Backworth Park Primary School

Supporting Pupils with Medical Conditions Policy

September 2026

Contents:

Statement of intent

1. Legal framework
2. Roles and responsibilities
3. Admissions
4. Identifying medical conditions
5. Staff training and support
6. IHPs
7. Managing medicines
8. Record keeping
9. Emergency procedures
10. Day trips, residential visits and sporting activities
11. Unacceptable practice
12. Liability and indemnity
13. Complaints
14. Home-to-school transport
15. Defibrillators
16. Monitoring and review

1.1.1 Appendices

a) IHP Implementation Procedure
b) IHP
c) Parental Agreement for the School to Administer Medicine
d) Record of Medicine Administered to an Individual Pupil
e) Record of All Medicine Administered to Pupils
f) Staff Training Record – Administration of Medication
g) Contacting Emergency Services
h) Incident Reporting Form

Statement of intent

The governing board of Backworth Park Primary School has a duty to ensure arrangements are in place to support pupils with medical conditions. The aim of this policy is to ensure that all pupils with medical conditions, in terms of both physical and mental health, receive appropriate support to allow them to play a full and active role in school life, remain healthy, have full access to education (including school trips and PE), and achieve their academic potential.

The school believes it is important that parents of pupils with medical conditions feel confident that the school provides effective support for their children's medical conditions, and that pupils feel safe in the school environment.

Some pupils with medical conditions may be classed as disabled under the definition set out in the Equality Act 2010. The school has a duty to comply with the Act in all such cases.

In addition, some pupils with medical conditions may also have SEND and have an EHC plan collating their health, social and SEND provision. For these pupils, the school's compliance with the DfE's 'Special educational needs and disability code of practice: 0 to 25 years' and the school's Special Educational Needs and Disabilities (SEND) Policy will ensure compliance with legal duties.

To ensure that the needs of our pupils with medical conditions are fully understood and effectively supported, we consult with health and social care professionals, pupils and their parents.

1. Legal framework

This policy has due regard to all relevant legislation and guidance including, but not limited to, the following:

- Children and Families Act 2014
- Education Act 2002
- Education Act 1996 (as amended)
- Children Act 1989
- National Health Service Act 2006 (as amended)
- Equality Act 2010
- Health and Safety at Work etc. Act 1974
- Misuse of Drugs Act 1971
- Medicines Act 1968
- The School Premises (England) Regulations 2012 (as amended)
- The Special Educational Needs and Disability Regulations 2014 (as amended)
- The Human Medicines (Amendment) Regulations 2017
- The Food Information (Amendment) (England) Regulations 2019 (Natasha's Law)
- DfE 'Special educational needs and disability code of practice: 0-25 years'
- DfE 'School Admissions Code'
- DfE 'Supporting children and young people with medical conditions and allergy'
- DfE 'First aid in schools, early years and further education'
- Department of Health 'Guidance on the use of adrenaline auto-injectors in schools'

This policy operates in conjunction with the following school policies:

- Administering Medication Policy
- Special Educational Needs and Disabilities (SEND) Policy
- Pupil Drug and Alcohol Policy
- Asthma Policy
- Allergen and Anaphylaxis Policy
- Complaints Procedures Policy

- Pupil Equality, Equity, Diversity and Inclusion Policy
- Attendance and Absence Policy
- Pupils with Additional Health Needs Attendance Policy
- Admissions Policy

2. Roles and responsibilities

The governing board will be responsible for:

