BRAMLEY
GRANGE
ACADEMY

Supporting Pupils with Medical Needs

Date Policy approved and adopted:	September 2026
Approved by	L Needham (Headteacher) S Jackson (School Nurse) K Campbell (DSL)

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1. Aims

This policy aims to ensure that:

- Pupils, staff and parents understand how our school will support pupils with medical conditions
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities

The Bramley Grange Academy Board will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupils' conditions, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- Providing supply teachers/LMs (Learning Mentors) with appropriate information about the policy and relevant pupils

2. Legislation and statutory responsibilities

This policy meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty on Academy Councils to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education's statutory guidance on supporting pupils with medical conditions at school.

3. Roles and responsibilities

3.1 The LSEAT Board of Trustees

The LSEAT Board of Trustees together with the Bramley Grange Academy Board has ultimate responsibility to make arrangements to support pupils with medical conditions. They will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

3.2 The headteacher/school nurse

The headteacher/school nurse 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, including providing support in contingency and emergency situations
- Ensure that all staff who need to know are aware of a child's condition, this will be emailed to all staff by the school nurse and will be attached to their medical section on Arbor.
- Take overall responsibility for the development of the medical health care plans where required,.
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- Contact the school nursing service in the case of any pupil who has a medical condition that may require support at suchool, 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

3.3 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, having had training and under the guidance from the school nurse where appropriate. This includes the administration of medicines. Only staff that have completed the online Opus training and completed competency checks with the school nurse will be dispense and administer medication.
- 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/learning mentos will consider 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
- Be involved in the development and review of their child's individual healthcare plan and may be involved in its drafting
- Carry out any action they have agreed to 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 (if able) will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions (if able) about their medical support needs and contribute as much as possible. They are also expected to comply with their individual healthcare requirements.

4. Equal opportunities

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 relevant senior member of staff/school nurse will coordinate a meeting to discuss the pupil's needs and where necessary will identify appropriate members of staff to support the pupil. At this meeting school staff will discuss and agree on whether an individual healthcare plan is required. This discussion will include input from parents and where appropriate the pupil. Relevant healthcare professionals will be involved where necessary.

6. Individual healthcare plans

The headteacher/school nurse has overall responsibility for the development of individual healthcare plans for pupils with medical conditions.

Plans will be reviewed at least annually, or earlier if there is evidence that a 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 individual healthcare plan. It will be agreed with a healthcare professional and the parents/carers when an individual healthcare plan 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.

The level of detail in the plan will depend on the complexity of the pupil's condition and how much support is needed. The school nurse, 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/carers 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/carer or 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

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' 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.

Staff who have done the Opus Pharmacy Training and gained competency check by the school nurse will administer giving a pupil any medication (for example, for pain relief). They 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 (if able) will be informed about where their medicines are at all times 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 or taken to the pharmacy by the school nurse when no longer required.

7.1 Controlled Drugs
Controlled drugs are prescription medicines (identifiable by the code 'POM-CD' printed on the medication packaging) that are controlled under the Misuse of Drugs Regulations 2001 and subsequent amendments. The Keys must be kept locked in a secure box inside the locked medical cabinet. The keys for the Controlled Drugs cabinet are kept in a locked safe in the medical room. Controlled Drugs are administered by two staff members who must sign in the Controlled Drugs Register, as well as the MAR sheet. The CD Register must be paginated, and a separate page is to be used for each student and for each Controlled Drug.

The register must include the following information:

- Date
- Name of Controlled Drug
- Dose given
- Time
- Two signatures
- Stock balance

Controlled Drugs should be audited/counted and a running total kept on every occasion when any CD's are administered or transferred on or off-site.

A separate audit of controlled drugs will be carried by the school nurse and an independent nurse on a half-termly basis.

7.2 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 will be shared with relevant teaching staff. Pupils will be allowed to carry their own medicines and relevant devices wherever possible if competent to do so. This will be monitored by the school nurse

7.3 Unacceptable practice
Unacceptable practice: School staff should use their discretion and judge each case individually, 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
- Ignore medical evidence or opinion (although this may be challenged)
- Send pupils with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch.
- 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, 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
- 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 to accompany their child Administer, or ask pupils to administer, medicine in school toilets

8.1 Emergency Procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). 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.

8.1 Adrenaline Auto-Injector (AAI)

Every school provision under the new Benedicts Law will keep an Emergency Adrenaline Auto-Injector (AAI) if there are students within the setting who have been prescribed AAIs. This is in accordance with the Department of Health's Guidance on the use of adrenaline auto injectors in schools (2017). Auto-injectors will be used in line with the manufacturer's instructions, for the emergency treatment of anaphylaxis where medical authorisation and written parental consent for the use of the spare AAI has been provided. The emergency AAI is a spare/back up device and not a replacement for a student's own AAI(s).
A register of students who may be treated with the emergency AAI will be kept with the AAI, as well as signed 'consent for medication' forms and a record sheet for any administration carried out. All emergency care will be given in line with the pupil's own Anaphylaxis Care Plan, including calling emergency services.

