

STOCKPORT GRAMMAR SCHOOL

SUPPORTING PUPILS WITH MEDICAL CONDITIONS POLICY

Approved by Governors 13th October 2026

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1. Aims

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

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

This policy aims to:

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

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 governing bodies to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the statutory guidance on [supporting pupils with medical conditions at school](#) and [statutory framework for the Early Years Foundation Stage](#).

3. Roles and responsibilities

3.1 The Governing Body

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

The governing body will:

- › Review this policy in a timely manner, in line with the relevant legislation and requirements.
- › Monitor practice, and staff training, for pupils with medical conditions, in line with this policy.

The governing body delegates the day-to-day implementation of this policy to the Senior School and Junior School Heads.

3.2 The Senior and Junior School Heads

The Senior School and Junior School Heads will:

- › Make sure all staff are aware of this policy and understand their role in its implementation.
- › Make sure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations.
- › Make sure that all staff who need to know are aware of a child's condition.
- › Take overall responsibility for the development and monitoring of individual healthcare plans (IHPs)
- › Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way.
- › Manage cover arrangements in the case of staff absence or turnover, to make sure a suitable staff member is always available, and supply staff are briefed appropriately about pupils' medical needs.
- › Make sure that parents are contacted in the case of any pupil who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse.
- › Make sure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date.
- › In the school's Early Years Foundation Stage (EYFS) implement systems for obtaining information about a child's needs for medicines and keeping this information up to date
- › Delegate responsibility to the Education Visit Co-ordinators for approving risk assessments for school visits and school activities outside the normal school timetable that involve provision for pupils with medical conditions.

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, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will 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 as required in the School Admission Agreement. The school shall rely on the parent(s) providing this information in a timely manner before an offer of a place is made at the school.
- › Provide evidence of appropriate prescription medicines and written permission for medicines to be administered by staff.
- › Be involved in the development and review of their child's IHP.
- › Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times.

3.5 Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

3.6 Healthcare professionals

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

4. Equal opportunities

The school will adhere to the legal responsibilities under the Equality Act 2010. The school will support pupils with medical conditions to participate, if possible, in school trips and visits, or in sporting activities, subject to approval by the trip leader and an appropriate risk assessment.

The school will consider whether reasonable adjustments can 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 may be consulted.

5. Being notified that a child has a medical condition

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

The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

5.1 EYFS – Obtaining information about medicines

We will:

- For new starters, send a form to all parent/carers of pupils after their place at the school has been confirmed, to confirm any medicine(s) their child needs. Where a pupil has a new diagnosis and/or a pupil has moved to the school mid-term, we will send a form and discuss with parents before an offer of a place is made and put arrangements in place as soon as the form has been received from parents.

We ask that parents/carers proactively inform us by either phone call to the school office or email (sgjs@stockportgrammar.co.uk) <mailto:marieta@stockportgrammar.co.uk> if their child's medical needs change during the school year.

6. Individual healthcare plans (IHPs)

The Senior and Junior School Heads have overall responsibility for the development of IHPs for pupils with medical conditions.

The day-to-day responsibility has been delegated to the school nurse. Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all pupils with a medical condition will require an IHP. If there is no consensus, the Senior or Junior School Head headteacher will make the final decision.

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

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has special educational needs and disabilities (SEND) but does not have an EHC plan, the SEND will be addressed in the IHP as needed.

The level of detail in the plan will depend on the complexity of the child'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, 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 Head 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 and non-prescription medicines will only be administered at school by the School Nurse or trained staff:

- › When it would be detrimental to the pupil's health or school attendance not to do so, **and**
- › Where we have parents/carers' written consent or, if there is no written consent, parents/carers' verbal consent for that specific incidence.

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

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

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

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

The school will only accept prescribed medicines that are:

- › In-date
- › Labelled
- › Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage.

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Pupils 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 devices will always be readily available to pupils and not locked away.

Medicines will be returned to parents/carers to arrange for safe disposal when no longer required.