- Ensuring that this policy is readily accessible to parents and school staff.
- Fulfilling its statutory duties under legislation.
- Ensuring that arrangements are in place to support pupils with medical conditions.
- Ensuring that pupils with medical conditions can access and enjoy the same opportunities as any other pupil at the school.
- Working with the local authority (LA), health professionals, commissioners and support services to ensure that pupils with medical conditions receive a full education.
- Ensuring that, following long-term or frequent absence, pupils with medical conditions are reintegrated effectively.
- Ensuring that the focus is on the needs of each pupil and what support is required to support their individual needs.
- Instilling confidence in parents and pupils in the school's ability to provide effective support.
- Ensuring that all members of staff are properly trained to provide the necessary support and are able to access information and other teaching support materials as needed.
- Ensuring that no prospective pupils are denied admission to the school because arrangements for their medical conditions have not been made.
- Ensuring that pupils' health is not put at unnecessary risk. As a result, the board holds the right to not accept a pupil into school at times where it would be detrimental to the health of that pupil or others to do so, such as where the child has an infectious disease.
- Ensuring that policies, plans, procedures and systems are properly and effectively implemented.
- Ensuring that the school's policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support pupils and sets out the procedures to be followed whenever a school is notified that a pupil has a medical condition.
- Ensuring that the school's policy covers the role of individual healthcare plans, and who is responsible for their development, in supporting pupils at school with medical conditions.

- Ensuring that plans are reviewed at least annually, or earlier if evidence is presented that the child's needs have changed.
- Ensuring that all staff are aware of this policy and that each member of staff understands their responsibilities in implementing it.
- Ensuring that appropriate consideration is given to the training and awareness required where pupils have specific medical conditions.
- Recognising that any member of staff may be required to provide support in an emergency situation.
- Ensuring that members of staff who are likely to be involved in supporting pupils are aware that an IHP is in place and understand the responsibilities and procedures outlined within it.

The headteacher will be responsible for:

- Ensuring that a named governor and senior leader have been appointed to maintain responsibility for this policy.
- Ensuring that this policy is effectively implemented with stakeholders.
- Ensuring that all staff are aware of this policy and understand their role in its implementation.
- Ensuring that all staff who need to know are aware of the child's condition.
- Ensuring that a sufficient number of staff are trained and available to implement this policy and deliver against all individual healthcare plans (IHPs), including in emergency situations.
- Considering recruitment needs for the specific purpose of ensuring pupils with medical conditions are properly supported.
- Having overall responsibility for the development of IHPs.
- Ensuring that staff are appropriately insured and aware of the insurance arrangements.
- Contacting the school nurse where a pupil with a medical condition requires support that has not yet been identified.

Parents will be responsible for:

- Notifying the school if their child has a medical condition.
- Providing the school with sufficient and up-to-date information about their child's medical needs.
- Being involved in the development and review of their child's IHP.
- Carrying out any agreed actions contained in the IHP.
- Ensuring that they, or another nominated adult, are contactable at all times.

Pupils will be responsible for:

- Being fully involved in discussions about their medical support needs, where applicable.

- Contributing to the development of their IHP, if they have one, where applicable.
- Being sensitive to the needs of pupils with medical conditions.

School staff will be responsible for:

- Providing support to pupils with medical conditions, where requested, including the administering of medicines, but are not required to do so.
- Taking into account the needs of pupils with medical conditions in their lessons when deciding whether or not to volunteer to administer medication.
- Receiving sufficient training and achieve the required level of competency before taking responsibility for supporting pupils with medical conditions.
- Knowing what to do and responding accordingly when they become aware that a pupil with a medical condition needs help.

The school nurse will be responsible for:

- Reviewing this policy alongside the governing board and headteacher.
- Notifying the school at the earliest opportunity when a pupil has been identified as having a medical condition which requires support in school.
- Supporting staff to implement IHPs and providing advice and training.
- Liaising with lead clinicians locally on appropriate support for pupils with medical conditions.

Clinical commissioning groups (CCGs) will be responsible for:

- Ensuring that commissioning is responsive to pupils' needs, and that health services are able to cooperate with schools supporting pupils with medical conditions.
- Making joint commissioning arrangements for EHC provision for pupils with SEND.
- Being responsive to LAs and schools looking to improve links between health services and schools.
- Providing clinical support for pupils who have long-term conditions and disabilities.
- Ensuring that commissioning arrangements provide the necessary ongoing support essential to ensuring the safety of vulnerable pupils.

Other healthcare professionals, including GPs and paediatricians, are responsible for:

- Notifying the school nurse when a child has been identified as having a medical condition that will require support at school.
- Providing advice on developing IHPs.
- Providing support in the school for children with particular conditions, e.g. asthma, diabetes and epilepsy, where required.

