Thorntree Academy

Managing Children with Medical Conditions Policy

Autumn 2 2025

Reviewed December 2025
Date of next review December 2026

Definition

Children's medical needs may be broadly summarised as falling into two categories:

1. Short-term, affecting their participation in school activities for which they are on a course of medication.

2. Long-term, potentially limiting their access to education and requiring extra care and support.

Ethos

Schools and academies have a responsibility for the health and safety of children in their care. The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of children with special medical needs, the responsibility of the employer is to make sure that safety measures cover the needs of all children at the academy. This may mean making special arrangements for particular children so that they can access their full and equal entitlement to all aspects of the curriculum. In this case, individual procedures may be required. Thorntree Academy is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support that children with medical conditions (long or short term) may need.

The Children and Families Act 2014 places a duty on schools to make arrangements for children with medical conditions. Children with medical conditions have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone. However, teachers and other school staff in charge of children have a common law duty to act 'in loco parentis' and must ensure the safety of all children in their care. To this end, we reserve the right to refuse admittance to a child with an infectious disease, where there may be a risk posed to others or to the health of the child involved. This duty also extends to teachers leading activities taking place off the school site.

The prime responsibility for a child's health lies with the parent / carer, who is responsible for the child's medication and must supply the school with all relevant information needed in order for proficient care to be given to the child. (*Refer to Appendix 1* – Health Care Plan Information) The school takes advice and guidance from a range of sources, including the School Nurse, Health professionals and the child's GP in addition to the information provided by parents/carers in the first instance. This enables us to ensure we assess and manage risk and minimise disruption to the learning of the child and others who may be affected (for example, class mates).

Our Aims

- To support children with medical conditions, so that they have full access to education, including physical education and educational visits
- To ensure that school staff involved in the care of children with medical needs are fully informed and adequately trained by a professional in order to administer support or prescribed medication
- To comply fully with the Equality Act 2010 for children who may have disabilities or special educational needs.
- To write, in association with healthcare professionals, Individual Healthcare Plans where necessary
- To respond sensitively, discreetly and quickly to situations where a child with a medical condition requires support
- To keep, monitor and review appropriate records

Unacceptable Practice

While staff within the academy will use their professional discretion in supporting individual children it is unacceptable to:

- Prevent children from accessing their medication
- Assume every child with the same condition requires the same treatment
- Ignore the views of the child or their parents / carers; ignore medical advice
- Prevent children with medical conditions accessing the full curriculum, unless specified in their Individual Healthcare Plan
- Penalise children for their attendance record where this is related to a medical condition
- Prevent children from eating, drinking or taking toilet breaks where this is part of effective management of their condition
- Require parents to administer medicine where this interrupts their working day
- Require parents to accompany their child with a medical condition on a school trip as a condition of that child taking part

Entitlement

Thorntree Academy provides full access to the curriculum for every child wherever possible. We believe that children with medical needs have equal entitlement and must receive necessary care and support so that they can take advantage of this. However, we also recognise that employees have rights in relation to supporting children with medical needs, as follows:

Employees may:

- Choose whether or not they wish to be involved
- Receive appropriate training
- Work to clear guidelines
- Bring to the attention of senior leaders any concern or matter relating to the support of children with medical conditions

Expectations

It is expected that:

- Parents/carers will inform the academy of any medical condition which affects their child.
- Parents/carers will supply the academy with appropriately prescribed medication, where the dosage information and regime are clearly printed by a pharmacy on the container
- Parents/carers will ensure that medicines to be given are in date and clearly labelled
- Parents/carers will co-operate in training their children to self-administer medicine if this is appropriate, and that staff members will only be involved if this is not possible
- Medical professionals involved in the care of children with medical needs will fully inform staff beforehand of the child's condition, its management and implications for the school life of that individual
- Thorntree Academy will ensure that, where appropriate, children are involved in discussing the management and administration of their medicines and are able to access and administer their medicine if this is part of their Individual Healthcare Plan (for example, an inhaler)
- Academy staff will liaise as necessary with Healthcare professionals and services in order to access the most up-to-date advice about a child's medical needs and will seek support and training in the interests of the child
- Transitional arrangements between schools/academies will be completed in such a way that Thorntree Academy will ensure full disclosure of relevant medical information, Individual Healthcare Plans and support needed will be received in good time for the child's receiving school to adequately prepare for the child arriving at their new school

- Individual Healthcare Plans will be written, monitored and reviewed regularly and will include the views and wishes of the child and parent in addition to the advice of relevant medical professionals

Procedure

Extol Trust ensures that an appropriate level of insurance is in place and reflects the level of risk presented by children with medical conditions.

