



Children and learning at the heart of  
our CARE-ing community

## Old Fletton Primary School

### Supporting Children with Medical Needs Policy

Version 8 - December 2025

#### OUR ASPIRATION FOR OLD FLETTON PRIMARY SCHOOL

<p><b>Short term medical needs</b> (physical &amp; mental health)</p>	<p>Affecting their participation in school activities whilst they are on a course of medication or treatment.</p>
<p><b>Long term medical needs (also known as Special Medical needs)</b> (physical &amp; mental health)</p>	<p>Potentially limiting their access to education and requiring extra care and support - reasonable modifications should be made where practical.</p>
<p><b>Linked policies</b></p>	<p>SEND Policy Accessibility Plan Health &amp; Safety Policy Complaints Policy</p>

<p><b>What is the policy for?</b></p>	<p>The Children &amp; Families Act 2014 places a duty on schools to make arrangements for children with medical conditions. Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone. This policy is for all members of the Old Fletton Primary School community so that there is common understanding about how we can achieve best outcomes for our pupils with medical needs.</p>
<p><b>Who has devised and contributed to this policy?</b></p>	<p>This policy was initially devised by the Headteacher (September 2014) in response to governor requirements to ensure that arrangements are in place to support pupils at school with medical conditions and updated based on a model policy provided by The Key (April 2021). Policy was re-written in Nov 2025 based on a new model from The Key. It will be used in conjunction with health and social care guidance as each child's needs require alongside the views of the family.</p>
<p><b>How will this policy be communicated?</b></p>	<p>This policy is available on the school website and in the Headteacher's office.</p>
<p><b>How will this policy be monitored?</b></p>	<p><b>Role of the Governors</b> The Governors will receive regular updates on the number of IHPs and during H&amp;S monitoring governors can review anonymised paperwork to ensure compliance. <b>Role of SENCO</b> For pupils who have medical conditions that require EHC plans, compliance with the SEND Policy will ensure compliance with the statutory elements of this guidance with respect to those children. <b>Role of the Headteacher</b> The Headteacher will report to governors on the number of IHPs in place to support children with medical needs.</p>

## 1. Aims

At Old Fletton Primary School we understand that medical conditions requiring support at school can affect quality of life and may be life-threatening.

Our school will support pupils with medical conditions so that they have full access to education, including school trips and physical education.

This policy aims to:

- Make sure that pupils, staff and parents/carers understand how our school will support pupils with medical conditions
- Set out the roles and responsibilities for everyone in the school community in regard to pupils with medical conditions
- Set out the procedure for creating, reviewing and managing individual healthcare plans (IHPs)
- Set out how we will manage medicines in school
- Reassure parents/carers that the school will help their child feel safe, supported and included

**The named person with responsibility for implementing this policy is the Headteacher**

## 2. Legislation and statutory responsibilities

### Old Fletton Primary School

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 statutory guidance on [supporting pupils with medical conditions at school](#) and the Early Years Foundation Stage statutory framework from the Department for Education (DfE).

## 3. Roles and responsibilities

### 3.1 The governing body

The governing body has ultimate responsibility for making arrangements to support pupils with medical conditions.

The governing body will:

- Review this policy in a timely manner, in line with the relevant legislation and requirements
- Make sure that the policy sets out the procedures to be followed whenever the school is notified that a pupil has a medical condition
- Monitor practice, and staff training, in regards to pupils with medical conditions, in line with this policy

The governing board delegates the day-to-day implementation of this policy to the Headteacher.

### 3.2 The Headteacher

The Headteacher will:

- Make sure all staff are aware of this policy and understand their role in its implementation

- Make sure 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
- Make sure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development and monitoring of individual healthcare plans (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
- Make sure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date
- Implement systems for obtaining information about a child's needs for medicines and keeping this information up to date

### **3.3 Staff**

Supporting pupils with medical conditions during school hours is not the sole responsibility of 1 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.

### **3.4 Parents/carers**

Parents/carers will:

- Provide the school with sufficient and up-to-date information about their child's medical needs
- Provide evidence of appropriate prescription and written permission for medicines to be administered by staff
- 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

### **3.5 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.

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

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

## **4. Equal opportunities**

The school will adhere to the legal responsibilities under the Equality Act 2010 and will not unlawfully discriminate against any pupils. 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/carers and any relevant healthcare professionals will be consulted.

## **5. Being notified that a child has a medical condition**

When the school is notified that a pupil has a medical condition, the process outlined in Appendix 1 will be followed to decide whether the pupil requires an IHP.

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.

### **EYFS settings: 5.1 Obtaining information about medicines**

The EYFS framework states that settings must include how they obtain information about a child's need for medicine, and a system for keeping this information up to date (see section 10 of this policy).

We will:

- For new starters, send a form to all parent/carers of pupils after their place at the school has been confirmed, but before their first school year starts, to confirm any medicine(s) their child needs. Where a pupil has a new diagnosis and/or a pupil has moved to the school mid-term, we will send a form and put arrangements in place within 2 weeks

We ask that parents/carers proactively inform us by either phone call to the school 01733 554457 if their child's medical needs change during the school year.

