

Supporting Pupils at School with Medical Conditions and Administration of Medication Policy

February 2026

Document Control

Changes History

Version	Date	Amended by	Recipients	Purpose
1.0	**January 2022**	**Director of Education**	**All Plymouth CAST Schools**	**New policy to adopt locally**
2.0	**July 2024**	**COO / SELT**	**All Plymouth CAST Schools**	**Policy Review**
3.0	**February 2026**	**COO / SELT**	**All Plymouth CAST Schools**	**Policy Review**

Approvals

This policy requires the following approvals:

Board	Chair	CEO	Date Approved	Version	Date for Review
		☒	January 2022	1.0	January 2024
		☒	July 2024	2.0	January 2026
		☒	February 2026	3.0	January 2028

National/Local Policy

☒This policy must be localised by Academies

☒ This policy must not be changed, it is a CAST/National Policy (only change logo, contact details and any yellow highlights)

Position with the Unions

Does the policy require consultation with the National Unions under our recognition agreement? ☐ Yes ☒ No

If yes, the policy status is: ☐ Consulted and Approved ☐ Consulted and Not Approved ☐ Awaiting Consultation

Introduction

Our vision for children and young people with special educational needs and disabilities and those with temporary or life-long medical conditions is the same as for all children in our academies. We aim to provide outstanding education to all children and young people and full access to the life of the school. We are fully inclusive in our provision in terms of social background, ability, ethnicity, disability, religion, gender, or sexuality. We strive to ensure access for all to educational excellence in preparing young people for their futures, seeking to continually improve levels of attainment and progress for all, and secure the highest levels of achievement appropriate to the individual learner.

Key Points (Supporting Pupils at School with Medical Conditions Statutory guidance for Governing Bodies of Maintained Schools and Proprietors of Academies in England DfE 2015):

- Pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education
- The Local CAST Board must ensure that arrangements are in place in schools to support pupils at school with medical conditions.
- The Local CAST Board should ensure that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are properly understood and effectively supported.
- The Local CAST Board should ensure that its arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions in school. The arrangements should show an understanding of how medical conditions impact on a child's ability to learn, as well as increase confidence and promote self-care. They should ensure that staff are properly trained to provide the support that pupils need.
- In supporting pupils at school with medical conditions, The Local CAST Board must have due regard to the Equalities Act 2010, and the SEND Code of Practice.

St Joseph's Catholic Primary School

1. The staff of *St Joseph's* wishes to ensure that students with medical needs receive proper care and support. Our intention is to ensure that students with medical conditions should have full access to education including trips and PE. The governing body will ensure that staff are supported and trained and competent before they take on the responsibility of supporting students with medical conditions.

2. The employer's insurance will cover liability relating to the administration of medication.

3. Tammy Soby will be responsible for ensuring the following:

   - Procedures to be followed when notification is received that a student will be attending who has a medical condition (including transitional arrangements between schools, re-integration or when students' needs change; arrangements for staff training or support)

    - Staff training on the procedures for the safe administration of medication will be provided via the SSS Learning system.
    - Specific training relating to individual conditions, illnesses and disabilities will be provided as required.
    - Regular whole-school overview and familiarity sessions in respect of children who may require emergency asthma and anaphylaxis medication.

- Procedures to be followed when a student moves to the school mid-term or when a student has a new diagnosis

Mid-term Arrivals & New Diagnoses

Mid-term Arrivals: Tammy Soby will conduct an admission meeting with parents/carers to identify medical needs. If a complex condition exists, an Individual Healthcare Plan (IHP) must be drafted and staff briefed *before* the student's first full day of lessons."

New Diagnoses: Parents are required to notify the school office immediately. A review of the student's existing provision will be held within [e.g., 5 working days], and the IHP will be updated with new clinical advice or medication requirements.

Home-to-School Transport

The school will share relevant sections of the IHP with the transport provider (with parental consent). For students with life-threatening conditions (e.g., severe allergies), the school will ensure the driver/escort is aware of the location of emergency medication and the protocol for its use during transit.

Defibrillators (AEDs)

The Automated External Defibrillator (AED) is located on the wall outside the main office. It is checked monthly by **Sarah Jackson** to ensure the battery and pads are in date. While the AED provides voice prompts for any user, designated first aiders receive formal training on its use. The code for the AED is on the cupboard door near the sink.

Asthma Inhalers & Spacers

Reliever inhalers are kept in **class medical bags.** The school maintains a 'spare' emergency inhaler kit in the event the pupil's own inhaler is empty or lost. All spacers must be cleaned after use or sent home for sterilization.

Adrenaline Auto-Injectors (AAI)

AAIs (e.g., EpiPens) are stored in a central, unlocked, and supervised location: **Class medical bags**. They must be clearly labelled with the student's name. For off-site trips, the AAI must be carried by the student's lead teacher. The school also holds a 'spare' AAI kit for emergency use on pupils known to be at risk of anaphylaxis.

