



Newtown C of E Primary School

Supporting Pupils with Medical Conditions Policy

Ratification Date:	March 2018	Signed:	Mrs Emma Howlett (HEADTEACHER) Mrs Janet Cane (CHAIR OF GOVERNORS)
Reviewed	March 2025	Signed:	Mrs Emma Howlett (HEADTEACHER) Mrs Glynis Wright (CHAIR OF GOVERNORS)
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Next review	March 2027		

School Vision

At Newtown C of E Primary School, our motto is enriched and sustained by our Christian values of **Love, Courage and Friendship**, rooted in the teachings of the Bible. We are guided by the call to *“love one another as I have loved you”* (John 13:34), *“be strong and courageous... for the Lord your God is with you wherever you go”* (Joshua 1:9), and *“a friend loves at all times”* (Proverbs 17:17).

As a school at the heart of an evolving community, we warmly welcome children and families from a wide range of backgrounds and experiences. We are enriched by the unique qualities each child brings and value the talents and perspectives that help us grow together.

We are an aspirational school serving our community. We seek to know, understand and celebrate every child, nurturing their individual strengths and talents. We prepare our children to become confident, responsible global citizens in an ever-changing world, guided by our core values of love, courage and friendship.

Through **Love**, we show kindness, compassion and generosity, building a community where everyone feels safe, welcomed and valued. Through **Courage**, we persevere, meet challenge with confidence, and stand up for what is right with honesty and grace. Through **Friendship**, we grow together — encouraging one another, celebrating each other’s gifts, and looking to the future with hope and aspiration.

We live out these values by:

- Being a caring, welcoming and inclusive Christian community where staff, pupils, parents and governors work together in a safe and supportive environment, inspired by *“Above all, love each other deeply”* (1 Peter 4:8)
- Promoting the welfare and dignity of every child, safeguarding them from harm — including physical, sexual and emotional abuse, neglect and bullying — in accordance with statutory guidance in *Keeping Children Safe in Education* (Department for Education)

- Providing a rich, engaging curriculum that equips children with the knowledge, skills and character to become lifelong learners and responsible citizens, reflecting Christian teachings and British Values
- Building strong, positive partnerships with parents, the church and the wider community, and encouraging participation in local, national and global initiatives
- Fostering our Learning Behaviours of Resilience, Focus, Independence, Self-Regulation, Respect and Boundaries, encouraging children to act with integrity, perseverance and kindness in all they do

At Newtown, we want every child to know they belong, are cherished, and are capable of great things. Through **Love, Courage and Friendship**, we grow minds, shape futures and journey together in hope.

1. Introduction

In line with the duty, which came into force on 1st September 2014, to support pupils at school with medical conditions we are committed to ensuring that all children with medical conditions, in terms of both physical and mental health, are properly supported at Newtown C of E Primary School so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

No child with a medical condition will be denied admission or prevented from taking up a place in our school because arrangements for their medical condition have not been made. We will ensure that pupils' health is not put at unnecessary risk from, for example, infectious diseases therefore we will not accept a child in school at times where it would be detrimental to the health of that child or others to do so.

This policy will be reviewed regularly and it is readily accessible to parents and school staff.

2. Policy implementation

The named person, who has overall responsibility for policy implementation, is the Headteacher or a representative.

They will

- ensure that sufficient staff are suitably trained;
- ensure that all relevant staff will be made aware of the child's condition;
- cover arrangements in case of staff absence or staff turnover to ensure someone is always available;
- brief supply teachers;
- carry out risk assessments for school visits, holidays, and other school activities outside the normal timetable;

and

- monitor individual healthcare plans.

3. Procedure to be followed when notification is received that a pupil has a medical condition

When our school is notified that a pupil has a medical condition we will:

- make arrangements for any staff training or support
- make every effort to ensure that arrangements are put in place within two weeks
- not wait for a formal diagnosis before providing support to pupils

3.1 Individual Healthcare Plans (IHP)

Our school will send home a health questionnaire. Any parent reporting that their child has an ongoing medical condition such as asthma, epilepsy, diabetes or more complex medical condition will be asked to complete an Individual Healthcare Plan (IHP). It is a legal requirement that this is updated annually.

At our school we will ensure that plans are reviewed at least annually, or earlier if evidence is presented that the child's needs have changed. We will assess and manage risks to the child's education, health and social wellbeing, and minimises disruption.

At Newtown C of E Primary School the Inclusion Leader will be responsible for writing the child's IHP in consultation with parents and other health professionals. The Inclusion Leader will also be trained in Supporting Children with Medical Conditions.

