St. Mark's Catholic School

SUPPORTING STUDENTS AT SCHOOL WITH MEDICAL CONDITIONS POLICY

Effective Date:	Review Date:	Prepared by:	Designated SLT:	Governor's Committee:
Sept 2026	Sept 2027	MKI	MKI/AWA	Pastoral

Contents

1. Statement of Policy & Regulatory Framework 3

2. Objective 3

3. Individual Healthcare Plans 4

i) Requirements & Responsibilities 4

ii) Safeguarding & Data Sharing (UK GDPR Compliance) 4

iii) Integration with SEND & Reintegration 4

4) Safeguarding Links & Young Carers (KCSIE 2026 Compliance) 5

i) Early Help & Safeguarding Escalations 5

ii) Support for Young Carers 5

5) Roles and Responsibilities 5

i) Governing Body 5

ii) Headteacher & SLT 5

iii) Staff Training & Vetting 6

6) Administration and Storage of Medication 6

i) General Principles 6

ii) Self-Management & Emergency Medicines 6

iii) Short-Term & Non-Prescription Medication (e.g., Paracetamol) 6

7) Educational Trips, Off-Site Activities, and PE 7

8) Day-to-Day Medical Room & Log Management 7

9) Policy Review 7

Appendix 1 – Medicines held in school sheet and Individual Health care plan (see next page) 8

Our Mission:

St Mark's is a Catholic community inspired by Gospel values where relationships are rooted in love. At the heart of our mission is a commitment to live out our faith and a dedication to embrace excellence in all that we do. We believe in education that instils possibilities, transforms lives and enables all to fulfil their potential.

1. Statement of Policy & Regulatory Framework

St Mark's Catholic School ensures all staff understand their duty of care to children and young people in the event of an emergency or ongoing health need. We recognize that managing medical conditions effectively is essential to safeguard pupils, protect their emotional and physical well-being, and enable full access to education. Regular training and advice is offered to staff, particularly when individual pupils present with a specific medical condition, which requires a precise response, including the administration of medicines/minor treatment.

We understand that certain medical conditions are serious and can be potentially life-threatening, particularly if ill-managed or misunderstood. We undertake risk assessments where necessary to ensure pupils can access a range of activities appropriately and safely. The medical conditions policy is reviewed, evaluated and updated, and training needs are assessed at this point, or as necessary.

As an inclusive community, St Mark's Catholic School aims to support and welcome pupils with medical conditions. As such, we aim to provide all pupils with medical conditions the same opportunities as other students at the school.

The "Supporting Pupils at School with Medical Conditions", is written to demonstrate compliance with statutory guidance and legal frameworks:

- DfE Guidance: *Supporting Pupils at School with Medical Conditions*
- DfE Guidance: *Keeping Children Safe in Education (KCSIE) 2026*
- Section 100 of the *Children and Families Act 2014*
- *Special Educational Needs and Disability (SEND) Code of Practice: 0 to 25 years*
- *The Special Educational Needs and Disability Regulations 2014*
- *UK GDPR* and *Data Protection Act 2018*

2. Objective

- **Inclusion & Accessibility:** Welcome and support pupils with medical conditions, ensuring equal access to a broad curriculum, physical education, social activities, and extra-curricular trips.

- **Safe Administration & Storage:** Maintain robust procedures for storing and administering prescription and non-prescription medicines.
- **Safeguarding Alignment:** Ensure medical care protocols integrate with child protection procedures under KCSIE 2026, identifying health-related safeguarding risks early.
- **Staff Readiness:** Ensure staff receive regular training and clear guidance to handle both routine care and emergency situations with confidence.

3. Individual Healthcare Plans

i) Requirements & Responsibilities

- IHCPs are established for pupils with complex, chronic, or fluctuating medical conditions, or where emergency intervention may be needed.
- IHCPs are co-produced with parents/carers, the pupil (where appropriate), school welfare staff, and relevant health professionals (e.g., specialist nurses, GPs). IHCPs remain the responsibility of the parent to update/amend when/if medical need changes.
- Plans are reviewed annually by parents/carers or earlier if medical needs, medication, or treatments change.

ii) Safeguarding & Data Sharing (UK GDPR Compliance)

- IHCPs capture key emergency triggers, medication requirements, daily care needs, and emergency contacts.
- Plans are securely accessible to teaching and support staff while preserving confidentiality.
- In accordance with KCSIE 2026 and UK GDPR, data protection laws will never be used as a barrier to sharing critical medical or safeguarding information with health professionals, emergency services, or the Designated Safeguarding Lead (DSL) when a child's safety is at risk.

iii) Integration with SEND & Reintegration

- Where a pupil has an Education, Health and Care Plan (EHCP), the IHCP will be integrated into or linked directly with the EHCP.
- For pupils returning to school after long-term absence, hospital care, or alternative provision, the school works with the local authority, medical providers, and family to construct a smooth reintegration plan.

4) Safeguarding Links & Young Carers (KCSIE 2026 Compliance)

Under KCSIE 2026, proper management of medical conditions is explicitly recognized as a safeguarding priority.

i) Early Help & Safeguarding Escalations

- **Unexplained/Frequent Absences or Medical Room Visits:** Frequent or pattern-based visits to the medical room, chronic physical complaints, or unexplained deterioration in health are monitored via Medical Tracker and reported to the DSL. These may indicate underlying abuse, neglect, emotional distress, or unmanaged physical needs.
- **Non-Compliance & Unmanaged Conditions:** If a parent/carer fails or refuses to provide essential medication (e.g., in-date EpiPens/inhalers) or engage with IHCP planning, this will be evaluated as a potential neglect concern and escalated to the DSL.

ii) Support for Young Carers

- The school recognizes that pupils with chronic medical conditions or those living with family members with severe illnesses may act as Young Carers.
- Staff identify and monitor Young Carers for academic, emotional, or attendance struggles, offering targeted pastoral care, adjusted homework schedules, and mental health support.