Providers of health services are responsible for cooperating with the school, including ensuring communication takes place, liaising with the school nurse and other healthcare professionals, and participating in local outreach training.

The LA will be responsible for:

- Commissioning school nurses for local schools.
- Promoting cooperation between relevant partners.
- Making joint commissioning arrangements for EHC provision for pupils with SEND.
- Providing support, advice, guidance, and suitable training for school staff, ensuring that IHPs can be effectively delivered.
- Working with the school to ensure that pupils with medical conditions can attend school full-time.

Where a pupil is away from school for 15 days or more (whether consecutively or across a school year), the LA has a duty to make alternative arrangements, as the pupil is unlikely to receive a suitable education in a mainstream school.

3. Admissions

Admissions will be managed in line with the school's Admissions Policy.

The school recognises that all children with medical conditions are entitled to a full education and have the same rights of admission to school as others.

The school will not ask for prohibited information such as that which relates to a child's disabilities or medical conditions during the application process or before admission. No child with a medical condition will be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made.

4. Identifying medical conditions

The school will establish clear arrangements for identifying pupils who have medical conditions that may require additional support. The school will maintain an up-to-date record of all individuals with medical conditions that may require support, including details of whether an IHP is in place.

The school will also set out arrangements for gathering information about medical conditions before a pupil is admitted to the school. This may include requesting relevant information from the previous setting, such as an existing IHP where one has been implemented.

The school will ensure that parents, and where appropriate the pupil, are asked to provide information about any medical conditions and the impact these conditions may have on the pupil's participation in school life.

For pupils starting at the school, the school will ensure that appropriate arrangements are in place in time for the start of the relevant school term. In situations where a pupil joins the school mid-term, or where a pupil already on roll receives a new medical diagnosis, the school will make every effort to ensure that appropriate arrangements are put in place as quickly as possible.

The school will ensure that appropriate arrangements are established when a pupil already on roll is diagnosed with a medical condition, develops new medical needs, or where an existing medical condition changes in a way that requires current arrangements to be reviewed.

Where necessary, the school will review support measures and ensure that relevant staff receive appropriate information and training so that the pupil's medical needs can be supported safely and effectively.

5. Staff training and support

Any staff member providing support to a pupil with medical conditions will receive suitable training. Staff will not undertake healthcare procedures or administer medication without appropriate training. Training needs will be assessed by the school nurse through the development and review of IHPs, on a termly basis for all school staff, and when a new staff member arrives. The school nurse will confirm the proficiency of staff in the provision of medical support. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The governing board will ensure that all staff are aware of this policy and that each member of staff understands their responsibilities in implementing it.

The school will ensure that appropriate arrangements are in place so that all staff, including teaching staff, support staff, supply staff and cover staff, are informed of this policy and understand the procedures to follow when supporting pupils with medical conditions.

Information about the policy and relevant procedures will form part of the school's staff induction process so that new staff are made aware of their responsibilities from the outset of their employment.

The school will also ensure that this policy applies to staff and volunteers involved in extended school provision, including before- and after-school provision. This will include provision delivered directly by the school as well as activities delivered by third-party providers. The school will take reasonable steps to ensure that such providers are made aware of this policy and understand the arrangements in place to support pupils with medical conditions.

Through training, staff will have the requisite competency and confidence to support pupils with medical conditions and fulfil the requirements set out in IHPs. Staff will understand the medical conditions they are asked to support, their implications, and any preventative measures that must be taken.

Whole-school awareness training will be carried out on a termly basis for all staff and be included in the induction of new staff members.

The school nurse will identify suitable training opportunities that ensure all medical conditions affecting pupils in the school are fully understood, and that staff can recognise difficulties and act quickly in emergency situations.

The governing board will ensure that appropriate consideration is given to the training and awareness required where pupils have specific medical conditions. The school will assess what training may be necessary to ensure that staff who are likely to be involved in supporting these pupils have the knowledge, skills and confidence to do so safely and appropriately.

This will be particularly important where pupils have less common or more complex medical conditions. In such cases, the school will take reasonable steps to ensure that relevant staff receive suitable information, guidance or training so that they understand the pupil's needs and the procedures to follow.

