in school it is vital that the parent/carer advises the school accordingly, so that the process for storing and administering medication can be properly discussed.

9.4 The school will only accept prescribed or over the counter medicines that are in-date, labelled, provided in the original container and clearly labelled with the learner's name. The exception to this is insulin which must still be in date, but will generally be available inside an insulin pen or a pump, rather than its original container.

9.5 Where medicines have been dispensed by a pharmacist, they must include instructions for administration, dosage and storage. Parents/carers must also complete a consent form for the medication to be administered. The school will not make changes to dosages on parental instructions.

9.6 Where medicines have been purchased over the counter, parents/carers must sign a consent form which clearly details the dosage and time for medication to be administered.

9.7 Parents/carers must confirm that the medicine has been previously administered to their child without adverse effect.

- 9.8 The learner and staff supporting the learner with their medical condition should know where their medicines are at all times and be able to access them when needed. The most appropriate method for storing medicines and medical devices will be discussed with the learner's parent/carer but the school will ultimately decide the approach to be taken.
- 9.9 Wherever possible, learners will be allowed to carry their own medicines and relevant devices or be able to access their medicines for self-medication quickly and easily. Where it is appropriate to do so, learners will be encouraged to administer their own medication, under staff supervision if necessary. Staff administering medication should do so in accordance with the prescriber's instructions. Staff who volunteer to assist in the administration of medication will receive appropriate training and guidance before administering medication. Learners will not be allowed to carry their own medicines if these are controlled drugs - these must remain locked in the secure cabinet in the Main Reception office.
- 9.10 The school will keep a record of all medicines administered to individual learners, stating what, how and how much was administered, when and by whom. Any side effects of the medication will be noted.
- 9.11 If a learner refuses to take their medication, staff will not force them to do so, and will inform the parent/carer of the refusal as a matter of urgency. If a refusal to take medicines results in an emergency, the school's emergency procedures will be followed.
- 9.12 It is the parent/carers' responsibility to renew the medication when supplies are running low and to ensure that the medication supplied is within its expiry date.
- 9.13 Controlled drugs can also be administered, subject to all other conditions as described in the Policy. Access to these medicines is restricted to the named persons, with all medication and controlled drugs kept in the locked cabinet in the Main Reception office.
- 9.14 Any medicines needing refrigeration will be stored in the locked fridge in the Main Reception office.
- 9.15 It is the responsibility of parents/carers to notify the school if the learner's need for medication has ceased. When no longer required, medicines will be returned to the parent/carer to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles.
- 9.16 Epi-pens:**
- Epi-pens are kept on the wall in the Main Reception office in a labelled sealed box unless parents/carers have agreed for the learner to carry their own
 - In the case of Epi-Pens, all staff have access to them – the box is clearly labelled and accessible
 - Any member of staff can administer an epi-pen in an emergency when directed through a 999 call.

Using an Epi-pen:

- The pen (cap off) should be pushed against the learner's thigh, through clothing if necessary
- The pen should be held for a count of 10 seconds before being withdrawn
- An ambulance must be called for a learner who may require an epi-pen
- Cetrizine may be given if slight tingling of the lips occurs following ingestion of possible irritants for nut allergy sufferers - this is a liquid medicine stored with the epi-pen
- If symptoms are more severe, the epi-pen should be given immediately
- An ambulance must be called immediately
- Parents/carers should be contacted after this call has been made

10 Procedure in an Emergency:

- 10.1 In a medical emergency, some teachers have been appropriately trained to administer emergency first aid or Paediatric first aid if necessary. If possible, the school's First Aiders will also be asked to attend.

- 10.2 If an ambulance needs to be called, staff will:
- Outline the full condition and how it occurred
 - Give details regarding the learner's date of birth, address, parent/carer names and any known medical conditions
- 10.3 Learners will be accompanied to hospital by a member of staff if this is deemed appropriate, however, staff cars should not be used for this purpose.
- 10.4 Parents/carers must always be called in a medical emergency, but do not need to be present for a learner to be taken to hospital.

11 Unacceptable practice

Although the Head of School/Headteacher and other school staff should use their discretion and judge each case on its merits, it will not be acceptable practice to:

- prevent learners from easily accessing their inhalers and medication and administering their medication when and where necessary
- assume that every learner with the same condition requires the same treatment
- ignore the views of the learner or their parents/carers or ignore medical evidence or opinion (although this may be challenged)
- send learners with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHP
- if the learner becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- penalise learners for their attendance record if their absences are related to their medical condition e.g. hospital appointments
- prevent learners 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 child, 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; or
- prevent learners from participating, or create unnecessary barriers to learners participating, in any aspect of school life including school trips, e.g. by requiring parents/carers to accompany the learner

12 Food Allergy Management:

- 12.1 The school is mindful of learners with food allergies and special dietary requirements.
- 12.2 Please see Appendix 1 for further details on procedures followed in school to support these learners.