In the event of a possible severe allergic reaction in a pupil/staff who does not meet these criteria, emergency services (999) should be called and advice sought from them as to whether administration of the emergency AAI is appropriate.

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 on an ongoing basis, depending upon the needs of our pupils. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed, where possible.

The relevant healthcare professionals will support staff to identify the type and level of training required and will agree this with the headteacher or other relevant members of staff. 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
- Help staff to understand 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.

10. Record keeping

Statutory Requirement: The Bramley Grange Academy Board will ensure that written records are kept of all medicines administered to pupils for as long as these pupils are at the school. Parents will be informed if their child has been unwell at school.

11. Liability and indemnity

The LSEAT Trustees 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 Headteacher/SENCo in the first instance. If the Headteacher/SENCo cannot resolve the matter, they will direct parents/carers to the school's complaints procedure.

13. Monitoring

This policy will be reviewed and approved by The Bramley Grange Academy Board annually.

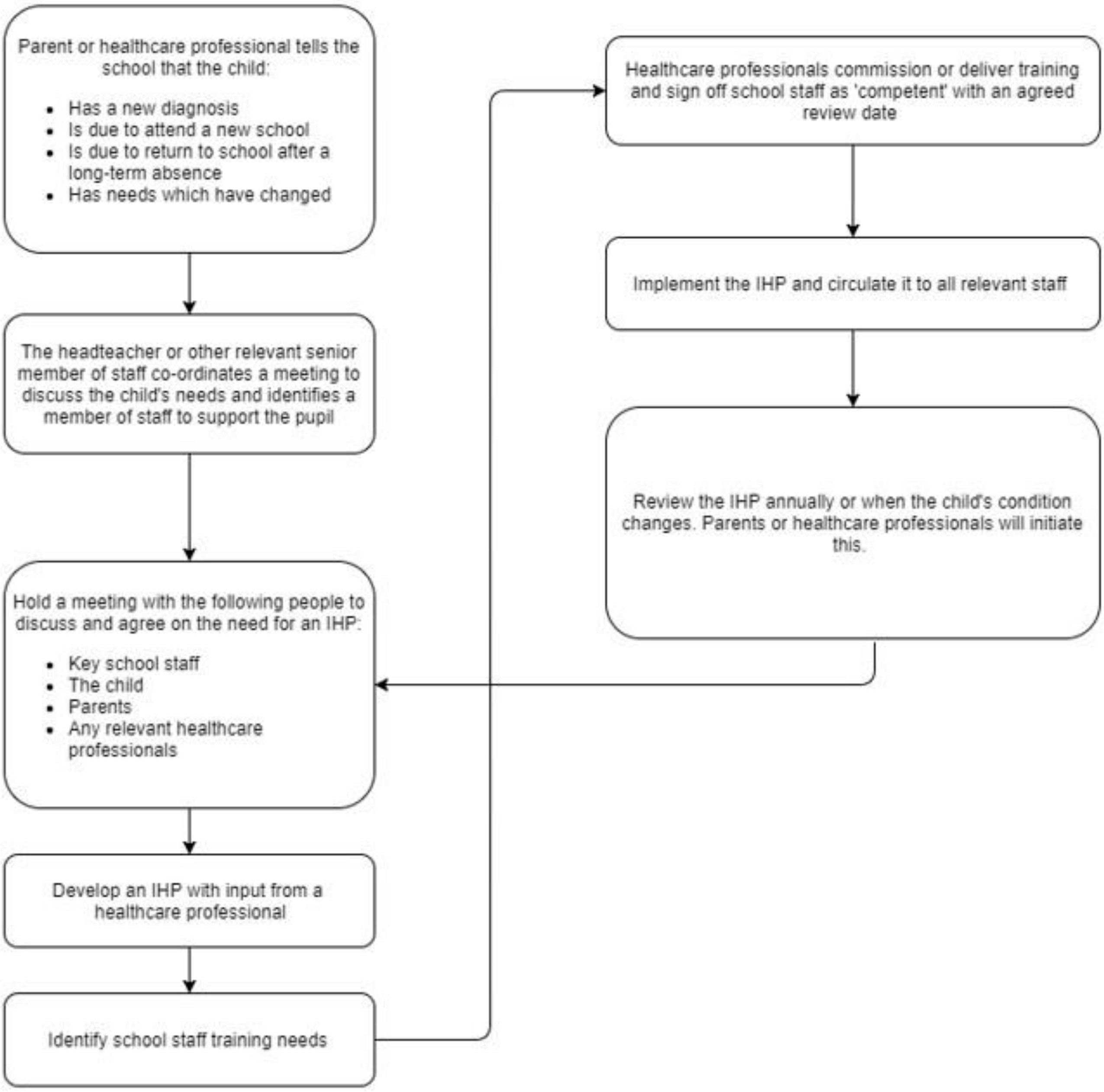
14. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding
- Special educational needs information report and policy