The governing board will also recognise that any member of staff may be required to provide support in an emergency situation. The school will therefore seek to ensure that staff are aware of the procedures to follow in the event of a medical emergency and understand how to access appropriate assistance when required.

Training will be commissioned by the SBM and provided by the following bodies:

- Commercial training providers
- The school nurse
- GP consultant
- The parents of pupils with medical conditions

The parents of pupils with medical conditions will be consulted for specific advice and their views are sought where necessary, but they will not be used as a sole trainer.

The governing board will provide details of further CPD opportunities for staff regarding supporting pupils with medical conditions.

Supply teachers will be:

- Provided with access to this policy.
- Informed of all relevant medical conditions of pupils in the class they are providing cover for.
- Covered under the school's insurance arrangements.

1.1.2 Training for staff supporting pupils with IHPs

The school will ensure that any pupil with a medical condition requiring support has an IHP which sets out the arrangements that will be put in place to meet their needs. The governing board will ensure that members of staff who are likely to be involved in supporting the pupil are aware that an IHP is in place and understand the responsibilities and procedures outlined within it.

Where a pupil has an IHP, the plan may identify specific training needs for staff who are involved in providing support. In some cases, relevant healthcare professionals may advise on the type and level of training required, how this training can be obtained, and whether an assessment of competency is necessary. The school will seek to ensure that staff who provide support to pupils with medical conditions are included, where appropriate, in discussions or meetings where the pupil's needs and IHP are developed or reviewed.

The school will maintain arrangements for the training of staff whose role includes supporting pupils with specific medical needs. Training will normally be provided on an annual basis unless healthcare professionals involved in the pupil's care advise that a different frequency is required.

The school will ensure that staff receive appropriate training so that they can:

- Provide the required support safely and effectively, which may include administering prescribed medication or carrying out healthcare procedures in accordance with an IHP.
- Understand the potential risks associated with providing such support.
- Recognise the signs and symptoms associated with the relevant medical condition, understand possible triggers, and appreciate the potential impact on the pupil.
- Understand and implement appropriate preventative measures and emergency procedures, including recognising when a pupil may be at risk and taking the action set out in the IHP.

Training will be sufficient to ensure that staff are competent and confident in their ability to support pupils with medical conditions and to fulfil the requirements set out in IHPs. Staff will be provided with information about the specific medical conditions they may be required to support, the implications of those conditions, and the preventative and emergency actions they may need to take.

The school recognises that holding a first aid certificate alone does not constitute adequate training for supporting pupils with medical conditions.

6. Individual healthcare plans

The school will seek to identify all pupils with medical conditions so that the need for an IHP can be considered. The circumstances of this will be discussed with the pupil and their parents. If it is clear that the medical condition will require the school to put supportive arrangements in place, an IHP will be drawn up which specifies these arrangements.

It will not be necessary for a pupil to have a formal diagnosis for them to have an IHP. If it is clear that a pupil has medical needs, arrangements will be put in place to support them, ensure they can engage fully with education, and be included in the life of the school. Such arrangements will be recorded in an IHP.

The school will ensure that pupils with medical conditions receive appropriate support through the use of IHPs where required. An IHP will set out the arrangements that will be put in place to support the pupil while they are in school and will provide clear guidance for staff on how the pupil's medical needs should be managed.

IHPs will be particularly important in certain circumstances, including where a pupil:

- Requires prescribed medication while at school.
- Has a medical condition requiring a personalised care or action plan from a healthcare professional.
- Has a known allergy requiring active management – allergy safety will be handled in accordance with the Allergen and Anaphylaxis Policy.
- Has a medical condition that constitutes a disability requiring reasonable adjustments.

Where a pupil requires prescribed medication in school, the IHP will set out arrangements for administering the medication, relevant healthcare professional contact details, procedures in the event of complications or side effects, and parental consent for administration. Where specific members of staff have been trained to administer medication or provide personalised medical support, they will be identified within the plan along with appropriate cover arrangements.