Administration of Medicines – Junior School including EYFS

The School Nurse (or trained staff) do not give non-prescribed or prescribed medication to pupils unless supplied with written authorisation and instructions from their parents. Non-prescribed consent is given on the new starter medical documents. Prescription medication is administered on receipt of a completed request to administer medication form. All prescribed medication must be in the original packaging with the pharmacy label clearly showing the child's name and dosage instructions. The medication should be handed to the school nurse in the medical centre or junior school reception. Where authorisation has been received, medicines can only be administered by the school nurse (or other trained staff) or, if on a trip, the trip leader. Records are kept on file of every dose of medicine given and parents informed via a paper slip sent home with the child. Pupils should not carry medicines of any sort with the exception of asthma inhalers and Epi-pens. Medical and emergency contact information is updated regularly and the information kept by the School Office, on the school database and in the classroom via a care plan. This is updated at least annually via the care plan which is sent home to be updated.

7.1 Controlled drugs

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

All controlled drugs are kept in a secure cupboard in the Medical Centre and only named staff have access.

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

7.2 Pupils managing their own needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. If pupils have an IHP, this will be discussed with parents/carers and it will be reflected in their IHP.

IHPs will include procedures for staff to follow if a pupil refuses to carry out a necessary procedure or take medicine.

7.3 Unacceptable practice

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

- Prevent pupils from easily accessing their inhalers and medication and administering their medication when and where necessary.
- Assume that every pupil with the same condition requires the same treatment.
- Assume that older children do not require support, even if they are able to take increasing responsibility for managing their medical condition.
- Ignore the views of the pupil or their parents/carers.
- Ignore medical evidence or opinion.
- Assume that a pupil does not have a medical condition because they do not yet have a diagnosis, for example while medical investigation is underway.

- › Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs.
- › Send an ill pupil to the school office or medical centre unaccompanied or with someone unsuitable (e.g. a fellow pupil who is not old or responsible enough)
- › Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. hospital appointments.
- › Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively.
- › Require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupil, including with toileting issues.
- › Prevent pupils from participating in or create unnecessary barriers to pupils participating in any aspect of school life.
- › Administer, or ask pupils to administer, medicine in school toilets.

8. Emergency procedures

The School's Terms and Conditions state that parents authorise the Head to consent on their behalf to the pupil receiving emergency medical treatment where certified by an appropriately qualified person as necessary for the pupil's welfare and if the parents or a second emergency contact cannot be contacted in time.

If pupils have an IHP, their IHP will clearly set out what constitutes an emergency and will explain what to do.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent/carer arrives or accompany the pupil to hospital by ambulance.

The school's first aid procedures are set out in the First Aid policy.

9. Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with school nurse. 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.
- › Fulfil the requirements in the IHPs.
- › Help staff to have an understanding of the specific medical conditions they are being asked to support with, their implications and preventative measures.

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

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 that they can

recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

10. Record keeping

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

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

10.1 EYFS – Recording information about medicines

We will:

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

12. Complaints

Parents/carers with a complaint about the school's actions in regard to their child's medical condition should follow the school's complaints procedure. This can be downloaded from the school's website.

13. Monitoring arrangements

This policy will be monitored by the Senior School Deputy Head (Safeguarding and Wellbeing) and Junior School Head and reviewed by the Senior School Deputy Head (Safeguarding and Wellbeing) and Junior School Head annually.

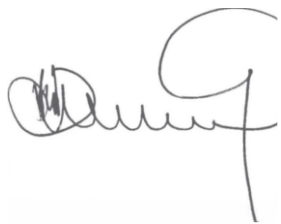
At every review, the policy will be approved by the governing body.

14. Links to other policies

This policy should be read in conjunction with the following policies that are available on the school web site or by request following policies:

- › Whole School Equality, Diversity and Inclusion Policy
- › Accessibility Plan
- › Complaints Procedure
- › First Aid Policy
- › Health and safety policy
- › Safeguarding policy
- › Special Educational Needs and Disability Policy