Our IHP (see appendix 1) requires information about:

- 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 (NB If a child is self-managing their medication, this should 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 child'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 child'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**;
- arrangements or procedures required for **school trips** or other school activities outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments;
- **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 individual healthcare plan.

4. Staff training and support

Staff are supported in carrying out their role to support pupils with medical conditions through appropriate training. Training needs are assessed regularly and training will be accessed through HTLC.

Any member of school staff providing support to a pupil with medical needs will have received suitable training.

No member of staff will give prescription medicines or undertake healthcare procedures without appropriate training or instruction (updated to reflect requirements within individual healthcare plans).

5. The child's role in managing their own medical needs (including intimate care)

Where children are deemed competent to manage their own health needs and medicines by their parents and medical professional they will be supported to do this. We see this as an important step towards preparing pupils for the next stage of their education. Where their medical needs require help with **intimate care** this should be carried out in a sensitive way as per the procedure laid out in Appendix II.

6. Managing medicines on school premises

At our school:

- medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so
- no child will be given prescription or non-prescription medicines without their parent's written consent
- we will never give medicine containing aspirin unless prescribed by a doctor.
- Medication, e.g. for pain relief will never be administered without first checking maximum dosages and when the previous dose was taken.
- Parents will be informed
- where clinically possible, we will expect that medicines will be prescribed in dose frequencies which enable them to be taken outside school hours
- we will only accept prescribed medicines if they are:
 - **are in-date**
 - **are labelled**
 - **are provided in the original container as dispensed by a pharmacist**
 - **include instructions for administration, dosage and storage.** *(NB The exception to this is insulin, which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container)*
- Parents/carers are required to complete a Consent Form to Administer Medicines which is available from the school office.
- all medicines will be stored safely.
- Children will know where their medicines are at all times and will be able to access them immediately. Where relevant, they will know who holds the key to the storage facility. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will be always readily available to children and not locked away, including when pupils are outside the school premises, e.g. on school trips

- when no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes will always be used for the disposal of needles and other sharps
- we will keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency. A record will be kept of any doses used and the amount of the controlled drug held
- school staff will administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines will do so in accordance with the prescriber's instructions.
- **We will keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school will be noted in school**

7. Non-prescribed medicines

The school will administer non-prescribed medicines in cases where it is necessary for it to be taken during the school day and no family member is available to administer it. The medication should be in the original container and be within its expiry date. Parents/carers are required to complete a Consent Form to Administer Medicines which is available from the school office.

8. Record keeping

We will ensure that written records are kept of all medicines administered to children. We recognise that records offer protection to staff and children and provide evidence that agreed procedures have been followed. Parents will be informed if their child has been unwell at school.

9. Day trips, residential visits and sporting activities

We always actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

As a school we believe it to be unacceptable practice to

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or 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 individual healthcare plans;
- if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise children 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 child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs;** or
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child

10. Allergens and Medical Diets

The School employs HCL to provide school dinners. Children with dietary allergies/medical requirements are required to register with the HCL allergy management system.

Spare epi-pens for anaphylactic reactions can be found in the school office medical area. Allergic reactions will be reported to the Designated Allergy Lead. Please refer to the allergy safety policy.

11. Liability and indemnity

As a school with a SLA with HCC, Newtown C of E Primary School will be insured as long as all appropriate training and risk assessment has taken place

12. Complaints

If you have a complaint about how your child's medical condition is being supported in school please contact the Headteacher and the Chair of Governors in the first instance.

13. Emergency Asthma Inhalers

Newtown C of E Primary School holds asthma inhalers for emergency use. This is entirely voluntary, and the school follows the Department of Health protocol which provides further information. We have purchased an emergency inhaler which is kept in the school office. If it is deemed necessary to use the emergency inhaler parents/carers will be contacted by telephone for consent. All children who have asthma will also have inhalers stored securely in their classroom for access at all times.

14. Emergency Adrenaline Auto-Injectors (AAI's) (Epi-pens)

Newtown CofE Primary School holds spare AAI's for emergency use, as required by Benedict's Law. The emergency epi-pens are stored in the school office. All children with severe allergy prescribed with epi-pens will have their prescribed pens stored in their classroom for access at all times. If it is deemed necessary to use prescribed or spare epi-pens parents and the emergency services will be contacted. Please refer to the Allergy Safety Policy.

Appendix 1 – Individual Healthcare Plan - Individual healthcare plan –

Name of school/setting	Newtown C of E Primary School	
Child's name		
Group/class/form		
Date of birth		
Child's address		
Medical diagnosis or condition		
Date		
Review date		

Family Contact Information

Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
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.

