



Supporting Students with Medical Conditions and Administration of Medicine Policy

Date: January 2026

Due for review: Autumn term 2028

Contents

1. Introduction	2
2. Roles and Responsibilities.....	2
3. Individual Healthcare Plans (IHCPs)	3
4. Students with Asthma.....	3
5. Students with Anaphylaxis.....	4
6. Administration of Medication.....	4
7. Monitoring and Review.....	6

1. Introduction

Blackdown Education Partnership is committed to ensuring that students with medical conditions receive appropriate care, support and full access to education, including PE, school trips and residential visits.

The Headteacher is responsible for ensuring that staff are trained, confident and supported before taking responsibility for students with medical needs.

The Trust's insurance policy covers liability relating to the administration of medication.

The school recognises its duties under the Equality Act 2010 and will make reasonable adjustments to ensure students with medical conditions are not disadvantaged.

This policy is written in accordance with the Department for Education statutory guidance *Supporting pupils at school with medical conditions* (2015).

At Tiverton High School we will ensure the following procedures are in place:

- Processes for responding when a student with a medical condition joins the school, including transition between settings, reintegration following absence, and changes in need.
- Processes for students who join mid-term or receive a new diagnosis.
- Arrangements for:
 - Home-to-school transport
 - School asthma inhalers and spacers
 - School adrenaline auto-injectors

2. Roles and Responsibilities

- The Headteacher has overall responsibility for implementing this policy and is responsible for maintaining the medical needs register. It must be kept up to date at all times.

- Designated staff will receive appropriate training before supporting students with medical needs.
- Parents/carers must provide accurate and up-to-date medical information and notify the school of any changes.
- Students will be encouraged to take responsibility for managing their own medical needs where appropriate.

3. Individual Healthcare Plans (IHCPs)

Where required, an Individual Healthcare Plan will be developed in collaboration with Tiverton High School, parents/carers, students (where appropriate) and healthcare professionals.

IHCPs will include:

Medical information	Condition, symptoms, triggers, medication, dosage, emergency requirements, equipment needed, environmental considerations.
Support needs	Including education, social and emotional considerations (e.g. managing absences, exam arrangements, rest periods).
Roles and responsibilities	Who provides support, their training needs and confirmation of competence from a healthcare professional.
Cover arrangements	Staff awareness, including supply staff.
Parental consent	For medication administration.
Arrangements for school trips	Activities and risk assessments.
Information sharing	Who should be entrusted with relevant medical information.
Student refusing medication	Procedures if the student refuses medication or if treatment is needed.

The Headteacher will make the final decision on whether an IHCP is required.

4. Students with Asthma

The school will hold an emergency inhaler and spacer where this is permitted and available.

First Aid Team members will ensure that all staff:

- Know the symptoms of an asthma attack.
- Are aware of this policy.
- Know how to check the asthma register.
- Know how to access the emergency inhaler.
- Know which staff members are designated to support students.

Designated staff must:

- Recognise the signs of an asthma attack and know when emergency action is required.

- Know how to use an inhaler and spacer.
- Record all asthma attacks promptly and accurately.

At least two staff will be responsible for the storage, care and disposal of asthma medication.

First Aid Team Members will ensure:

- Written parental consent is obtained for the emergency inhaler.
- Only students diagnosed with asthma, prescribed a reliever inhaler, and with parental consent may use the emergency inhaler.
- Parents are informed in writing when the emergency inhaler has been used.

5. Students with Anaphylaxis

The school will hold an emergency adrenaline auto-injector (AAI) where permitted and available, for students diagnosed with anaphylaxis who have their own prescribed AAI and parental consent.

First Aid Team Members will ensure that all staff:

- Recognise the symptoms of anaphylaxis.
- Know this policy.
- Know how to check the medical register.
- Know how to access the emergency AAI.
- Know who the designated trained staff are.

Designated staff must:

- Recognise the signs of anaphylaxis and take emergency action.
- Know how to administer AAI's.
- Record all incidents.

At least two staff will manage storage, care and disposal of emergency AAI's.

First Aid Team Members will ensure:

- Written parental consent is obtained.
- Students may only use the emergency AAI if diagnosed with anaphylaxis AND prescribed an AAI AND parental consent is in place.
- Parents are informed when an AAI has been used.

6. Administration of Medication

The Headteacher accepts responsibility for staff administering or supervising students taking prescribed medication during the school day.

Parents will be informed of the following requirements:

Medication the school can accept

- **Prescribed medication** (accepted and administered).
- **Non-prescription medication** only when:
 - used for regular minor ailments (e.g. headaches, mild eczema, menstrual pain), or
 - required for residential visits or school trips.

Parental consent: written consent is required for all medication.

Medication requirements

Medication must be:

- Provided in reasonable quantities (maximum one week's supply).
- In the original, labelled container, including:
 - Student's name
 - Name of medication
 - Dosage and frequency
 - Date of dispensing
 - Storage requirements
 - Expiry date

The school will **not** accept medication in unlabelled or non-original containers.

Medication will be stored in **First Aid** unless stated otherwise in the IHCP.

Record-keeping

Staff must record and sign each instance of medication administration.

Records will be stored securely and shared with parents on request.

Refusal of medication

If a student refuses medication:

- This will be recorded.
- Parents will be contacted promptly.
- The IHCP protocol will be followed.

Self-management

Where appropriate, students may self-administer their medication under supervision. Parents must provide written confirmation if their child will carry their own medication.

Students will not carry:

- Age-restricted non-prescription medication (e.g. paracetamol),
- Prescribed controlled drugs such as methylphenidate (unless specified in the IHCP).

Changes in medication: Parents/carers must notify the school of any changes in medication or dosage, or when medication is no longer required.

Training: Staff administering invasive medication will receive training from school nursing services or health visitors (in pre-school settings).

Off-site activities: The school will make all reasonable efforts to continue medication routines during trips and activities outside school.

7. Monitoring and Review

The Blackdown Education Partnership is committed to ensuring that the support provided to students with medical conditions remains safe, effective and consistent.

To achieve this:

7.1 Monitoring Practice

- The Headteacher will ensure that medication administration records, IHCPs and incident reports (such as asthma attacks or anaphylaxis responses) are reviewed at least annually, or sooner if there is a significant incident or need for change, for accuracy, completeness and emerging patterns requiring action.
- Designated staff will monitor the storage, expiry dates and condition of all medication kept on site, including emergency inhalers and adrenaline auto-injectors.
- Staff competence and training needs will be reviewed at appropriate intervals to ensure safe practice continues (e.g., emergency medication training, invasive medication training).

7.2 Policy Review

- This policy will be formally reviewed by the Blackdown Education Partnership Board of Trustees at least every **two years**, or sooner if national guidance changes or significant incidents indicate earlier review is necessary.
- Updates or amendments will be communicated promptly to all staff and incorporated into school-specific procedures.

7.3 Auditing and Compliance

- Each school will carry out annual audits of:

- medication storage and stock
 - consent forms
 - record-keeping systems
 - compliance with IHCP requirements
- Any areas for improvement will be addressed through training, procedural changes, or updates to the school's internal documentation.

7.4 Continuous Improvement

- Lessons learned from any medical incidents will be used to strengthen training, practice and policies.