5) Roles and Responsibilities

i) Governing Body

- Ensures arrangements are in place to support pupils with medical conditions in compliance with statutory duties.
- Reviews accident, emergency, and medical management data annually via the Pastoral / Risk Management Committees.

ii) Headteacher & SLT

- Ensure overall implementation of this policy, ensuring all staff are aware of the policy and their role in its execution.
- Guarantee that sufficient staff are trained to implement IHCPs and administer required medications.

- Ensure cover arrangements are in place in case of staff absence.

iii) Staff Training & Vetting

- **Vetting:** All staff and volunteers involved in managing medical care or accompanying pupils on trips undergo Enhanced DBS with Children's Barred List checks, as required for regulated activity under KCSIE 2026.
- **KCSIE Training:** All staff complete mandatory Level 2 Safeguarding Training and read Part One of KCSIE 2026 in full.
- **Medical Training:** Designated staff receive specialized training for complex conditions (e.g., diabetes management, epilepsy response, AAI administration). Training registers are kept in the Medical Office in the Welfare Day Book.

6) Administration and Storage of Medication

i) General Principles

- Medication is only administered at school when it would be detrimental to a child's health or attendance not to do so.
- No pupil is given prescription or non-prescription medicine without written parental consent.
- All medication must be provided in its original container as dispensed by a pharmacist, including instructions for administration, dosage, and expiry dates (except for insulin, which may be in an auto-inserter pen or pump).

ii) Self-Management & Emergency Medicines

- Secondary pupils (Years 7–13) are encouraged to take responsibility for managing their own medication where appropriate.
- **EpiPens/AAIs & Inhalers:** Pupils who are assessed as competent must carry their emergency inhalers and Adrenaline Auto-Injectors (AAIs) at all times.
- **Spare Emergency Devices:** Spare EpiPens/AAIs and emergency salbutamol inhalers are stored in an **unlocked cupboard in the Medical Office** to ensure immediate, unimpeded access during emergencies.
- **Controlled Drugs:** Controlled drugs (as defined by the Misuse of Drugs Act 1971) are kept in a locked cabinet in the Medical Room and administered by designated staff.

iii) Short-Term & Non-Prescription Medication (e.g., Paracetamol)

- **Short-Term Medication:** Requires a completed written consent form/letter from parents detailing dosage and timings.
- **Paracetamol:** Administered only if written consent has been provided (e.g., Year 7 / Sixth Form entry agreement). Before administering paracetamol, welfare staff check when the pupil last took medication to avoid accidental overdose.

7) Educational Trips, Off-Site Activities, and PE

- **Inclusion:** Pupils with medical conditions are supported to participate in all day trips, residential visits, and sporting activities unless medical advice states otherwise.
- **Risk Assessments:** Trip leaders complete risk assessments in coordination with the Welfare Administrator/SBM, ensuring routine and emergency medications, IHCP copies, and emergency contacts are taken on the trip.
- **Physical Education:** PE staff and sports coaches are informed of pupils' medical conditions and IHCPs. Pupils are never forced to participate if feeling unwell, and emergency medication (inhalers, AAIs) must be present at the sports field or activity location.

8) Day-to-Day Medical Room & Log Management

- **Facility Maintenance:** The Medical Room is maintained to statutory standards (running water, couch, clinical waste disposal, sharps bin, telephone).
- **Logging:** All medication administered, medical room visits, and injuries are logged immediately in Medical Tracker / MIS.
- **RIDDOR:** Serious workplace or school injuries are evaluated by SBM to determine if a report must be submitted under RIDDOR regulations.

9) Policy Review

This policy is evaluated and updated annually by the Designated SLT (MKI) with formal sign-off by the Pastoral & Safeguarding Governors Committee.

Appendix 1 – Medicines held in school sheet and Individual Health care plan (see next page)

MEDICINES HELD IN SCHOOL

(PLEASE ONLY COMPLETE THIS SIDE IF MEDICATION NEEDS TO BE HELD IN SCHOOL)

Request for school to administer medication/Child to self administer medication

The school will not **give or supervise** your child's medicine unless you complete and sign this form, and the Deputy Headteacher has agreed that named school staff can **administer/supervise** the medication.

DETAILS OF PUPIL

Surname: _____

Forename(s) _____

Date of Birth _____

Condition or illness: _____

MEDICATION

Name/Type of Medication (as described on the container):_____

For how long will your child take this medication: _____

Date dispensed: _____ Expiry date:_____

Full Directions for use:
Dosage and method: _____

Timing: _____ Special Precautions:_____

Side Effects: _____

Procedures to take in an Emergency: _____

Self Administration: **YES / NO**

I understand that I must deliver the medicine personally to Matron in the **original package** provided by the pharmacist and accept that this is a service which the school is not obliged to undertake.

Date: _____ Signature:_____

Relationship to pupil: _____

PERMISSION FOR STAFF TO: ADMINISTER MEDICATION / SELF ADMINISTER MEDICATION GIVEN BY:

DEPUTY HEADTEACHER: _____

DATE: _____

OFFICE USE ONLY:

HEALTH CARE PLAN

Healthcare Plan for a Pupil with Medical Needs

DETAILS OF PUPIL

Surname: _____

Forename(s): _____

Date of Birth: _____

Condition or illness:_____

Name/Type of Medication (as described on the container):_____

Describe condition and give details of pupils' individual symptoms and needs during an emergency:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

If your child's medical needs or medication change could you please contact **Matron Immediately.**

Date: _____ Signature:_____

Relationship to pupil: _____