NORTHAMPTON SCHOOL FOR GIRLS

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Supporting Students with Medical Conditions Policy

Author:	ABY and KBT
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Version	Date	Updates
V1	**July 2026**	New policy.

Associated Policies	• Accessibility plan • Complaints • Equality information and objectives • First aid • Health and safety • Safeguarding • Special educational needs information report and policy

1	Policy Statement of Aims
1.1	At Northampton School for Girls, we understand that medical conditions requiring support at school can affect quality of life and may be life-threatening.
1.2	Our school will support students with medical conditions so that they have full access to education, including school trips and physical education.
1.3	This policy aims to: • Make sure that students, staff and parents/carers understand how our school will support students with medical conditions. • Set out the roles and responsibilities for everyone in the school community in regard to students 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. **The person named with responsibility for implementing this policy is Karen Bright, Health and Safety Manager. The school Medical Officer is Abigail Boddy.**
2.	**Legislation and Statutory Responsibilities**
2.1	This policy meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty on governing boards to make arrangements for supporting students at their school with medical conditions.
2.2	It is also based on the statutory guidance on supporting pupils with medical conditions at school from the Department for Education (DfE).
2.3	This policy also complies with our funding agreement and articles of association.
3.	**Roles and Responsibilities**
3.1	**The Governing Board** The governing board has ultimate responsibility for making arrangements to support students with medical conditions. The governing board will: • Review this policy in a timely manner, in line with the relevant legislation and requirements • Make sure that the policy sets out the procedures to be followed whenever the school is notified that a student has a medical condition • Monitor practice, and staff training, in regard to students with medical conditions, in line with this policy
3.2	**The Health and Safety Manager 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 any 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 students 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 students' medical needs. • Approve risk assessments for school visits and school activities outside the normal school timetable that involve provision for students with medical conditions. • Contact the school nursing service in the case of any student 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.
3.3	**Staff** Supporting students 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 students 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 of supporting students 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 students with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a student 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, using the Microsoft Form – Individual Medical Conditions Details. • Provide medical documentation surrounding their child's medical condition, diagnosis, etc. • Provide evidence of appropriate prescription and written permission for medicines to be administered by staff. • Be involved in the development and review of their child's IHP and may be involved in its drafting. • 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	**Students** Students with medical conditions will often be best placed to provide information about how their condition affects them. Students 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	**Medical and healthcare professionals** Nurses from the community nursing team at Northampton General Hospital will notify the school when a student has been identified as having a medical condition that will require support in school. This will be before the student starts school, wherever possible. They may also support staff implementing a child's IHP. Healthcare professionals, such as GPs and pediatricians, will liaise with designated staff and notify them of any students identified as having a medical condition. They may also provide advice on developing IHPs.
4.	**Equal Opportunities**

4.1	The school will adhere to the legal responsibilities under the Equality Act 2010 and will not unlawfully discriminate against any students. Our school is clear about the need to actively support students with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. The school will consider what reasonable adjustments need to be made to enable these students 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 students with medical conditions are included. In doing so, students, their parents/carers and any relevant healthcare professionals will be consulted.
5.	**Being Notified that a child has a Medical Condition**
5.1	When the school is notified that a student has a medical condition, the process outlined in Appendix 1 will be followed to decide whether the student 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 students who are new to our school.
5.2	Northampton School for Girls will: • For new starters in September, send a Microsoft Form – Individual Medical Conditions Details to all parent/carers of students after their place at the school has been confirmed, but before their first school year starts, to confirm their child's medical condition and any medicine(s) their child needs. • Where a student has a new diagnosis and/or a student has moved to the school mid-term, we will send a form and put arrangements in place within 2 weeks. • Send a reminder to parents/carers at the start of each academic year, as well as the Microsoft Form – Individual Medical Conditions Details to complete if their child has a medical condition or requires certain medicine(s). We ask that parents/carers proactively inform us by email to carmstrong@nsg.northants.sch.uk if their child's medical needs change during the school year.
6.	**Individual Healthcare Plans (IHPs)**
6.1	Plans will be reviewed at least annually, or earlier if there is evidence that the student's needs have changed.
6.2	IHPs are produced automatically from the information shared by parents/carers using the Microsoft Form – Individual Medical Conditions Details. The member of staff reviewing the IHP will liaise with parents/carers, the students and healthcare professionals to ensure the IHP has all the information required. Plans will be developed with the students' best interests in mind and will set out: • What needs to be done. • When. • By whom.
6.3	Not all students with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents/carers when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the headteacher will make the final decision. Plans will be drawn up in partnership with the school, parents/carers and relevant healthcare professionals, such as the school nurse, specialist or pediatrician, who can best advise on the student's specific needs. The student will be involved wherever appropriate.