4. The above procedures will be monitored and reviewed by *Tammy Soby*

5. Where identified as being necessary, Individual Healthcare Plans (IHCP) will be developed between St Joseph's , healthcare professionals and parents so that the steps needed to help a student manage their condition and overcome any potential barriers to getting the most from their education are identified. The IHCP will include:

   a) The student's medical condition, its triggers, symptoms, medication needs and the level of support needed in an emergency. Also it must include any treatments, time, facilities, equipment, testing and access to food or drink (where it is used to manage their condition), dietary requirements and environmental issues such as crowded corridors and travel time between lessons
   b) Specific support for the student's education, social and emotional needs, such as how will absences be managed, requirements for extra time to complete exams, use of rest periods or counselling sessions
   c) Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support from a healthcare professional
   d) Cover arrangements and who in the school needs to be aware of the student's condition and the support required including supply staff
   e) Arrangements for written permission from parents for medication
   f) Arrangements or procedures for school trips or other school activities outside the normal timetable; completion of risk assessments for visits and school activities outside the normal timetable
   g) The designated individuals to be entrusted with the above information
   h) Procedures in the event of the student refusing to take medicine or carry out a necessary procedure

6. *Tammy Soby* will have the final decision on whether an Individual Health Care Plan is required.

Students with asthma

7. *St Joseph's* has decided to hold an emergency inhaler and spacer for the treatment of an asthma attack.

8. Sarah Jackson will be responsible for ensuring the following:

   - Instructing all staff on the symptoms of an asthma attack
   - Instructing all staff on the existence of this policy
   - Instructing all staff on how to check the asthma register
   - Instructing all staff on how to access the inhaler

- Making all staff aware of which staff have agreed, and have been trained, to administer asthma medication (the 'designated staff') and how to access their help

9. *Sarah Jackson* will be responsible for ensuring that designated staff:

    - Recognise the signs of an asthma attack and when emergency action is necessary
    - Know how to administer inhalers through a spacer
    - Make appropriate records of attacks

10. *Sarah Jackson and Tara East* will be responsible for the storage, care and disposal of asthma medication.

11. *Sarah Jackson* will be responsible for ensuring that there has been written consent from parents for the administration of the emergency inhaler and spacer. The emergency inhaler/spacer will only be available for students who have been diagnosed with asthma and have been prescribed reliever inhaler AND for whom parental consent has been given. This information shall be recorded in the student's IHCP plan.

12. *Tara East, Ciara Handsford and Gemma Grylls* will be responsible for the monitoring the administration of medication and for maintaining the asthma register.

13. *Sarah Jackson* will be responsible for ensuring parents are informed in writing when the emergency inhaler/spacer has been used.

14. **Students with anaphylaxis**

15. *St Joseph's* has decided to hold an emergency adrenaline auto-injector for the treatment of an anaphylaxis attack for pupils who have been diagnosed with anaphylaxis and prescribed an auto-injector.

16. *Tammy Soby* will be responsible for ensuring the following:

    - Instructing all staff on the symptoms of an anaphylaxis attack
    - Instructing all staff on the existence of this policy
    - Instructing all staff on how to check the pupil medical register
    - Instructing all staff on how to access the auto-injector
    - Making all staff aware of which staff have agreed, and have been trained, to administer the auto-injectors (the 'designated staff') and how to access their help

17. *Tammy Soby* will be responsible for ensuring that designated staff:

    - Recognise the signs of an anaphylaxis attack and when emergency action is necessary
    - Know how to administer the auto-injectors
    - Make appropriate records of attacks

18. *Sarah Jackson and Tara East* will be responsible for the storage, care and disposal of the adrenaline auto-injector.

19. *Sarah Jackson* will be responsible for ensuring that there has been written consent from parents for the administration of the emergency auto-injector. The emergency auto-injector will only be available for students who have been diagnosed with anaphylaxis and have been prescribed an auto-injector AND for whom parental consent has been given. This information shall be recorded in the student's IHCP plan.

20. *Sarah Jackson* will be responsible for the monitoring the administration of medication and for maintaining the pupil medical register.

21. *Sarah Jacksom* will be responsible for ensuring parents are informed when the auto-injector has been used.

THE ADMINISTRATION OF MEDICINE

22. The Headteacher will accept responsibility in principle for members of school staff giving or supervising a student taking prescribed medication during the day, where those members of staff have volunteered to do so.

23. Any parent/carer requesting the administration of medication will be given a copy of this policy.

24.

