



Supporting Students with Medical Conditions Policy

Staff reviewer:	Scrutinised by Link Governor:	Date signed off at Committee:	Date approved at Board:	Next review date:
Yasmin Trevelyan	Lewis Day	10.02.26	N/A	February 2028

Purpose

Exeter Mathematics School is committed to supporting students with medical conditions. This policy is in place to ensure that:

- Students with medical conditions are properly supported and have full access to EMS education, including off-site activities where possible.
- Arrangements are in place to support students with medical conditions.
- Staff consult with medical professionals, students and parents/carers to ensure that the needs of the students with medical conditions are properly understood and met.

This policy has been developed with regard to the Department for Education's statutory guidance "Supporting pupils with medical conditions at school (2015)".

Definitions

EHCP Education Health Care Plan (replacing the statement of educational needs)

SEND Special Educational Needs and Disabilities

IHCP Individual Healthcare Plan

ILP Individual Learning Plan

Policy

Students with medical conditions should be supported effectively to ensure that they are able to make academic progress and feel safe in school.

Notification of Need

To ensure that students' needs are properly understood, those with a medical condition are asked to disclose this upon application to the school. Staff will then consult with the students, their parents/carers and medical professionals as appropriate to determine the level and type of support necessary for them to thrive.

It is the responsibility of the student and/or their parent/carer to notify the school of any medical conditions prior to enrolment; consultation will take place before the start of the school year and EMS will endeavour to ensure the appropriate support is put in place. This may include contact with the student's previous school, thus enabling an effective transition to EMS.

It remains the responsibility of the student and/or their parent/carer to inform the school of any changes to their health or support needs.

EMS expects advance consultation from the Statutory Team (0-25 Team) regarding statutory Education, Health and Care Plans (EHCPs), to ensure that specified health outcomes can be accommodated prior to joining EMS.

Transition following change of need,

EMS will work proactively with students, parents/carers and other relevant healthcare professionals to ensure that appropriate arrangements are in place when a student joins EMS or returns to EMS following an extended absence and/or a change of medical need.

Individual Healthcare Plans (IHCP)

If an Individual Healthcare Plan is already in place, EMS will endeavour to meet the expectations set out within the plan, however, there may be instances in which EMS cannot meet the needs of the individual. In such instances a meeting will be arranged to ensure the student and parent/carers have an understanding of the scope of support that EMS can provide.

If an IHCP is not in place and it is deemed that a student's condition is sufficiently complex or long-term, an IHCP will be written and implemented. If an IHCP is deemed necessary, healthcare professionals will be consulted regarding the content and implementation.

Each individual IHCP will contain clear information for staff, making responsibilities clear, including what should be done in an emergency. This will be shared with appropriate school staff to ensure that the student's needs are effectively met. IHCPs will be reviewed at least annually and more frequently if it is judged to be necessary.

For students who do not require an IHCP, a clear register of need and responsibilities for support will be kept and will be reviewed and updated annually by the SENCO.

It is important to recognise that different students with the same medical condition may have very different support needs. The use of IHCPs must be determined for each individual. The views of healthcare professionals, parents/carers and students must not be ignored when determining the level and type of support that is needed in school.

Information on the Individual Healthcare Plans can include:

- The medical condition, its triggers, signs, symptoms and treatments.
- Name of the member of staff acting as the key contact.
- The level of support needed, such as daily care requirements and arrangements for trips.
- Any identified staff training requirements.
- What to do in an emergency, including whom to contact, and contingency arrangements.

Students with SEND

If a student has additional SEND needs, these will be considered alongside medical needs to ensure that a robust plan is in place to meet all identified needs. The student's ILP will refer to the IHCP and vice versa.

Staff Training and Development

All members of staff who are involved in the support of students with a medical condition will be informed of students' needs and their own responsibilities. EMS will endeavour to ensure that staff will receive adequate training and support to enable them to fulfil their duties when the need arises.

Training needs of staff will be identified when IHCPs are written, through consultation with healthcare professionals. A matrix of needs and staff experience / prior training will be used to pinpoint competencies in need of development.

Whole school training may be necessary to raise awareness of a particular student's needs. When this is the case, this may be conducted by healthcare professionals or individuals from other agencies as recommended by healthcare professionals. The student and their parent/carers may also provide information and advice but should not be relied upon to measure staff competencies.