6.4	IHPs will be linked to, or become part of, any education, health and care plan (EHCP). If a student has special educational needs (SEN) but does not have an EHCP, the SEN will be mentioned in the IHP.
6.5	The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed and we will consider the following when deciding what information to record on IHPs: • The medical condition, its triggers, signs, symptoms and treatments. • The students' 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 student'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 student 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 student'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 student's condition and the support required. • Arrangements for written permission from parents/carers and the headteacher for medication to be administered by a member of staff, or self-administered by the student, 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 student can participate, e.g. risk assessments. • Where confidentiality issues are raised by the parent/carer or student, the designated individuals to be entrusted with information about the student's condition. • What to do in an emergency, including who to contact and contingency arrangements.
6.6	Students with life threatening conditions will have a more thorough IHP completed in the form of a Personal Medical 1 Risk Assessment (PM1RA). Conditions may include (but not limited to): • Allergy 1 students – at risk of anaphylaxis. • Students with diabetes. • Students with heart conditions. • Students with epilepsy/seizures.
7.	**Personal Medical 1 Risk Assessments (PM1RA)**
7.1	The school recognises its duty to safeguard and support students with medical conditions and, where appropriate, will implement a Personal Medical 1 Risk Assessment (PM1RA), which is an advanced version of the IHP. A PM1RA is produced for students with life-threatening or high-risk medical conditions, including but not limited to: • Anaphylaxis. • Epilepsy. • Diabetes. • Cardiac conditions. Asthma will not ordinarily require a PM1RA unless a medical professional has advised that the student's condition is particularly severe or presents a significant risk.
7.2	The PM1RA is a comprehensive document designed to ensure that all relevant staff are informed of the student's medical needs, associated risks, and the actions required to support the student safely whilst in school or participating in school activities.

7.3	The PM1RA also provides detailed information regarding the student's medical condition, including known triggers, current symptoms, and additional symptoms that may potentially arise, even if they have not previously been experienced by the student. This enables staff to recognise any changes or deterioration in the student's condition promptly and respond appropriately.
7.4	Each PM1RA includes an Emergency Action Plan (EAP), presented in a clear and accessible format, detailing the actions to be taken in the event of a medical emergency.
7.5	The PM1RA will include: • Details of the student's diagnosed medical condition. • Any additional medical conditions. • Known triggers, warning signs, and symptoms. • Emergency procedures and medication requirements. • Guidance for staff responding to an incident. • Contact information for parents/carers, the student's GP, consultants, and any other relevant healthcare professionals. • Arrangements for educational visits, physical activity, and other school-based activities where appropriate. • The main risk assessment, which is appended to the end of the PM1RA document.
8.	**Other Personal Risk Assessments**
8.1	In addition to Personal Medical 1 Risk Assessments (PM1RA), the school may implement other individual risk assessments to support students with a wide range of personal needs where additional measures are required to ensure their safety, wellbeing, and access to education.
8.2	Where a student is experiencing medical symptoms or health concerns that are currently under investigation by healthcare professionals, the school may implement an Awaiting Diagnosis Personal Risk Assessment (ADPRA). The purpose of the ADPRA is to ensure that appropriate support and reasonable adjustments can be put in place whilst a formal diagnosis is pending.
8.3	The ADPRA enables the school to identify and manage any known symptoms, presentation patterns, or associated risks that may impact the student during the school day or whilst participating in school activities. This may include identifying appropriate support strategies, emergency procedures where necessary, adjustments to activities, and guidance for staff in responding to the student's individual needs.
8.4	The school recognises that, in some cases, students may require support prior to receiving a confirmed medical diagnosis. The use of an ADPRA ensures that a precautionary and supportive approach is adopted in order to safeguard the student and minimise potential risks during the assessment and investigation process.
8.5	Additional personal risk assessments may also be implemented where necessary to support students with other identified needs, including pain management, emotional wellbeing or mental health concerns, where these present a significant impact on the student's safety, learning, or ability to access school life safely. All personal risk assessments are developed in consultation with the student, parents/carers, and, where appropriate, relevant healthcare or external professionals. Risk assessments will be reviewed regularly and updated whenever there is a change in the student's needs, condition, or circumstances.
9.	**Managing Medicines**
9.1	Prescription and non-prescription medicines will only be administered at school:

	• When it would be detrimental to the student's health or school attendance not to do so, **and** • Where we have parents/carers' written consent 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 student without the knowledge of the parents/carers.** Students under 16 will not be given medicine containing aspirin unless prescribed by a doctor. Anyone giving a student any medication (for example, for pain relief) will first check recommended and maximum dosages for the student'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. Students 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 pens will always be readily available to students and not locked away. Medicines will be returned to parents/carers to arrange for safe disposal when no longer required.
9.2	**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. A student who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another student to use. All other controlled drugs are kept in a secure cupboard in the school office 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.
9.3	**Students managing their own needs** Students who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents/carers, and it will be reflected in their IHPs. Students will be allowed to carry their own medicines and relevant devices wherever possible. IHPs will include procedures for staff to follow if a student refuses to carry out a necessary procedure or take medicine.
9.4	**Unacceptable practice** Although school staff will use their discretion and judge each case on its merits with reference to the student's IHP, they will keep in mind that it is not generally acceptable practice to: • Prevent students from easily accessing their inhalers and medication and administering their medication when and where necessary. • Assume that every student with the same condition requires the same treatment.

	• Ignore the views of the student or their parents/carers. • Ignore medical evidence or opinion. • 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 student to the school office or medical room unaccompanied or with someone unsuitable (e.g. a fellow student who is not old or responsible enough). • Penalise students for their attendance record if their absences are related to their medical condition, e.g. hospital appointments. • Prevent students 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 student, including with toileting issues. No parent/carer should have to give up working because the school is failing to support their child's medical needs. • Prevent students from participating or create unnecessary barriers to students participating in any aspect of school life, including school trips, e.g. by requiring parents/carers to accompany their child. • Administer, or ask students to administer, medicine in school toilets.
10.	**Emergency Procedures**
10.1	Staff will follow the school's normal emergency procedures (for example, calling 999). All students' IHPs will clearly set out what constitutes an emergency and will explain what to do. If a student needs to be taken to hospital, staff will stay with the student until the parent/carer arrives or accompany the student to hospital by ambulance.
11.	**Training**
11.1	Staff who are responsible for supporting students 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 students 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 [the headteacher/role of individual]. 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 students • 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.
12.	**Record Keeping**
12.1	The governing board will ensure that written records are kept of all medicine administered to students for as long as these students 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.
12.2	We will: • Enter each student's medicine need in the school's system • Update our records when parents/carers of students 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 students' 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)
13.	**Liability and Indemnity**
13.1	The governing board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk. The details of the school's insurance policy are: Explain your school's approach here. Enter the details of your school's insurance arrangements, which cover staff providing support to students with medical conditions. Insurance policies should provide liability cover relating to the administration of medication, but individual cover may need to be arranged for any healthcare procedures. For academies, including free schools, insert/delete if not applicable: We will ensure that we are a member of the DfE's risk protection arrangement (RPA).
14.	**Complaints**
14.1	Complaints should be raised in accordance with the Schools Complaints Policy.
15.	**Policy Review and Monitoring Arrangements**
15.1	This policy will be monitored by the Health and Safety Manager and Medical Officer. This policy will be monitored as part of the Academy's annual internal review and reviewed on a three year cycle or as required by legislature changes.

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Appendix A

Parental Agreement for Northampton School for Girls to administer Medicine

Northampton School for Girls will not give your child medicine unless you complete and sign this form.

Date for review to be initiated by NSG:	
Name of child:	
Date of birth:	
Tutor Group:	
Medical Condition / illness:	

Medicine

Name/type of medicine (as described on container):	
Expiry Date:	
Dosage and method of administration:	
Timing:	
Special precautions / other instructions:	
Any side effects that NSG to be aware of?	
Self-administered – yes/no	
Procedures to take in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy

Parent / Carer Details

Full name:	
Relationship to child:	
Emergency contact number:	
I understand that I must deliver the medicine personally to the school, signed:	
Date signed	

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Appendix B

Record of Medicine Administered to Student - copy of electronic form

Date	Child's Name	Time	Name of Medicine	Dose Given	Any Reactions	Signature of Staff	Print Staff Name

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Appendix C

Staff Training Record – Administration of Medicines - copy of electronic form

Staff Name	Type of Training Received	Date Training Completed	Training Provided By	Profession/Title of Trainer	Certificate Received