## **6. Individual healthcare plans (IHPs)**

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions.

The day-to-day responsibility has been delegated to Deputy Headteacher

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/carers 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.

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

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has special educational needs (SEN) but does not have an EHC plan, the SEN will 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 Deputy Headteacher 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.
- The level of support needed, including in emergencies.
- Who in the school needs to be aware of the pupil's condition and the support required.
- Arrangements for written permission from parents/carers 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
- What to do in an emergency, including who to contact and contingency arrangements

## 7. 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/carers' written consent

The person administering the medicine will keep a written record. Parents/carers will always be informed on the same day the medicine has been administered, or as soon as reasonably possible.

**The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents/carers. .**

Anyone giving a pupil any medication (for example, for pain relief) will first check recommended and maximum dosages for the pupil's age, and when the previous dosage was taken.

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. 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/carers to arrange for safe disposal when no longer required.

### 7.1 Controlled drugs

[Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

Controlled drugs are kept in a secure cupboard in the staffroom and only office staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

## 7.2 Unacceptable practice

Although school staff will use their discretion and judge each case on its merits with reference to the pupil's IHP, they will keep in mind that it is not generally acceptable practice 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
- 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
- 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. 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.

## 8. 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/carer arrives, or accompany the pupil to hospital by ambulance.

## 9. 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.

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 support with, their implications and preventative measures
- Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

## **10. Record keeping**

The governing board will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parents/carers will be informed if their child has been unwell at school.

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

### **EYFS settings: 10.1 Recording information about medicines**

The EYFS framework states that settings must include how they obtain information about a child's need for medicine (see section 5 of this policy), and a system for keeping this information up to date. We will:

- Enter each pupil's medicine need in the school's system
- Update our records when parents/carers of pupils inform us of changes to their child's needs
- Keep a record of changes, labelling the most recent record for each child
- Make sure that all staff have access to records so that they are informed about pupils' medical needs
- Securely hold this information digitally in accordance with the UK GDPR
- Inform parents/carers about how they can access their child's information (provided no relevant exemptions apply to their disclosure under the Data Protection Act 2018)

## **11. 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.

## **12. Complaints**

Parents/carers with a complaint about the school's actions in regard to their child's medical condition should discuss these directly with the school. If this does not resolve the matter, school will direct parents/carers to the school's complaints procedure.

## **13. Monitoring arrangements**

This policy will be monitored by Governors

It will be reviewed and approved by the governing board every 3 years.

## **14. Links to other policies**

This policy links to the following policies:

Procedure to prevent the spread of infection

## Old Fletton's Process for developing Individual Healthcare Plans

Parent or healthcare professional informs school that child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed



Headteacher of the school, coordinates a meeting to discuss the child's medical needs; and identifies a member of staff who will provide support to a pupil



Meeting to discuss and agree on the need for a IHP to include key school staff, child, parent, relevant healthcare professional and other medical clinician as appropriate - (or to consider written evidence provided by them)



Develop IHP in partnership - agree who leads on the writing of it. Input from healthcare professional must be provided



School staff training identified



Healthcare professional commissions/delivers training and staff signed off as competent - review date agreed



IHP implemented and distributed to relevant staff



IHP reviewed annually or when conditions change, healthcare professional or parent to initiate

## Appendix 2: Procedures for children who are sick or infectious

### Pupils who have an infectious disease shouldn't attend school/nursery

- Parents should notify the school if their child has an infectious disease
- If a pupil becomes unwell during the day – for example, they have a temperature, sickness, diarrhoea or stomach pains – the parents or carers will be contacted to collect their child
- Pupils with a temperature, sickness, diarrhoea or an infectious disease should not attend school/nursery while they are sick. Depending on the sickness, staff may ask parents to take their child to the doctor before they return to school
- Staff will notify parents if a risk to other pupils exists

Children with specific infectious diseases set out in the [UK Health Security Agency's exclusion table](#) will not be allowed to return to school/nursery until the appropriate exclusion period has passed.

We will take the following steps to prevent the spread of infection:

- Reducing or eliminating sources of infection through good hygiene practices
- Good handwashing practice
- Encouraging and facilitating healthy eating
- Ensuring that regulated food hygiene standard requirements in the maintenance of food preparation areas and preparation of food are followed
- Championing and educating staff, parents, carers and pupils on the importance of immunisation as a tool against infection (while recognising the individual's right to choose)
- Establishing a daily cleaning routine for:
  - Nappy changing facilities
  - Play areas
  - Toys, activities and equipment