Other information

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

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 2 Intimate care procedure

Intimate care is any care which involves washing, touching or carrying out an invasive procedure (such as cleaning a pupil after they have soiled themselves) to intimate personal areas. In most cases such care will involve cleaning for hygiene purposes as part of a staff member's duty of care. In the case of a specific procedure to meet complex health needs only a person suitably trained and assessed as competent will undertake the procedure, (e.g. the administration of rectal diazepam). It is a sensitive issue and will require staff to be respectful of the pupil's needs, remembering that pupil's welfare and dignity is of paramount importance.

Newtown C.E. Primary School is committed to ensuring that all staff responsible for the intimate care of all pupils, including those with complex needs, will undertake their duties in a professional manner at all times:

- The management of intimate care needs will be carefully planned
- Staff **training** will include:
 - Safeguarding
 - Child Protection
 - Health and Safety training in moving and handling
- Special **apparatus** will be used appropriately where necessary
- Each pupil will be supported to achieve the highest level of **autonomy** that is possible, given their age and abilities
- **Individual Intimate Care Plans (IICP)** will be drawn up for each pupil to suit their individual circumstances.
- Wherever possible, one pupil will be catered for by one adult unless there is a sound rationale for having more adults present
- School **safeguarding procedures** and Hampshire procedures will be adhered to at all times
- If a member of staff has any concerns about **physical changes** in a pupil's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the designated named persons for child protection
- If a pupil becomes **distressed or unhappy** about being cared for by a particular member of staff, the matter will be investigated and outcomes recorded
- If a pupil makes an **allegation against a member of staff**, all necessary safeguarding and child protection procedures and protocols will be followed
- staff should be aware of the school's Health and Safety policy. They should always wear an apron and gloves when dealing with a pupil who has soiled. Any soiled waste (urinary or faecal) should be placed in a yellow clinical waste disposal bag, which will be sealed. This bag should then be placed in a bin (complete with a liner) which is specifically designated for the disposal of such waste. The bin should be emptied regularly and it will be collected as part of the usual refuse collection service
- staff need to exercise caution in the use of **physical contact**, in line with the schools' 'limited touch' culture and will be in response to the pupil's needs at the time. This should be of limited duration and will be appropriate given their age, stage of development and background. Pupils with complex health and/or special needs may

require more physical contact to assist their everyday learning. Extra caution is required by staff where it is known a pupil has previously suffered abuse or neglect

- where it is necessary for staff to restrain pupils physically to prevent them from inflicting damage on either themselves, others or property they should refer to the school's **Restrictive Physical Intervention Policy**
- when a distressed pupil needs comfort and reassurance, physical touch, such as a caring parent would give, is acceptable
- first aiders should ensure wherever possible that another adult or other pupil are present and **first aid** procedures should be in line with agreed care plans.
- Young people are entitled to respect and privacy when changing clothes
- Staff should take particular care when supervising and providing intimate care for pupils in the less formal atmosphere of a **residential setting** and volunteers involved in such activities should be familiar with all relevant school policies and all Hampshire guidance

Appendix 3 – Intimate Care Plan Pro Forma

Individual Intimate Care plan

PARENTS/CARERS	
Name of child	
Type of intimate care needed	
How often care will be given	
What training staff will be given	
Where care will take place	
What resources and equipment will be used, and who will provide them	
How procedures will differ if taking place on a trip or outing	
Name of senior member of staff responsible for ensuring care is carried out according to the intimate care plan	
Name of parent or carer	
Relationship to child	
Signature of parent or carer	
Date	

PERMISSION FOR SCHOOL TO PROVIDE INTIMATE CARE	
Name of child	
Date of birth	
Name of parent/carer	
Address	
I give permission for the school to provide appropriate intimate care to my child (e.g. changing soiled clothing, washing and toileting)	☐
I will advise the school of anything that may affect my child's personal care (e.g. if medication changes or if my child has an infection)	☐
I understand the procedures that will be carried out and will contact the school immediately if I have any concerns	☐
I do not give consent for my child to be given intimate care (e.g. to be washed and changed if they have a toileting accident). Instead, the school will contact me or my emergency contact and I will organise for my child to be given intimate care (e.g. be washed and changed). I understand that if the school cannot reach me or my emergency contact, if my child needs urgent intimate care, staff will need to provide this for my child, following the school's intimate care policy, to make them comfortable and remove barriers to learning.	☐
Parent/carer signature	
Name of parent/carer	
Relationship to child	
Date	