Information

Children with serious medical conditions will have their photo and a brief description of their condition, along with any other necessary information, displayed in both the classroom, staffrooms and food preparation areas.

Children with medical conditions which may require emergency attention, e.g. epilepsy, diabetes, will have their names and an Individual Healthcare Plan clearly accessible in their classroom, and all adults dealing with the child will have their attention drawn to this information. All other medical conditions will be noted from children's SIMs records. This information will be provided to class teachers annually, with updates as necessary.

In an emergency

In a medical emergency, teachers have been appropriately trained to administer emergency first aid if necessary. See details at the end of the Policy.
If an ambulance needs to be called, staff will:

- Outline the full condition and how it occurred.
- Give details regarding the child's date of birth, address, parents' names and any known medical conditions.
- Children will be accompanied to hospital by a member of staff if this is deemed appropriate.
- Staff cars should not be used for this purpose.
- Parents/carers must always be called in a medical emergency, but do not need to be present for a child to be taken to hospital.

The school has a detailed Emergency Evacuation Policy and set procedures which are adhered to at all times. All children, staff and visitors are made aware of these procedures and, where necessary detailed Personal Emergency Evacuation Plans (PEEPS) are in place. These are updated on an annual basis by school staff. (*Refer to Appendix 2*)

Administration of medicines

Only essential medicines will be administered during the school day. These will be only those prescribed by a doctor. Parents/carers must submit a written permission slip before any medicine is administered. Medicines to be given during the school day must be in their original container. Controlled drugs can also be administered, subject to all other conditions as described in the Policy.

Essential medicines will be administered on Educational Visits, subject to the conditions above. A risk assessment may be needed before the visit takes place. Staff supervising the visit will be responsible for safe storage and administration of the medicine during the visit.

Named staff members will give medicines. Before administering any medicine, staff must check that the medicine belongs to the child, must check that the dosage they are giving is correct, and that written permission has been given. Any child refusing to take medicine in school will not be made to do so, and parents/carers will be informed about the dose being missed. All doses administered will be recorded in the Administration of Medicines book (located in the main reception office).

All medicines will be stored safely. Medicines needing refrigeration will be stored in the fridge located in the main reception inner office. Some medicines (inhalers, etc.) will be kept in the child's classroom and carried with the children, for ease of access during outside activities. All medicines must be clearly labelled.

Controlled drugs or prescribed medicines will be kept in the locked cupboard in the main reception office. Access to these medicines is restricted to the named persons.

Epi-pens are kept in appropriate classrooms and the main school office.

Staff will record any doses of medicines given in the Medicine book. Children self-administrating asthma inhalers do not need to be recorded.

Inhalers are kept in the child's classroom. Children have access to these inhalers at all times, though must inform a member of staff that they are taking a dose. All inhalers are marked with the child's name. All children with an inhaler must take them on educational visits, however short in duration. In line with 1 October 2014 guidance, Thorntree Academy will have a salbutamol inhaler without a prescription for use in emergencies when a child with asthma cannot access their own inhaler.

Epi-pen – Any member of staff can administer an Epi-pen in an emergency.
Further details can be found on Individual Healthcare Plans widely displayed throughout school.
(*Refer to Appendix 3*)

Complaints

Should parents/carers be unhappy with any aspect of their child's care at Thorntree Academy, they must discuss their concerns with the school. This will be with the child's class teacher in the first instance, with whom any issues should be managed. If this does not resolve the problem or allay concern, the problem should be brought to a member of the senior leadership team, who will, where necessary, bring concerns to the attention of the Headteacher. In the unlikely event of this not resolving the issue, the parents must make a formal complaint using Thorntree Academy Complaints Procedure which is detailed on the school website.