- **Prescribed medication** will be accepted and administered in the establishment. DfE guidance is that prescribed medicines should only be accepted if they are in date and provided in the container as originally dispensed by the pharmacist. The label on the container supplied by the pharmacist should not be altered under any circumstances. Containers should be clearly marked with the student's name, date of dispensing and the name of medication and include the prescriber's instructions for administration, dosage, and storage. The exception to this is insulin which still must be in date but will be supplied in a pump rather than its original container. All instances of prescribed medication being administered to pupils will be notified to parents/carers via a notification slip sent home with the pupil. This will be in addition to the school's records of administered medicines being accurately completed and maintained.(See Appendix 1)
- **Non-prescribed medication** will only be accepted if they are in date and provided in the original manufacturer's container and administered in the following circumstances in the event that parents/carers are unable to attend school to administer the non-prescribed medicine to their child: There are some circumstances were no parents and school have arranged for non-prescribed medicines to be administered. *e.g. when a young person has regular headaches, menstrual pain, attending residentials, travelling, toothache, at head of school's discretion, under the Minor Ailments Scheme run by the NHS.* Parents/carers will always be contacted before non-prescribed medication is administered so that the school can check whether any medication has been administered at home, and to inform parents/carers that the school will be administering the non-prescribed medication. All non-prescribed medication will be administered in accordance with the dosage instructions on the

manufacturer's packaging. All instances of non-prescribed medication being administered to pupils will be notified to parents/carers via a notification slip sent home with the pupil. This will in addition to the school's records of administered medicines being accurately completed and maintained.**(See Appendix 1)**

25. Prior written parental consent is required before any medication can be administered. **(See Appendix 1)**

26. Only reasonable quantities of medication will be accepted **(no more than one week's supply).**

27. Each item of medication should be delivered in its original dispensed container and handed directly to the Head of School or *Sarah Jackson* authorised by the Headteacher.

28. Each item of medication should be clearly labelled with the following information:

- Student's name
- Name of medication
- Dosage
- Frequency of dosage
- Date of dispensing
- Storage requirements (if important)
- Expiry date (if available)

29. The school will not accept items of medication which are in unlabelled containers or not in their original container.

30. Unless otherwise indicated, all medication to be administered in the school will be kept in the fridge or cupboard in the school office. The office is not accessible to pupils.

31. Staff administering medicines will record and sign each time a medicine is administered. Written records of all medication administered to every pupil will be held by the school in a secure location and may be made available to parents on request. **(See Appendix 1)**

32. If a pupil refuses their medication, staff will record this, report to parents as soon as possible and follow the protocol laid down in the IHCP.

33. Where it is appropriate to do so, students will be encouraged to administer their own medication - if necessary, under staff supervision. Parents/carers will be asked to confirm in writing if they wish their student to carry their emergency medication with them. .

34. It is the responsibility of parents/carers to notify the school if there is a change in medication, a change in dosage requirements, or the discontinuation of a student's need for medication.

35. Staff who volunteer to assist in the administration of invasive medication will receive appropriate training/guidance through arrangements made with the school's Nurse Service. In pre-school settings arrangements will be made through Primary Care Health Visitors.

36. The school will make every effort to continue the administration of medication to a student whilst on activities away from the premises.

37. Information on a pupil's medical needs may be shared as required, and in accordance with our Privacy Notice, for the purposes of safeguarding children and young people.

Local School Health Service and Other Contact Details

Follaton House, Plymouth Road, Totnes, TQ9 5NE

0333 234 1901

southernphnhub@devon.gov.uk

Further Guidance

38. It is acknowledged that at times a school's individual context may require a significant divergence from this policy in order to accommodate a specific local need. In this instance schools are directed to contact Plymouth CAST Chief Operating Officer, Rose Colpus-Fricker for support and advice.

Plymouth CAST
Feb 2026

Appendix 1

Mandatory Associated Documents for All CAST Schools on

The following documents are held within the 'Document Library' managed by Devon Health & Safety Service and must be used by all CAST schools:

- Health & Safety Arrangements Guidance: **'HSA32 - Medication Arrangements'**
- Form for use for each pupil with administered medication: **'Parental Agreement for admin of medicine'**
- Form for use for each pupil with administered medication **'Record of Administered Medicine'**

Additional to the mandatory OSHENS documentation, all schools must ensure that a notification slip is sent home in the event of any instance of medication being administered to a pupil (prescribed or non-prescribed) which must record the following information:

Notification of Medication Administered			
School Name:			
Pupil Name:			
Year Group:		**Class Name:**	
Medication Name:		**Dosage Administered:**	
Staff Name:		**Staff Signature**	
Privacy Notice **The information you provide on this form will be used to record medicine which has been administered to pupils and will be shared with Plymouth CAST employees and parents/carers for the purposes of safely administering medication.** **Further information about how we handle personal information and your rights is available on our website.**			

Appendix 2

Support for Employees

A2.1 Zurich Municipal, our Insurance Company through DAS, provides a FREE confidential counselling service available 24 hours a day to ALL CAST employees, volunteers and their families. The number is 0117 934 2121. All employees should quote that they are an employee of Plymouth

CAST to be able to access this service.

A2.2 The Education Support Partnership Charity provides a FREE Confidential Telephone Support and Counselling Service available 24 hours a day to all teachers and staff in primary and secondary schools. The number is 08000 562 561.
https://www.educationsupportpartnership.org.uk/helping-you/telephone-support-counselling.

Appendix 3

Link to Schools Allergy Code

https://theallergyteam.com/schools-allergy-code/