Medical Conditions and Medication Policy

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		Applicable Services:	Education
Contributors	Rob Arrowsmith		
Mandatory Policy	Yes		
Note	This policy must not be amended without prior approval of the Education Director		

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1. Supporting Documents

This policy should be read alongside our:

- Allergy Safety Policy (EDU.POL.044)
- First Aid Policy (EDU.POL.029)
- Safeguarding Children in Education Policy (EDE.POL.002)
- SEND Policy (EDU.POL.022)
- Accessibility Plan
- Health and Safety Policy (EDU.POL.038)
- Risk Assessment Policy
- Educational Visits and Off-Site Policy
- Staff Code of Conduct (EDU.POL.039)

Related policies are held within RADAR in the School's policy folder.

2. Introduction

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At Park House School we are a special school, and many of our pupils have medical conditions alongside their special educational needs. We are committed to being a fully inclusive school where every pupil with a medical condition can attend regularly, take part in every part of school life, and be safe and well cared for. This policy sets out how we support pupils with medical conditions and how we manage and administer medication safely.

We plan ahead for every pupil with a medical condition. We write an Individual Healthcare Plan with the pupil and their family, we make sure the appropriate staff are trained and confident in their responsibilities, and we make reasonable adjustments so that a medical condition is never a barrier to learning or to belonging.

Our approach is grounded in Keys Connect, our relational and trauma-informed model. We treat pupils with dignity and respect their privacy when we support a medical need or give medication.

3. Aim & Scope

This policy applies to all pupils at Park House School, and to staff, parents and carers, visitors and contractors. It covers the whole school day and all school activities, including breakfast and after-school provision, educational visits and trips. It aims to:

- make sure pupils with medical conditions are identified, supported and fully included in every part of school life
- set out how Individual Healthcare Plans are written, used and reviewed
- make sure medication is stored, administered, recorded and disposed of safely, with proper consent
- set out how staff manage their own medication safely at school
- meet our duties under the Independent School Standards, the Equality Act 2010, health and safety law and current statutory guidance

4. Abbreviations and Definitions

This policy uses the following terms:

- Medical condition: a physical or mental health condition, long-term or short-term, that may need support, monitoring or emergency action at school.
- Individual Healthcare Plan (IHCP): the plan that sets out what support a pupil needs, how, when and by whom, including in an emergency.
- Medication: any prescribed or non-prescribed medicine, including emergency medicines such as inhalers and adrenaline devices.
- Controlled drug: a medicine subject to additional legal controls on storage, records and administration.
- Self-management: a pupil taking responsibility for their own medication, where they are assessed as able to do so.

5. Policy Content

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5.1 Principles and Approach

At Park House School our practice is guided by these principles. Inclusion first. A medical condition is never a reason to exclude a pupil from learning, trips or activities. We find a way to include every pupil safely. We plan, we do not react. We identify needs early, we write a plan with the pupil and family, and we make sure the right staff know it. Everyone is ready. Any member of staff may have to act in an emergency, so all staff know how to summon help and follow a pupil's plan. Medication is handled safely and with dignity. We give the right medicine to the right pupil, with consent, and we record it. We learn from every incident and near miss, and we change our practice when we need to.

5.2 Supporting Pupils in Practice

This section is in two parts. Part A covers how we support pupils with medical conditions. Part B covers how we manage and administer medication. Allergy safety is dealt with in our separate Allergy Safety Policy (EDU.POL.044), and first aid in our First Aid Policy (EDU.POL.029). The three policies are consistent and should be read together.

Part A: Supporting pupils with medical conditions

Identifying pupils with medical conditions

We ask parents and carers, and where appropriate the pupil, about medical conditions before a pupil starts, and we ask the previous setting for any Individual Healthcare Plan. We keep a register of all pupils with medical conditions that may need support, and whether they have a plan. Where a pupil already on roll is newly diagnosed or their needs change, we put arrangements in place as quickly as possible.

Individual Healthcare Plans

Any pupil whose medical condition needs supportive arrangements has an Individual Healthcare Plan. The plan is written with the pupil and their family, using advice from the health professionals involved in their care, and it is reviewed at least annually or sooner if needs change. It says what the condition is, its triggers and symptoms, what medication and support are needed, what to do in an emergency, and who needs to know. A template is at Appendix B. Plans are stored so that staff who need them can find them quickly while keeping the pupil's information confidential.

Emergency situations

Every Individual Healthcare Plan says what counts as an emergency for that pupil and what staff must do, including who calls 999, who fetches emergency medication, who lets the ambulance in, and who contacts the family. In any emergency staff use their best endeavours to keep the pupil safe, because the risk of doing nothing is greater than the risk of acting. First aid procedures are in our First

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Aid Policy (EDU.POL.029), and the response to anaphylaxis and asthma attacks is in our Allergy Safety Policy (EDU.POL.044).