# Schools Asthma Policy

Name of school: Old Fletton Primary School

Date of Asthma Friendly School accreditation: Working towards June 2023

Date of Asthma Friendly School review: N/A

Name of Headteacher: Sarah Levy

Asthma Lead: Sarah Levy

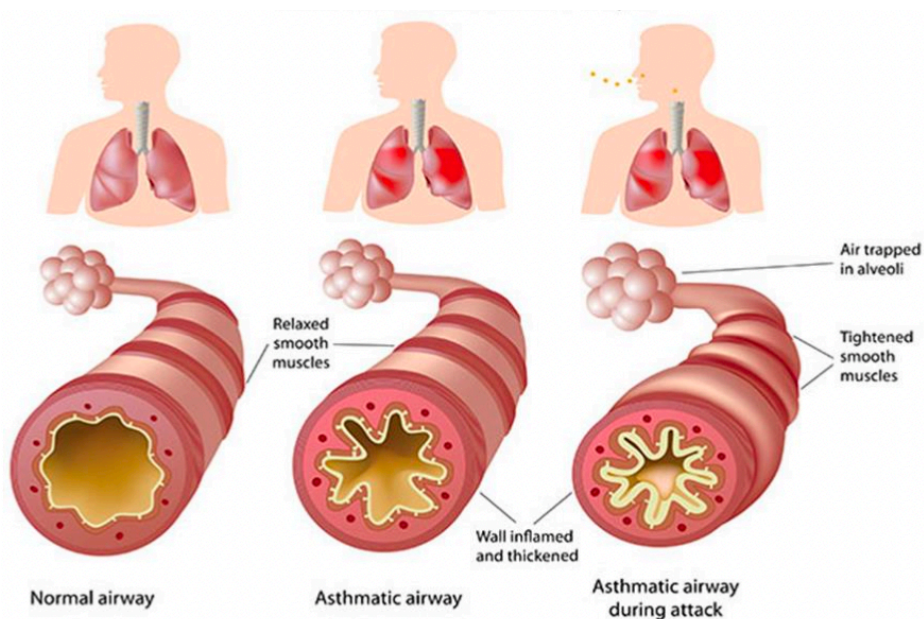
Name of Asthma champion: Fay Rumball

Policy Name: Schools Asthma Policy

## Asthma

Asthma is a physical condition in which the air passages in the lungs become narrowed, making it difficult to breathe.

Asthma is a condition that affects small tubes (airways) that carry air in and out of the lungs. When a person with asthma comes into contact with something that irritates their airways (an asthma trigger), the muscles around the walls of the airways tighten, as shown in the diagram below, so that the airways become narrower and the lining of the airways becomes inflamed and starts to swell. Sometimes, sticky mucus or phlegm builds up, which can further narrow the airways. These reactions make it difficult to breathe, leading to symptoms of asthma (Source: Asthma UK).



In the UK, asthma is the most common long term medical conditions in children and young people. Around 1 in 11 children (1.1 million) has asthma, which on average means there could be 3 children with asthma in each class. The UK has one of the highest emergency admission rates for asthma in Europe with over 25,000 emergency hospital admissions each year. Asthma causes more absence from school than any other condition.

## Rationale

We recognise that children with persistent, uncontrolled asthma are more likely to miss school, compared to children with mild asthma. At Old Fletton Primary School, the school welcomes all pupils with asthma and are working with specialist CYP asthma practitioners to ensure we do all we can to support children with asthma within our school. We want all pupils with asthma to be able to participate fully in all aspects of school life, PE, school trips and other out of hours school activities.

We recognise that pupils with asthma need immediate access to reliever inhalers at all times and keep a record of all pupils with asthma and the medicines they take.

We provide annual update training to ensure that staff (including mid day supervisors) who come into contact with pupils with asthma know what to do in an asthma attack.

At Old Fletton Primary School, we are currently working to become an Asthma Friendly School to ensure that all children are able to access the whole school curriculum and manage their asthma both at home and in school.

At Old Fletton Primary School we:

- will have asthma training as it as part of the school induction process.
- will display 'what to do in an emergency' posters in the first aid hut and with the emergency inhalers.
- will encourage and help children with asthma to participate fully in all aspects of school life.
- have a register of all children with asthma (which will be accessible for all staff).
- will recognise that immediate access to the pupil's inhalers is vital.
- will aim to have Personalised Asthma Action Plan (PAAP) for all children diagnosed with asthma.
- will supply two emergency salbutamol inhaler and Volumatic spacer device from a pharmacy and complete appropriate documentation.
- will have an asthma lead and champion who will work towards becoming an 'Asthma Friendly School' and ensure that inhalers are in date, stored correctly and the school has the relevant documentation.
- will check inhalers each block to ensure they are all in date and working correctly.

In order to achieve the above,

Staff (including mid day supervisors) will receive training on the basic awareness of asthma and the correct use of inhalers as part of their induction process. All staff will know where to find children's inhalers and will have access to an up to date asthma register and class list with medication. They will have a clear understanding of what procedures to follow if a child has an exacerbation of their asthma including the use of the emergency salbutamol inhaler with spacer.

All pupils at Old Fletton with asthma will have clear understanding of what they need to do if they are symptomatic including exacerbations and know where to access their inhaler.

Our policy will be informed by the Cambridgeshire and Peterborough integrated care system.