Appropriate information will be provided to any supply/temporary staff to ensure that they are aware of students with medical conditions and the procedures to follow in an emergency, in line with confidentiality requirements.

EMS will use its best endeavours to provide, or arrange the provision of, the appropriate training to support the needs of each particular and individual student with medical needs. We currently do not administer medicines to students, however if a student's medical needs required this, we would investigate staff training prior to the student starting at the school or returning, if they are a current student. This is, however, subject to the availability of training, and adequate notice of the need to provide specific training.

Management of Medicines

In most cases, students should not be self-administering regular medicines at school. Students should have medicines in school ONLY when it would be detrimental to either their health or attendance not to do so.

If a student is required to take medication they must carry their own supply, which should not exceed daily dosage and should be kept safely on their person. All medication should be in-date, labelled, provided in their original container and include instructions for administration, dosage and storage.

Prescribed Medication

At EMS we promote independence and expect students to self-administer prescription medication and be responsible for their medicine's safe storage, where it is safe to do so.

If a student is required to administer prescribed medication at school, the medication must have a valid prescription label attached instructing dosage and use, and be stored securely in the original pharmaceutical container, in small quantities. In exceptional cases, if a student is unable to carry their own medication, then medicines will be kept in the school first aid room, which is accessible during the school day. Prescribed medication will be locked in a cupboard within this room and a key for this cupboard is held at reception.

If students need medication to be kept in a fridge, this will be stored in the administration office.

No student should be prevented from accessing their medication easily, as and when necessary, and when safe to do so.

If directed by medical professionals and in exceptional circumstances, boarding staff may be required to safely store prescribed medication and will hand a dosage of this to the student, when necessary. Staff will not be administering this medication. This will only be done with written direction by medical professional and parents/carers consent.

When medicines are no longer required, they will be returned to the student (or parent if the student is under 16 years of age) for safe disposal.

Currently, EMS does not administer any medications. The only exception would be if directed from a medical professional (including a 999 operator) to administer an Epinephrine auto-injector, such as an EpiPen as a life-saving emergency procedure whilst awaiting emergency medical care. In this rare case, a record will be kept, stating the drug was administered, along with details of how, when and by whom it was administered. Any short-term side effects should also be noted. The person administering the medication must complete all details on a medical administration form which must then be kept securely by the school. The form should be completed as soon as possible following the administering the medication.

Off-Site Activities

Students with medical conditions should not be prevented from taking part in off-site activities. The school will explore reasonable adjustments to activities to enable a student with medical needs to take part where this is possible.

Members of staff who organise off-site activities must consider the student's needs and associated risks within their risk assessment to ensure that the student is safe. This may require consultation with the student's parents/carers, GP, or other health workers.

Students Taken Ill and Emergencies

It is important to support students to stay in school as much as possible. If a student is taken ill during the school day or in accommodation they should be cared for in line with the advice and guidance contained in their IHCP and, whenever possible, supported to return to lessons/stay rather than being sent home immediately.

If a student needs to return home due to a significant illness or to access medical intervention, we will seek to contact a parent/carer to request collection or gain permission for the student to travel independently (for those under 18 years old). In exceptional circumstances, if we are unable to arrange collection by a parent/carer and not requiring an ambulance, EMS may arrange for the student to be transported to A&E or NHS "walk-in centre" by arranging transport such as via a taxi.

For students with serious conditions, the IHCP should outline the process to be followed in an emergency. This should be readily available to all staff and must be followed.

If emergency medical assistance is required, EMS will contact the emergency services, with care transferred to the attending paramedics and parents/carers informed as soon as possible.

Under no circumstances should a student, who needs emergency medical support, be sent unaccompanied to the first aid room. A responsible adult must always be available to support the student and monitor their condition.

Wellbeing

We recognise that students with medical conditions may require additional support. The school will consider the broader support needs of a student when implementing an IHCP and will ensure the student is aware of the range of support available to meet their needs.

Responsibility for Implementation

Governors: The governing body has a statutory responsibility to ensure that appropriate arrangements are in place to support students with medical conditions and that this policy is implemented effectively. A link governor will be assigned to review the policy biennially and to audit its implementation.

