



# **Medical Conditions Policy**

## **Langley Park School for Boys**

Updated September 2025

Review Date: September 2026

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## **Medicine and Supporting Students at School with Medical Conditions Policy**

Section 100 of the Children and Families Act 2014 places a duty on the Board of Governors and Senior Leadership Team to make arrangements for supporting students at the school with medical conditions. Students with special medical needs have the same right of admission to school as other students and cannot be refused admission or excluded from school on medical grounds alone. However, teachers and other school staff in charge of students have a common law duty to act in the place of the parent and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site. This could extend to a need to oversee students taking medicine. The prime responsibility for a student's health lies with the parent who is responsible for the student's medication and should supply the school with information.

This policy will be reviewed regularly and will be readily accessible to parents/carers and staff through our school website.



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## **1 Policy Implementation**

All schools and academies are expected by Ofsted to have a policy dealing with medical needs and to be able to demonstrate that this is implemented effectively. The overall responsibility for the successful administering and implementation of this policy is given to The Headteacher. They will also be responsible for ensuring that sufficient staff are suitably trained and will ensure cover arrangements in case of staff absences or staff turnover to ensure that someone is always available and on site. The Deputy Headteacher (Safeguarding) will be responsible for briefing supply teachers, risk assessments for school visits and other school activities outside of the normal timetable and for the monitoring of individual healthcare plans. All staff will be expected to show a commitment and awareness of students' medical conditions. All new members of staff will be inducted into the arrangements and guidelines set out in this policy.

## **2 Definition of medical condition**

A medical condition is any illness, disability or injury which may affect a child's participation in school activities or limit their access to education. Medical conditions can be any combination of: physical or mental; short or long-term; episodic or continuous; formally diagnosed or strongly suspected.

## **3 The role of staff**

- 3.1 Some students with medical conditions may be disabled. Where this is the case governing bodies must comply with their duties under the Equality Act 2010. Some may also have Special Educational Needs and may have an Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For students with SEN, this guidance should be read in conjunction with the SEN Code of Practice and the school's SEN policy and SEND school offer.
- 3.2 If a student is deemed to have a long-term medical condition, the school will ensure that arrangements are in place to support them. In doing so, we will ensure that such students can access and enjoy the same opportunities at school as any other student. The school, health professionals, parents/carers and other support services will work together to ensure that students with medical conditions receive a full education, unless this would not be in their best interests because of their health needs. In some cases this will require flexibility and involve, for example, programmes of study that rely on part time attendance at school in combination with alternative provision arranged by the Local Authority and health professionals. Consideration will also be given to how students will be reintegrated back into school after long periods of absence.
- 3.3 Staff must not give prescription medicines or undertake health care procedures without appropriate training (updated to reflect any Individual health care plans). At this school, we recognise that a first-aid certificate does not constitute appropriate training in supporting students with medical conditions. Healthcare professionals, including the school nurse, who we have regular access to, will provide training and subsequent confirmation of the proficiency of staff in a medical procedure, or in providing medication.



#### **4 Procedures to be followed when notification is received that a student has a medical condition**

- 4.1 We will ensure that the correct procedures will be followed whenever we are notified that a student has a medical condition. The procedures will also be in place to cover any transitional arrangements between schools, the process to be followed upon reintegration or when student's needs change and arrangements for any staff training or support. For students starting at LPSB, arrangements will be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or when moving to the school mid-term, we will make every effort to ensure that arrangements are put in place within two weeks.
- 4.2 In making the arrangements, the school will take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. We will also acknowledge that some will be more obvious than others. We will therefore ensure that the focus is on the needs of each individual student and how their medical condition impacts on their school life. The school will ensure that arrangements give parents/carers and students confidence in the school's ability to provide effective support for medical conditions in school. The arrangements will show an understanding of how medical conditions impact on a student's ability to learn, as well as increase their confidence and promote self-care. We will ensure that staff are properly trained to provide the support that students need. The school will ensure that arrangements are clear and unambiguous about the need to support actively students with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. The school will make arrangements for the inclusion of students in such activities with any adjustments as required unless evidence from a clinician such as a GP, or the outcome of a risk assessment, indicates that this is not possible. The school will make sure that no student with a medical condition is denied admission or prevented from attending the school because arrangements for their medical condition have not been made. However, in line with our safeguarding duties, we will ensure that students' health is not put at unnecessary risk from, for example, infectious diseases. We will therefore not accept a student in school at times where it would be detrimental to the health of that student or others.
- 4.3 The school does not have to wait for a formal diagnosis before providing support to students. In cases where a student's medical condition is unclear, or where there is a difference of opinion, judgments will be needed about what support to provide based on the available evidence. This would normally involve some form of medical evidence and consultation with parents/carers. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place. This will usually be led by the SENCO, or the Learning Support Manager. Following the discussions an individual health care plan will be put in place.
- 4.4 Where a student has an individual health care plan, this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other students in the school should know what to do in general terms, such as informing a teacher immediately if they think help is needed. If a student (regardless of whether they have an individual health care plan) needs to be taken to hospital, staff should stay with the student until the parent/carer arrives, or accompany a student taken to hospital by ambulance.