Where healthcare professionals provide personalised care or action plans, e.g. allergy, asthma, diabetes or seizure management plans, the school will incorporate these into the IHP. Where relevant, the plan will also identify known allergens, risk reduction measures and any prescribed emergency medication, including arrangements for the use of adrenaline auto-injectors.

Where a pupil's medical condition requires reasonable adjustments under equality legislation, the IHP will set out the adjustments required and how they will be implemented.

Examples of situations where an IHP may not be necessary may include:

- **Hay fever (allergic rhinitis)** where the condition can be managed through access to appropriate non-prescription medication in accordance with the school's medical conditions policy.

- **Eczema** where the condition can be managed through the use of appropriate medication. The school will remain mindful that certain activities, such as sand play or swimming, may trigger flare-ups and will take reasonable steps to minimise risks where appropriate.

- **Food intolerances** that can be effectively managed by avoiding specific foods.

- **Mild asthma**, which may be managed through the pupil's Asthma Action Plan and access to their inhaler medication. Pupils with more complex or severe asthma will normally require an IHP.

The headteacher will ultimately decide, in discussion with parents and, where appropriate, relevant healthcare professionals, whether a pupil's medical condition can be managed through the school's general medical conditions arrangements or whether an IHP is required to ensure that appropriate and individualised support is in place.

The school, parents and a relevant healthcare professional will work in partnership to create and review IHPs. Where appropriate, the pupil will also be involved in the process.

IHPs will include the following information:

- The medical condition, along with its triggers, symptoms, signs and treatments

- The pupil's needs, including medication (dosages, side effects and storage), other treatments, facilities, equipment, access to food and drink (where this is used to manage a condition), dietary requirements, and environmental issues

- The support needed for the pupil's educational, social and emotional needs

- The level of support needed, including in emergencies

- Whether a child can self-manage their medication

- Who will provide the necessary support, including details of the expectations of the role and the training needs required, as well as who will confirm the supporting staff member's proficiency to carry out the role effectively

- Cover arrangements for when the named supporting staff member is unavailable

- Who needs to be made aware of the pupil's condition and the support required

- Arrangements for obtaining written permission from parents and the headteacher for medicine to be administered by school staff or self-administered by the pupil

- Separate arrangements or procedures required during school trips and activities

- Where confidentiality issues are raised by the parents or pupil, the designated individual to be entrusted with information about the pupil's medical condition

- What to do in an emergency, including contact details and contingency arrangements

Where a pupil has an emergency healthcare plan prepared by their lead clinician, this will be used to inform the IHP.

The IHP will be developed with the child's best interests in mind. In preparing the IHP the school will assess and manage risks to the child's education, health and social wellbeing, and minimise disruption.

IHPs will be easily accessible to those who need to refer to them, but confidentiality will be preserved.

Where a pupil has an EHC plan, the IHP will be linked to it or become part of it. Where a child has SEND but does not have a statement or EHC plan, their SEND will be mentioned in their IHP.

Where a child is returning from a period of hospital education, alternative provision or home tuition, the school will work with the LA and education provider to ensure that their IHP identifies the support the child will need to reintegrate.

All IHPs will be reviewed at least annually, or earlier if evidence is presented that the child's needs have changed.

1.1.3 IHPs in the long term

The school understands that, as part of wider SEND reforms, the government plans for schools to create digital individual support plans for pupils with identified SEND. Future practice will include the incorporation of IHPs in individual support plans so that pupils will not need two separate documents.

7. Managing medicines

In accordance with the school's Administering Medication Policy, medicines will only be administered at school when it would be detrimental to a pupil's health or school attendance not to do so.

Where a pupil requires medication during the school day, arrangements for administering medication will be recorded in the pupil's IHP.

Pupils under 16 years old will not be given prescription or non-prescription medicines without their parents' written consent, except where the medicine has been prescribed to the pupil without the parents' knowledge. In such cases, the school will encourage the pupil to involve their parents, while respecting their right to confidentially.

Non-prescription medicines may be administered in the following situations:

- When it would be detrimental to the pupil's health not to do so
- When instructed by a medical professional

No pupil under the age of 16 will be given medicine containing aspirin unless prescribed by a doctor. Pain relief medicines will not be administered without first checking when the previous dose was taken, and the maximum dosage allowed.