Authorised by
Chair of Governors



Date

13.10.26

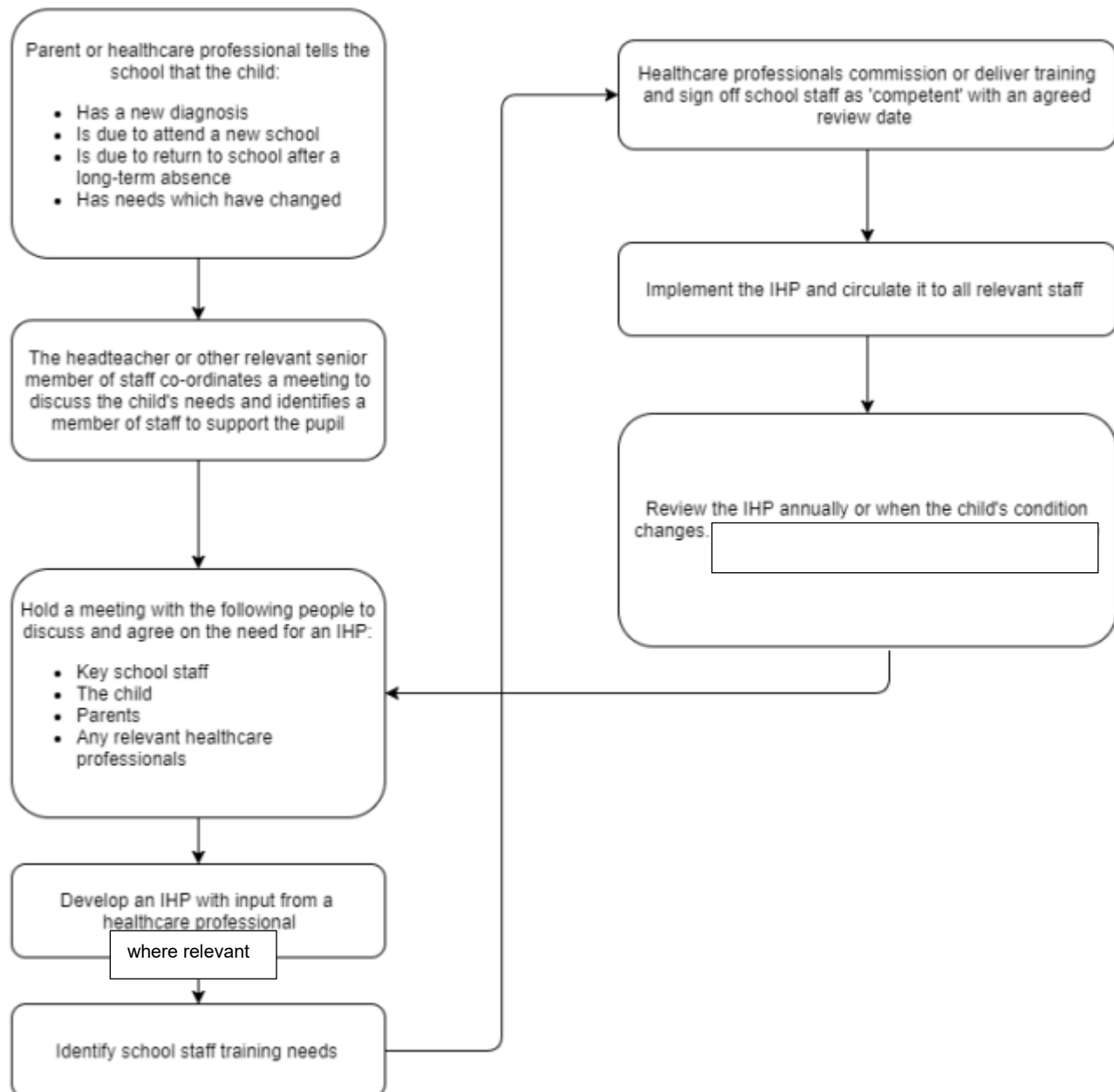
Circulation

Governors / teaching staff / all staff / parents / website

Status

Regulatory

Appendix 1: Being notified a child has a medical condition.



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

- › Pupils who have an infectious disease should not attend school/nursery.
- › Parents should notify the school if their child has an infectious disease.
- › If a pupil becomes unwell during the day – for example, they have a temperature of 38 degrees or above, sickness, diarrhoea or stomach pains – the parents or carers will be contacted to collect their child.
- › Pupils with a temperature, sickness, diarrhoea or an infectious disease should not attend school/nursery while they are sick. Depending on the sickness, staff may ask parents to take their child to the doctor before they return to school.
- › Staff will notify parents if a risk to other pupils exists.

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

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

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