## 5 Individual Health Care Plans

- 5.1 Individual health care plans will be written and reviewed by appropriate health care professionals but it will be the responsibility of all members of staff supporting the individual student to ensure that the plan is followed. The class teacher will be responsible for the student's development and ensuring that they and their medical conditions are supported at school.
- 5.2 Individual health care plans will help to ensure that the school effectively supports students with medical conditions. They will provide clarity about what needs to be done, when and by whom. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. They are likely to be helpful in the majority of other cases too, especially where medical conditions are long-term and complex. However, not all students will require one. The school, health care professional and parents/carers should agree, based on evidence, when a health care plan would be inappropriate or disproportionate. If consensus cannot be reached, the Headteacher, is best placed to take a final view. Individual health care plans will be easily accessible to all who need to refer to them, while preserving confidentiality. Plans will capture the key information and actions that are required to support the student effectively. The level of detail within plans will depend on the complexity of the student's condition and the degree of support needed. This is important because different students with the same health condition may require very different support. Where a student has SEN but does not have a statement or EHC plan, their SEN should be mentioned in their individual health care plan. Individual health care plans, (and their review), may be initiated, in consultation with the parent/carer, by a member of school staff or a healthcare professional involved in providing care to the student. The individual health care plan must be initiated by the lead professional (usually the Learning Support Manager) with support from parents/carers, and a relevant healthcare professional, e.g. school nurse, specialist or student's community nurse, who can best advise on the particular needs of the student. Students should also be involved whenever appropriate. The responsibility for ensuring it is finalised and implemented rests with the school.
- 5.3 Where pupils have well-managed medical conditions or food and other allergies it will be usually be appropriate for individual health care plans to make reference to generic health care plans, particularly where the only likely intervention is the occasional use of an inhaler or EpiPen.
- 5.4 The school will ensure that individual health care plans are reviewed at least annually or earlier if evidence is presented that the student's needs have changed. They will be developed and reviewed with the student's best interests in mind and ensure that the school assesses and manages risks to the student's education, health and social well-being and minimises disruption. Where the student has a special educational need identified in a statement or EHC plan, the individual health care plan should be linked to or become part of that statement or EHC plan.



5.5 It is a necessity that each individual health care plan includes:

- the medical condition, its triggers, signs, symptoms and treatments
- the student'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/noisy conditions, travel time between lessons
- specific support for the student's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete tests, use of rest periods or additional support in catching up with lessons, counselling sessions
- the level of support needed, (some students will be able to take responsibility for their own health needs), including in emergencies. If a student 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 student'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 student's condition and the support required
- arrangements for written permission from parents/carers for medication to be overseen by a member of staff for the self-administering 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 student can participate, e.g. risk assessments
- where confidentiality issues are raised by the parents/carers or student, the designated individuals to be entrusted with information about the student's condition.
- what to do in an emergency, including whom to contact, and contingency arrangements. Some students may have an emergency health care plan prepared by their lead clinician that could be used to inform development of their individual health care plan. The emergency health care plan will not be the school's responsibility to write or review.

## 6 The student's role in managing their own medical needs

- 6.1 If, after discussion with the parents/carers, it is deemed that a student is competent to manage their own health needs and medicines, the school will encourage them to take responsibility for managing their own medicines and procedures. This will be reflected within individual health care plans.
- 6.2 Wherever possible, student should be allowed to carry their own medicines and relevant devices or should be able to access their medicines for self-medication quickly and easily; these will be stored in the cupboard in the medical room to ensure that the safeguarding of other students is not compromised. The school does also recognise that students who can take their medicines themselves or manage procedures may require an appropriate level of supervision. If a student is not able to self-medicate then relevant staff should help to administer medicines and manage procedures for them.



- 6.3 If a student refuses to take medicine or carry out a necessary procedure, staff should not force them to do so but instead follow the procedure agreed in the individual health care plan. Parents/carers should be informed, outside of the review, so that alternative options can be considered.