Parents will be informed any time medication is administered that is not agreed in an IHP.

The school will only accept medicines that are in-date, labelled, in their original container, and contain instructions for administration, dosage and storage. The only exception to this is insulin, which must still be in-date, but is available in an insulin pen or pump, rather than its original container.

All medicines will be stored safely. Pupils will be informed where their medicines are at all times and will be able to access them immediately, whether in school or attending a school trip or residential visit. Where relevant, pupils will be informed of who holds the key to the relevant storage facility. When medicines are no longer required, they will be returned to parents for safe disposal.

When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes will be used for the disposal of needles and other sharps.

Controlled drugs will be stored in a non-portable container and only named staff members will have access; however, these drugs can be easily accessed in an emergency. A record will be kept of the amount of controlled drugs held and any doses administered. Staff may administer a controlled drug to a pupil for whom it has been prescribed, in accordance with the prescriber's instructions.

The school will hold asthma inhalers for emergency use. The inhalers will be stored in the medical room and their use will be recorded. Inhalers will be used in line with the school's Asthma Policy.

Records will be kept of all medicines administered to individual pupils, stating what, how and how much medicine was administered, when, and by whom. A record of side effects presented will also be held.

1.1.4 Non-prescription medicines

Non-prescription medicines are licensed by the Medicines and Healthcare products Regulatory Agency (MHRA) for use without a GP prescription. The school will not require parents to obtain a prescription for medicines that are available over the counter.

Non-prescription medicines may be administered by authorised members of staff or self-administered by pupils, where appropriate, provided that written parental consent has been obtained. Any administration of non-prescription medication will be carried out in accordance with the school's Administering Medication Policy.

While staff may volunteer to administer medication, they cannot be required to do so. Staff who administer medicines will receive appropriate guidance and support to ensure medicines are administered safely and in accordance with the manufacturer's instructions.

1.1.5 Self-management

Following discussion with parents, pupils who are competent to manage their own health needs and medicines will be encouraged to take responsibility for self-managing their medicines and procedures. This will be reflected in their IHP.

Where possible, pupils will be allowed to carry their own medicines and relevant devices. Where it is not possible for pupils to carry their own medicines or devices, they will be held in suitable locations that can be accessed quickly and easily. If a pupil refuses to take medicine or carry out a necessary procedure, staff will not force them to do so. Instead, the procedure agreed in the pupil's IHP will be followed. Following such an event, parents will be informed so that alternative options can be considered.

If a pupil with a controlled drug passes it to another child for use, this is an offence and appropriate disciplinary action will be taken in accordance with our Drug and Alcohol Policy.

8. Record keeping

Written records will be kept of all medicines administered to pupils. Proper record keeping will protect both staff and pupils and provide evidence that agreed procedures have been followed. Records will be made on Medical Tracker.

Records will also be maintained for any serious incidents or near misses relating to medical conditions, including allergic reactions or medication errors.

9. Emergency procedures

Medical emergencies will be dealt with under the school's emergency procedures.

Where an IHP is in place, it should detail:

- What constitutes an emergency.
- What to do in an emergency.

Pupils will be informed in general terms of what to do in an emergency, e.g. telling a teacher.

If a pupil needs to be taken to hospital, a member of staff will remain with the pupil until their parents arrive. When transporting pupils with medical conditions to medical facilities, staff members will be informed of the correct postcode and address for use in navigation systems.

In a life-threatening emergency, any member of staff may take reasonable action to preserve life, including administering emergency medication where appropriate.

10. Day trips, residential visits and sporting activities

Pupils with medical conditions will be supported to participate in school trips, sporting activities and residential visits.

Prior to an activity taking place, the school will conduct a risk assessment to identify what reasonable adjustments should be taken to enable pupils with medical conditions to participate. In addition to a risk assessment, advice will be sought from pupils, parents and relevant medical professionals. The school will arrange for adjustments to be made for all pupils to participate, except where evidence from a clinician, e.g. a GP, indicates that this is not possible.

IHPs will be reviewed prior to trips and visits to ensure appropriate arrangements are in place.