Assistant Headteacher – Pastoral

The Assistant Headteacher - Pastoral will ensure that an effective policy is developed and implemented in consultation with partners (Exeter College, Health Professionals etc.). The Assistant Headteacher - Pastoral must also ensure that all staff (including relevant staff from Exeter College) are aware of the policy and have received sufficient training to be able to implement it effectively. The Assistant Headteacher - Pastoral has overall responsibility for the development of IHCPs.

All Staff Any member of school staff may provide support to students with medical conditions. All members of staff should know what to do and should respond appropriately when they become aware that a student with a medical condition requires help. All members of staff should take part in training to ensure that they are competent to take on the responsibility of supporting a student with medical needs.

Students Students with medical conditions should provide accurate information about their condition and take a leading role in the discussions regarding their support. Whenever possible, students should take a lead in managing their own medical needs. All students should be sensitive to one another's needs and should be supportive.

Parents/carers

Parents/carers may be required to provide sufficient and up-to-date knowledge regarding medical conditions, particularly when a student is unable to do so. Parents/carers are key partners in the formulation and implementation of IHCPs.

Parents/carers will be required to collect a student where their health deteriorates to an extent that their need for supervision or support exceeds the capacity of staff.

Healthcare EMS will strongly support and encourage GPs, nurses and other healthcare professionals who are involved with a student's needs, to take an active role.

Confidentiality

All parties involved in medical procedures must maintain appropriate confidentiality, in line with safeguarding guidance, both within and outside the school.

Complaints process

If parents/carers are dissatisfied with the support provided, concerns should be raised in the first instance with the Assistant Headteacher – Pastoral. Complaints will be managed in accordance with the School's Complaints Policy.

Associated Documents

- SEND Policy
- SEND Information Report
- SEND Accessibility Plan

Equality Analysis

The following equality analysis section should be completed by the policy holder as part of every policy review and carries the same date as the main policy. EAs are particularly helpful in revealing any unintended, indirect discrimination.

Under the Equality Act (2010) we have a duty to;

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.

We need to consider each protected characteristic individually and in combination. The interaction of different layers of characteristics is called intersectionality. This recognises that the barriers for each group are not homogenous, and instead are a combination of layers of identity interacting. For further detail or to support the completion of the following, please see our equality and diversity policy.

1. Evidence considered <i>What data or other information have you used to evaluate if this proposal is likely to have a positive or an adverse impact upon protected groups when implemented? Where were information gaps, and what steps can you take to remedy these gaps? Can the RM intelligence Dashboard (student counts) provide any insight into which protected characteristics are likely to be affected by the changes?</i>					
2. Consultation. <i>How have you consulted staff and student communities and representatives including those from protected groups? What were their views? Who else has been consulted in this proposal?</i>					
3. Promoting equality. <i>Does this policy have a positive impact on equality? What evidence is there to support this? Could it do more?</i>					
4. Identifying the impact of policies Identify any issues in the document which could have an adverse impact on any people who are protected by the Equality Act 2010. The protected characteristics are: <ol style="list-style-type: none"> 1. Age 2. Disability 3. Gender reassignment 4. Marriage and civil partnership 5. Pregnancy and maternity 6. Race 7. Religion or beliefs 8. Sex 9. Sexual orientation 					
Issue Assessed	Protected Group	Impact and Evidence	Justification	Proposed Action/Timeline	Person responsible

E.g. policy section or practice.		What are the possible impacts on people from the protected groups above, and explain how you have made that assessment. Are these impacts positive or negative?	Can the issue be justified for academic or business reasons? Please explain.	If this has a negative impact, what will you do to reduce, minimise or eliminate negative impact? If this has a positive impact, how will you promote, develop or utilise this opportunity?	for action(s)
All	Disability (medical)	No current students are supported by this policy			
5. Monitoring How will you monitor the actual impact that your proposal has had following its implementation? When will you do this?					
6. Summary Summarise the outcome of this Equality Assessment and state any actions you will be taking as a result.					

Appendix 1
Individual Healthcare Plan (IHCP)

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

Family Contact Information

Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

Clinic/Hospital Contact

Name	
Phone no.	

G.P.

Name	
Phone no.	

Who is responsible for providing support in school	
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Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to