APPENDIX 1

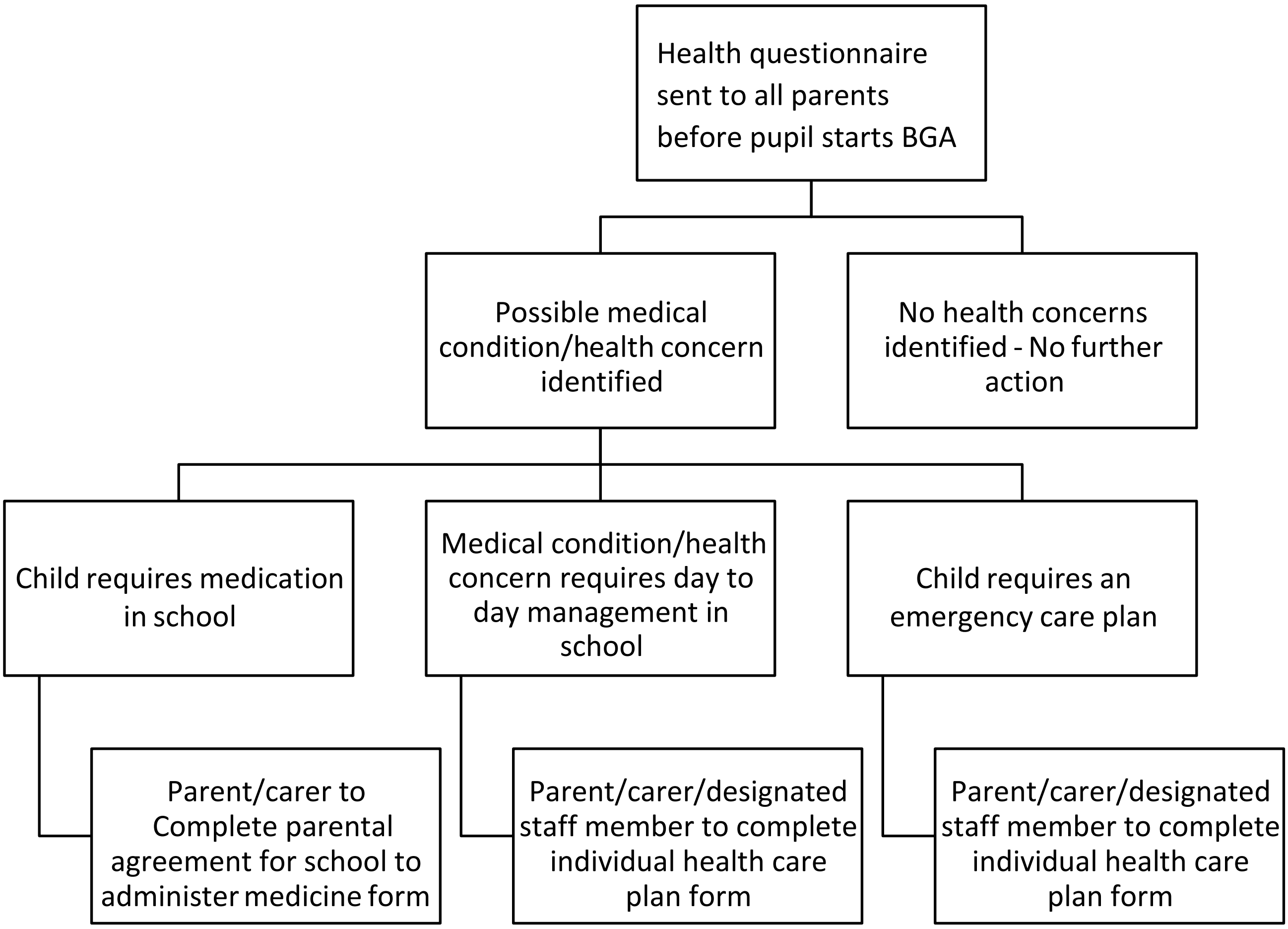
Appendix 1: Being notified a child has a medical condition



APPENDIX 2

Suggested process for identifying children or young people with a medical condition that may require support in school

Not all children with a health condition will require a health care plan in school however the form will help schools to ascertain which children require support. In addition to this schools may be informed at any other point by a parent or health professional if a child is newly diagnosed with a health condition



APPENDIX 3 Staff Medical conditions

Staff Name……………………………………………………….

Please complete table below if applicable. Please Read & sign statement below.

Medical Condition	Do you take medication for this condition?	Action to be taken in emergency situation
1.		
2.		
3.		

Staff must not be under the influence of alcohol or any other substance which may affect their ability to care for children. If staff are taking medication which may affect their ability to care to children, they should seek medical advice. Staff are required to sign this declaration confirming that they have sought and adhered to medical advice regarding their medication and their ability to care for children.

Staff medication on the premises much be securely stored and out of reach of children at all times NB. Locked in staffroom or in the medical room.

If applicable, staff should ensure that their Team and/or Line Manager are aware of their medical condition and that they know where they store their medication.

Should an emergency arise, in relation to asthma, anaphylaxis or seizure, the standard guidance will be put into action.

I will contact my Line Manager or Office Manager should I wish to discuss further management of any medical condition in relation to work.

I confirm I have read & understood & agree to above information

Signed………………………………………………………………. Date………………………………………………..

APPENDIX 4

Example of emergency procedures outlined in Medical Alert Book