13 Complaints

Complaints regarding this policy or the support provided to learners with medical conditions should be raised under the Trust's usual complaints procedure.

Appendix 1 - Procedures for food allergies & special dietary requirements during food serving times.

The school will:

- Issue an allergy lanyard for each primary phase learner with a food allergy and/or special dietary requirement and ensure that this is given to the class teacher at the start of each school year, and is updated as and when required.
- Issue a second allergy lanyard card for each primary phase learner attending wrap around care
- Provide the lead lunchtime supervisor, the class teachers, the wrap around care staff and the Head of Catering with an up to date list from Arbor (the school's MIS) of learners (primary and secondary) with food allergies and/or special dietary requirement, including their photo, each time a new allergy/dietary requirement has been reported.

Lunch time staff are responsible for:

- Checking each primary phase learner with a food allergy/dietary requirement is wearing or is reminded to wear an allergy lanyard at the start of each lunchtime.
- Reminding each primary phase learner with an allergy/special dietary requirement to be at the front of the line in the dining hall.
- Informing the office if a lanyard for an allergy/special dietary requirement has gone missing.
- Encouraging older learners (food allergies and dietary requirements are viewed via cashless catering system) to be aware of their allergies and be pro-active in recognising food they should not eat.
- Keep a close eye on learners and immediately seek First Aid in the event of a suspected allergic reaction.
- Report any incidents of consumption of food by learners who are allergic to these particular types of food, whether there is an allergic reaction or not, so an investigation can take place, in order to prevent any such occurrences in the future.

Kitchen staff are responsible for:

- Ensuring they are aware of the ingredients that are likely to cause allergies in each menu.
- Ensure that they are aware of the learners who have allergies/dietary requirement, and that they have an up to date allergy list.
- Ensure that the Head Cook has an up to date allergy list
- Ensure allergy lanyards of learners are checked and learners are not offered food they are allergic to.

Wrap Around Care staff are responsible for:

- Ensuring they have a list with the names of learners (primary & secondary) who have a food allergy/special dietary requirement.
- Checking each primary phase learner with an allergy is wearing or is reminded to wear an allergy lanyard at the start of each food time, and returns it before going outside.
- Encouraging older learners to be aware of their allergies and be pro-active in recognising food they may not eat.
- Keep a close eye on learners and immediately seek First Aid in the event of a suspected allergic reaction.
- Report any incidents of consumption of food by learners who are allergic to these particular types of food, whether there is an allergic reaction or not, so an investigation can take place, in order to prevent any such occurrences in the future.
- Ensure all lanyards are returned to wrap around care allergy box at the end of each food time and inform the office if a lanyard has gone missing

Appendix 3 – Administration of medicines form



Parental Agreement Form for Administration of Medicines

The school will not give your child medicine unless you complete and sign this form.

All medicines must be in the original container as dispensed.

Learner's Name	
Class	
Date medicine provided by parent/carer	
Prescribed or Over The Counter	
Name and strength of medicine	
Expiry date	
Reason for Medication to be given	
Dose to be given	
When to be given	
Possible side effects	
Any other instructions	
Daytime phone number of parent	
Name of GP	

The above information is to the best of my knowledge accurate at the time of writing and I give consent to the staff to administer this medicine in accordance with the school policy.

Parent/carer signature	
Print name	
Date	

If more than one medicine is to be given a separate form should be completed for each one.

Signed:..... (Head of School/Headteacher)

Appendix 4 - Record of Medicine Administered



Other information:

***ALL MEDICINES CAN ONLY BE GIVEN IN THE PRESENCE OF A WITNESS**

Date					
Time given					
Dose given					
Staff Administrator of Medicine Print & signature					
Witness to administrator Print & signature					

Date					
Time given					
Dose given					
Staff Administrator of Medicine Print & signature					
Witness to administrator Print & signature					

Date					
Time given					
Dose given					
Staff Administrator of Medicine Print & signature					
Witness to administrator Print & signature					

Appendix 5 - Individual Health Care Plan proforma

WPAT Individual healthcare plan



Name of school/setting

Child's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Clinic/Hospital Contact

Name

Phone no.

G.P.

Name

Phone no.

Who is responsible for providing
support in school

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 pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

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Other information

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Describe what constitutes an emergency, and the action to take if this occurs

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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

--

Appendix 6 – Risk Assessment Proforma

Risk Assessment for (learner name)

Week Beginning

Concern resulting in need for Risk Assessment:



Significant Hazards and Associated Risks Those hazards which may result in serious harm or affect several people	Those who might be harmed Persons at risk from the significant hazards identified	Control Measures (CM's): Controls, including relevant sources of guidance	Residual Risk Rating (H / M / L)

Notes

- Staff Awareness – RA to be circulated ()
- Key members of staff to deal with any possible incidents ()