Trained Staff

First Aid at Work trained staff:

Mrs Mandy Fryett (KS1)
Mr Ross Johnston (KS2)
Mrs Jo Nottingham (KS2)

Early Years Foundation Stage (EYFS) Staff Training

In accordance with current statutory requirements and best practice guidance, all EYFS staff at Thorntree Academy are required to hold a Level 3 Paediatric First Aid qualification. This ensures that staff working with our youngest children are fully equipped to respond promptly and effectively to any medical emergency, including those involving infants and toddlers. Training is maintained and refreshed in line with legislative updates to guarantee compliance and the highest standards of care.

Paediatric First Aid:

Mrs Debbie Saaiman
Miss Taba Rasul

Mrs Emma McDonagh
Miss Lucy Siddaway
Mr Mike foster
Mrs Kathryn Perry
Mr Lincoln French

Administering medicines:

All Teaching Assistants have been trained for administering medicines. In addition to this, Mrs Rachael Cuthbert (Administration team), Mr Grant Harman (Seconded Teacher) & Mr Paul Watson (Headteacher) have all been trained.

Appendix 1 Health Care Plan Information

THORNTREE ACADEMY

MEDICAL DETAILS

Name of Child…….

Address……

……Post Code: ……..……

Home/Mobile Number…….

Emergency Contact numbers

Office Use Only	
Class:	
Teacher's Name:	
Teacher's Signature	
Date	

1……..

2……

3…….

Name, address and telephone number of child's doctor…….....

Condition	Yes (Please ✓)	No (Please ✓)	Notes:
Is your child asthmatic?			Please give details: e.g. use of inhaler
Does your Child have any allergy?			Allergic to : Nuts / Dairy / Penicillin / Plasters Other:
Is your child diabetic?			

Does your child suffer from any other medical conditions?			Please state the condition:
Does your child take regular medication?			Name of the medication: Reason for use :

Medical Conditions

Signed…….. (Parent /Guardian)

Date…….NB This form must be signed every year. If there is any change in medication or condition the school must be notified immediately.

Appendix 2

Personal Emergency Evacuation Plan (PEEP)
(For use by staff caring for children or adults with disabilities.)

Name:	
Disability:	
Location:	
Evacuation Procedure:	
Specialist equipment needed:	

Person to assist evacuation:	

Example

Disability	Sight is limited and therefore in the event of an emergency may be disorientated.
Evacuation Procedure	My named personal carer will lead me by the hand to the nearest safe fire exit and escort me to the Fire Assembly Point.
Specialist equipment	Not applicable

Appendix 3

Child's Name – Individual Healthcare Plan

Photograph of Child

Medical conditions:

For example: Egg Allergy & Asthma

Allergic Reaction:

Red pinprick rash, very red skin, projectile vomiting, coughing, wheezy breathing, and very lethargic / sleepy, blood shot eyes.

Medication and Dosage:

For Prevention: - Cetirizine **2.5mls**

For Allergy: - EpiPen 0.15

For Asthma: - Inhaler

Emergency Contacts: -

Treatment (in case of Allergic reaction) UPDATE for

Call for help of staff trained to administer EpiPen

Stay calm, reassure the child. If possible lay child flat with feet slightly raised. If difficulty breathing, find a more comfortable position e.g. elevate head. If child is unconscious place in recovery position.

Administer EpiPen into upper outer thigh. Count to 10 slowly before removing from leg.

2nd Person if available:

CALL 999 and request an ambulance. State "Child having anaphylactic reaction, adrenaline administrated at ….

If no 2nd person available, CALL 999 and request an ambulance. State “Child having anaphylactic reaction, adrenaline administrated at ….

Phone Parents

If struggling to breath – give inhaler – 5 puffs every 2 minutes (until ambulance arrives)

Allocate one person to wait outside to direct ambulance crew to child

If no signs of improvement and/or signs of deterioration occur within 5 minutes, administer 2nd EpiPen.

Stay with child until ambulance arrives and then phone parents

Parents Signature ……...Headteacher’s Signature ……Date: ……