Educational visits, trips and off-site activities

We plan ahead so that pupils with medical conditions take part in visits and trips safely. We carry out a specific risk assessment, we take the pupil's medication and plan with us, and we make sure staff on the visit know what to do in an emergency. A pupil is never left behind because of a medical condition or because of staffing.

Wellbeing and inclusion

We support the wellbeing of pupils with medical conditions, who can feel different or anxious because of their condition. We make reasonable adjustments under the Equality Act 2010, we include pupils in decisions about their own care, and we challenge any bullying linked to a medical condition under our Anti-Bullying Policy (EDU.POL.007).

Part B: Managing medication

Consent and what we accept

We only hold and give medication where the parent or carer has given written consent, and we record that consent. We accept prescription medicines that are in date, in their original container, and labelled with the pupil's name, the dose and the instructions. We give non-prescription medicine only with specific written parental consent. We never give a medicine containing aspirin to a pupil under 16 unless it is prescribed.

Storage and security

Controlled medication is stored securely, in a locked cabinet or a fridge where required, and accessible only to authorised staff. Controlled drugs are stored and recorded under the additional legal controls that apply to them. Emergency medication such as inhalers and adrenaline devices is the exception. It is stored at room temperature, never locked away or kept where access is restricted, and is readily available in the SLT office, and available to take to off-site activities and trips. Medication is never stored in a general first aid kit.

Administering medication and records

Only trained and authorised staff administer medication, following the pupil's Individual Healthcare Plan and the instructions on the label. Before giving any medicine, staff check the pupil's identity, the medicine, the dose and the expiry date. Every dose given is recorded immediately wherever practicable, and always on the same day, with the date, time, dose and the name of the member of staff. Any missed dose, error or adverse reaction is recorded and reported to the headteacher and the parents without delay. A medication record template is at Appendix C.

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Self-management by pupils

We encourage pupils to take responsibility for their own medication where they are able to. Where a pupil is assessed as able to carry and use their own medication, for example an inhaler or an adrenaline device, this is agreed and recorded in their Individual Healthcare Plan, with the level of supervision needed.

Disposal

We return out-of-date or unused medication to the parent or carer where we can, and otherwise dispose of it safely in line with the requirements for medicines. Used adrenaline devices and sharps are disposed of safely.

Staff's own medication

Staff who need to keep their own medication at school store it securely and out of reach of pupils, never loose in a bag, pocket or desk that a pupil could access, and never in a place pupils share. Where a member of staff carries emergency medication for their own condition, for example an inhaler or an adrenaline device, they keep it with them safely. Staff take their own medication discreetly and not in front of pupils where this can be avoided. Any controlled drug a member of staff needs at school is stored under the same secure arrangements as pupil medication. Staff must not consume alcohol or any non-prescribed drug that could affect their ability to work safely with pupils, in line with our Staff Code of Conduct (EDU.POL.039).

5.3 Recording, Monitoring and Reporting

Medication administered, missed doses and errors are recorded on RADAR. Serious incidents and near misses involving a medical condition are recorded, reported to the pupil's parents and to the Proprietor and Governors, and used to learn lessons and review this policy. Where a medical incident raises a safeguarding concern, it is reported to the Designated Safeguarding Lead. Leaders keep the IHCP of each child up to date on Arbor and report on the policy to the Proprietor and Governors at least annually. Risks are held on the school risk register.

5.4 Equality and Inclusion

At Park House School this policy is applied fairly and without discrimination, in line with the Equality Act 2010. A medical condition can be a disability, and we make anticipatory and reasonable adjustments so that affected pupils are not put at a disadvantage and are fully included. We monitor the impact of this policy on pupils with protected characteristics and adapt our practice to remove disadvantage. Any concern that this policy disadvantages a pupil or group should be raised with the headteacher.

6. Responsibilities

6.1 Pupils

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Tell an adult if they feel unwell, and take part in writing their own Individual Healthcare Plan where they are able to. Manage their own medication where they have been assessed as able to do so, following the agreed arrangement.

6.2 Staff

Know which pupils have medical conditions, read their Individual Healthcare Plans, and follow them. Only administer medication when trained and authorised, and record every dose accurately.

6.3 Leadership

Make sure every pupil with a medical condition has the support and plan they need, that staff are trained, and that medication is stored safely and accessibly. Make sure risks relating to pupils with medical conditions are on the school risk register and are actively managed.

6.4 Governance

Hold leaders to account for this policy and its implementation, and make sure it is reviewed at least annually and published.