## **7 Managing medicines on and off the school site**

The following are the procedures to be followed for managing medicines:

- Medicines should only be administered at the school when it would be detrimental to a student's health or school attendance not to do so.
- No student under 16 should be given prescription medicines without their parents/carers' written consent.
- The school will not administer non-prescription medicines to a student. If a parent/carer wishes a student to have the non-prescription medicine administered during the school day, they will need to come to the school to administer it to the student.
- The school will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date, but will generally be available inside an insulin pen or a pump, rather than in its original container.
- All medicines will be stored safely in the medical room. Students should know where their medicines are at all times and be able to access them immediately. Where relevant, they should know who holds the key to the storage facility, which will be the reception office staff.
- Devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to students and not locked away; these will be stored in the medical room, where both teachers and students know how to access them. If a student requires an asthma inhaler it is crucial that there is an inhaler in the school at all times.
- During school trips, the first aid trained member of staff/member of staff in charge of first aid will carry all medical devices and medicines required.
- Staff overseeing the administration of medicines should do so in accordance with the prescriber's instructions. The school will keep a record of all medicines administered to individual student, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at the school should be noted. Written records are kept of all medicines administered to students. These records offer protection to staff and students and provide evidence that agreed procedures have been followed.
- When no longer required, medicines should be returned to the parent/carer to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharp items.





## 8 Unacceptable Practice

Although school staff should use their discretion and judge each case on its merits with reference to the student's individual health care plan, it is not generally acceptable practice:

- to prevent students from easily accessing their inhalers and medication and administering their medication when and where necessary
- assume that every student with the same condition requires the same treatment
- ignore the views of the student or their parents/carers; or ignore medical evidence or opinion, (although this may be challenged)
- send students with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans
- if the student becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- penalise students for their attendance record if their absences are related to their medical condition e.g. hospital appointments
- prevent students 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 the school to administer medication or provide medical support to their students. (No parent/carer should have to give up working because the school is failing to support their student's medical needs)
- prevent students from participating, or create unnecessary barriers to students participating in any aspect of school life, including school trips, e.g. by requiring parents/carers to accompany the students (unless it is essential for them to do so).

## 9 Complaints

Should parents/carers or students be dissatisfied with the support provided they should discuss their concerns directly with the school. If, for whatever reason, this does not resolve the issue, they may make a formal complaint via the complaints procedure outlined in the school's complaints policy.

## APPENDIX A

### Medical Room Procedures

1. **No student should be left unattended in the Medical Room** at any time.
2. Students should also be **advised not to leave the Medical Room** without permission.
3. **Contact a family member/emergency contact** and complete an **accident/incident report**.
4. The **Head of Year should be notified**.
5. If necessary, **emergency first aid** should be given by a qualified first aider.
6. If it is felt that the injury is **sufficiently serious for hospitalisation**, then 999 should be dialled as soon as possible. If no parent or emergency contact can be contacted and the ambulance crew feel the patient must be taken to hospital, he/she **must be accompanied by a member of the school's staff**. The Headteacher will be informed, at the earliest convenience, if a member of staff rings 999.
7. The incident should also be logged on the Visits to the **Medical Room spreadsheet**.
8. A list of students who have serious illnesses and/or **medication** for such conditions is kept in the cupboard within the Medical Room for confidentiality.
9. Medication is listed on a spreadsheet, with the expiry date and when parents should be notified to replace them. This is not the School's legal responsibility, but that of parents/guardians. Epipens, inhalers etc. are named and are in the lower cupboards in Medical Room. Medications for other students are also kept in a locked lower cupboard; the keys being kept in the desk drawer in the Medical Room.
10. If a seriously sick child comes to the Medical Room they should be **given their medication by one first aider after verification by a second**. This should be logged on the Visits to the Medical Room spreadsheet.
11. If parents cannot collect an unwell child, they may give permission via email or telephone for the child to make their own way home, if they are considered able to do so without coming to harm. The **Head of Year has the final say** on this. The student should be advised to contact parents and school to confirm their safe arrival home.
12. If a parent feels their child is well enough to return to lessons, put a note in the planner to say they visited the Medical Room. This goes on the Visits to the Medical Room spreadsheet.
13. Any student who arrives at school with symptoms which existed prior to arriving at school should have been treated at home and not be expected to be treated at school. If necessary the child should be treated, but parents should be contacted and advised to collect their child in order to obtain proper treatment.
14. If a student needs to be sent home early, record it on the Visits to the Medical Room spreadsheet and the Going Home Early book. Update SIMS.
15. For sixth formers, a different form should be completed, which must be signed by the student's Head of Year and the form passed to the Sixth Form Attendance Officer before the student is permitted to leave the school campus. It is not necessary to inform parents unless the student appears to be seriously ill, in which case, the parent should be notified and asked to collect them from school.
16. If a student comes to the Medical Room obviously suffering from something like chicken pox, measles or meningitis, advice should be sought from Bromley's School Nurse Service by telephoning 020 8460 1825. Staff should be notified immediately and also an email and/or letter sent home to parents/guardians giving advice for if their children appear to show symptoms of such illnesses.