11. Unacceptable practice

The school will not:

- Assume that pupils with the same condition require the same treatment.
- Assume that older pupils do not require support related to their medical condition.
- Assume that a pupil does not have a medical condition because a formal diagnosis has not yet been made, for example where medical investigations are ongoing.
- Prevent pupils from easily accessing their inhalers and medication in line with what is agreed in their IHP.
- Ignore the views of the pupil or their parents.
- Ignore medical evidence or opinion.
- Unreasonably request further medical evidence where sufficient information has already been provided by parents, carers or healthcare professionals.
- Send pupils home frequently for reasons associated with their medical condition or prevent them from taking part in activities at school, including lunch times, unless this is specified in their IHP.
- Send an unwell pupil to the medical room or school office alone or with an unsuitable escort.
- Penalise pupils with medical conditions for their attendance record, where the absences relate to their condition.

- Set lower attendance expectations for pupils with medical conditions or place pupils on sustained part-time timetables for medical reasons without appropriate review and reintegration planning.
- Make parents feel obliged or forced to visit the school to administer medication or provide medical support, including for toilet issues. The school will ensure that no parent is made to feel that they have to give up working because the school is unable to support their child's needs.
- Create barriers to pupils participating in school life, including school trips.
- Refuse to allow pupils to rest, eat, drink or use the toilet when they need to in order to manage their condition.
- Delay responding to a medical emergency or fail to call for assistance.

12. Liability and indemnity

The governing board will ensure that appropriate insurance is in place to cover staff providing support to pupils with medical conditions.

The school holds an insurance policy with RPA covering liability relating to the administration of medication. The policy has the following requirements:

All staff providing such support will be provided with access to the insurance policies.

In the event of a claim alleging negligence by a member of staff, civil actions are most likely to be brought against the school, not the individual.

13. Complaints

Parents or pupils wishing to make a complaint concerning the support provided to pupils with medical conditions are required to speak to the school in the first instance. If they are not satisfied with the school's response, they may make a formal complaint via the school's complaints procedures, as outlined in the Complaints Procedures Policy. If the issue remains unresolved, the complainant has the right to make a formal complaint to the DfE.

Parents and pupils are free to take independent legal advice and bring formal proceedings if they consider they have legitimate grounds to do so.

14. Home-to-school transport

Arranging home-to-school transport for pupils with medical conditions is the responsibility of the LA. Where appropriate, the school will share relevant information to allow the LA to develop appropriate transport plans for pupils with life-threatening conditions.

15. Defibrillators

The school has an automated external defibrillator (AED). The AED will be stored in briefing area in an unlocked, alarmed cabinet.

All staff members and pupils will be made aware of the AED's location and what to do in an emergency. A risk assessment regarding the storage and use of AEDs at the school will be carried out and reviewed annually.

No training will be needed to use the AED, as voice and/or visual prompts guide the rescuer through the entire process from when the device is first switched on or opened; however, staff members will be trained in cardiopulmonary resuscitation (CPR), as this is an essential part of first-aid and AED use.

The emergency services will always be called where an AED is used or requires using.

[Where possible, AEDs will be used in paediatric mode or with paediatric pads for pupils under the age of eight.

Maintenance checks will be undertaken on AEDs on a weekly basis by the school nurse, who will also keep an up-to-date record of all checks and maintenance work.

16. Monitoring and review

This policy will be reviewed on an annual basis by the named governor and senior leader. Any changes to this policy will be communicated to all staff, parents and relevant stakeholders.

I. IHP Implementation Procedure

1. A parent or healthcare professional informs the school that the child has a medical condition or is due to return from long-term absence, or that needs have changed.
2. The headteacher coordinates a meeting to discuss the child's medical needs and identifies a member of school staff who will provide support to the pupil.
3. A meeting is held to discuss and agree on the need for an IHP.
4. An IHP is developed in partnership with healthcare professionals, and agreement is reached on who leads.
5. School staff training needs are identified.
6. Training is delivered to staff and review dates are agreed.
7. The IHP is implemented and circulated to relevant staff.
8. The IHP is reviewed annually or when the condition changes (revert back to step 3).