6.5 Parents and carers

Tell the school about their child's medical condition, provide in-date medication and written consent, and help to write and review the Individual Healthcare Plan.

6.6 Named leads

7. The named senior leader responsible for medical conditions at Park House School is Tracy Reynolds, SENCO. The named governor or proprietor representative responsible for oversight is James Madine. The Special Educational Needs Coordinator is Tracy Reynolds and the Designated Safeguarding Lead is Ann-Marie Oliver.

8. Training Requirements

All staff know which pupils have medical conditions, understand their role in this policy, and know how to summon trained help in an emergency. This is part of induction for new staff. Staff who support a pupil with a specific medical condition, or who administer medication, receive suitable, usually annual, training so they are competent and confident, using advice from the relevant health professionals. A first aid certificate alone does not count as this training. The school keeps sufficient trained cover so that a pupil is never without support, and keeps a record of training.

9. Equality Impact Statement

All policies will be developed and implemented in a manner that promotes equality, diversity, and inclusion, ensuring fair and equitable treatment for all individuals. Policies must align with relevant equality legislation and reflect the expectations and standards set by our regulatory bodies. They will demonstrate a commitment to

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eliminating discrimination, advancing equality of opportunity, and fostering an inclusive environment that respects and values the diverse needs, backgrounds, and experiences of those we support, as well as our workforce.

10. Sources of Information / References

This policy reflects current legislation and statutory guidance, including:

- Supporting children and young people with medical conditions and allergy, Department for Education statutory guidance, draft for consultation March 2026, statutory from 1 September 2026. This guidance applies directly to maintained schools and academies and is relevant to independent schools through the duties below
- The Children and Families Act 2014, section 100 (supporting pupils with medical conditions)
- The Education (Independent School Standards) Regulations 2014, Part 3 (the welfare, health and safety of pupils), and the Independent School Standards: Guidance for independent schools, Department for Education, April 2026
- The Equality Act 2010 (the duty to make anticipatory and reasonable adjustments for disabled pupils)
- The Health and Safety at Work etc. Act 1974, section 2, and the Management of Health and Safety at Work Regulations 1999
- The Special Educational Needs and Disability Code of Practice, 0 to 25 years (2015)
- Keeping Children Safe in Education 2025, and Keeping Children Safe in Education 2026 from 1 September 2026 (a medical condition can be a safeguarding matter)
- The Early Years Foundation Stage Statutory Framework, where the school has early years provision

11. Version Control

This document can also be found in the following locations and should be amended in the following (ie. Circle, Nourish, Radar):

This policy is reviewed at least annually, and sooner if legislation or statutory guidance changes or if an incident or near miss suggests it should be. It is published on the school website and made available in hard copy on request. The named owner for review at Park House School is the headteacher, supported by the named senior leader and named governor for medical conditions. The next review date and version history are recorded in the control table above.

12. Appendices

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12.1 Appendix A: School-Specific Annex

At Park House School the following local arrangements apply:

- Named senior leader and named governor for medical conditions: Tracy Reynolds and James Madine.
- School nurse or health lead and how to contact them: Tracy Reynolds, 01226 744870.
- Where medication is stored, including secure and refrigerated storage and emergency medication locations: Controlled medication is kept in locked medication cabinet in SLT Office. Emergency inhaler and Epi-pens are kept near the medication cupboard in the SLT office and are easily accessible.
- Staff trained to administer medication: Tracy Reynolds lead, all staff received Medication Administration training on Educare.

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12.2 Appendix B: Individual Healthcare Plan Template

The Individual Healthcare Plan is written with the pupil and their family, using advice from the health professionals involved in their care, and reviewed at least annually. Complete one plan for each pupil.

Section	Details
Pupil name, date of birth, photograph	
Class and key staff	
Parent or carer contact details	
Who needs to know about the condition	
Medical condition, triggers, signs and symptoms	
Daily care needs	Medication, dose, side effects, storage, equipment, diet, environment
Impact on learning and wellbeing	
Self-management	What the pupil can do, and how this is monitored
What counts as an emergency, and what to do	Who calls 999, who brings medication, who contacts the family
Medication held at school	Including any emergency medication, dose and expiry
Allergy or Asthma Plan attached	Yes or no, cross-refer to Allergy Safety Policy
Arrangements for trips and visits	
Plan written by, with pupil and family	Date
Review date	

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12.3 Appendix C: Medication Administration Record

A record is completed on RADAR for every dose of medication given. This template shows the minimum information recorded.

Field	Detail
Pupil name and class	
Medication and dose	
Date and time given	
Given by (name and signature)	
Parental consent on file	Yes or no
Missed dose, error or reaction	Details and who was informed
Expiry date checked	Yes or no

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