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## Policy For Supporting Pupils With Medical Needs

[Reviewed: January 2018](#)

### Definition

Most pupils will at some time have a medical condition that may affect their participation in school activities. For many this will be short term; perhaps finishing a course of medication.

Other pupils have medical conditions that, if not properly managed, could limit their access to education. Such pupils are regarded as having **medical needs**.

### Principle

Most children with medical needs are able to attend school regularly and, with some support from the school, can take part in most normal school activities. However, school staff may need to take extra care in supervising some activities to make sure that these pupils, and others, are not put at risk.

### Aims

1. For parents or guardians who have prime responsibility for their child's health to provide schools with information about their child's medical condition. This could also include details in conjunction with their child's GP or paediatrician, school doctor or specialist voluntary bodies who may be able to provide additional background for school staff.
2. To ensure the correct procedures are followed and appropriate forms completed.
3. To keep accurate records of procedures.
4. For staff to be trained in supporting pupils with medical needs from appropriate health professionals. The type of training necessary will depend on the individual case.
5. For the school to be satisfied that any training has given staff sufficient understanding, confidence and expertise
6. The Headteacher, SMT and school staff will treat all information confidentially.
7. To have an individual health care plan for pupils with medical needs and to complete, review and update the necessary forms.



8. Staff should protect the dignity of the pupil as far as possible, even in emergencies.

## Protocols

1. School staff should not administer medication to pupils unless written parental consent is received.
2. All medicines at school need to be managed by school staff.
3. Medicines can only be brought on to school premises with teachers' knowledge and approval.
4. In the event of a child being taken to hospital they will be escorted by a member of staff and parents will be informed as early as possible. Any medical notes and details of the medicine book must accompany the child to hospital.
5. All medication must be kept in a secure/locked medical storage facility. If two or more prescribed medicines are needed these must be kept in a separate container.
6. For off site activities all necessary medication and prescribed drugs are the responsibility of the participating school staff that are accompanying the pupil.
7. All medicines must be dated, labelled with the name of the pupil, the name of dose of the drug and the frequency of administration. This may be in the form of an administering medicines consent form, completed by the parents.
8. Staff must complete, sign, date and time record cards each time they give medication to a pupil. This must be counter signed by a second adult who witnessed the drug administration.
9. Medicines that need to be refrigerated can be kept in a secure fridge containing food, but must be kept in an airtight container and clearly labelled. The school should restrict access to a refrigerator holding medicines.
10. School staff should not dispose of medicines. Parents should collect medicines held at school at the end of each term. Parents are responsible for disposal of date-expired medicines.



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11. School must have sufficient information about the medical condition of any pupil with long term medical needs before a child starts school, or when a pupil develops a condition.

A written health care plan should be completed, involving parents and relevant health professionals. This should include:

Details of a pupil's condition

Special requirements e.g. Dietary needs, pre-activity precautions

Medication and any side effects

What to do and who to contact in an emergency

The role that the school can play