



Medical Needs Policy

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Status & Review Cycle: Statutory (Annual Review by Full Governing Board)

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1. Definition of Medical Need

Medical needs are defined as conditions requiring support to ensure safe access to education. These fall broadly into two categories:

- **Short-term:** Temporary conditions requiring medication or limited support
- **Long-term:** Ongoing conditions which may impact attendance, learning or participation

For the purposes of this policy:

- **Medication** refers to both prescribed and over-the-counter medicines
- **Prescription medication** is issued by an authorised healthcare professional
- **Staff member** refers to any employee of Tytherington School

2. Statement of Intent

Tytherington School is committed to ensuring that students with medical conditions are fully supported to access education and achieve their potential.

We aim to:

- Enable all students to participate fully in school life
- Provide appropriate care for physical and mental health conditions
- Ensure early identification and support for medical needs

This policy aligns with:

- *DfE Supporting Pupils with Medical Conditions*
- Equality Act 2010
- *Keeping Children Safe in Education*
- *Working Together to Safeguard Children (2023)*

Tytherington School is committed to ensuring that students with medical conditions are fully supported to access education, participate in school life and achieve positive outcomes.

We aim to:

- Enable all students to participate safely and confidently
- Provide appropriate care for physical and mental health needs
- Ensure early identification and coordinated support

Medical needs include mental health conditions, including anxiety and Emotionally Based School Avoidance (EBSA), which are supported through a graduated and inclusive approach

3. Roles and Responsibilities

The school adopts a clear structure of accountability:

- Governing Body: Strategic oversight, policy approval, monitoring impact
- Headteacher: Overall implementation and compliance
- SENDCo / Medical Lead: Coordination of provision, IHCPs and training
- Staff: Day-to-day implementation and pupil supervision
- Parents/Carers: Providing accurate medical information and updates
- Students: Developing independence where appropriate

4. Monitoring, Review and Evaluation

The policy is reviewed:

- Annually by the Governing Board
- Following serious medical incidents or near misses

Evaluation includes:

- Incident data
- Provision impact
- Feedback from parents and students

This ensures continuous improvement and accountability.

5. Procedure Following Notification of a Medical Condition

When the school is informed of a medical need, the following steps are taken:

- Gathering relevant medical information and documentation
- Undertaking an initial risk assessment
- Determining whether an IHCP is required
- Communicating key information to relevant staff

Support is implemented promptly and proportionately.

6. Staff Training

The school ensures all staff are appropriately trained and confident.

- Annual whole-school training in medical awareness and emergency response
- Targeted training for specific medical needs
- Delivered with health professionals where appropriate
- Staff only administer medication if trained and competent

The SENDCo maintains a training record and always ensures coverage, including visits.

7. Role of the Student

Where appropriate and in line with their age, understanding and medical advice, students will be supported to:

- Develop independence in managing their medical needs
- Carry and administer their own medication safely

If a student refuses medication or treatment:

- Parents/carers will be informed promptly
- Alternative arrangements will be considered in partnership with relevant parties

8. Individual Healthcare Plans (IHCPs)

IHCPs are implemented where needs cannot be met through universal provision.

They are:

- Developed collaboratively with families and professionals
- Accessible to staff while maintaining confidentiality
- Reviewed at least annually

IHCPs include:

- Medical needs, triggers and symptoms
- Medication and dosage
- Emergency procedures
- Staff roles
- Reasonable adjustments
- Mental health considerations

9. Supporting Students with Medical Needs

The school adopts a graduated, inclusive approach to supporting students with medical needs.

The school will:

- Ensure continuity of education during periods of absence
- Maintain regular communication with students and families
- Provide appropriate work where students are well enough
- Refer to medical education provision where absence exceeds 15 days (where appropriate)
- Work closely with the Local Authority and external providers
- Implement planned reintegration, including phased returns

The school recognises EBSA and will respond with a flexible, supportive and multi-agency approach focused on re-engagement.

10. Medicines

Where possible, medicines should be taken outside of school hours.

Where medication is required in school:

- Written parental consent must be obtained
- Medicines must:
 - Be in original packaging
 - Be clearly labelled
 - Be in date

The school will:

- Store medicines securely and appropriately
- Maintain accurate records of administration
- Ensure students have timely access to essential medication

Aspirin will not be administered to students under 16 unless prescribed by a doctor.

11. Record Keeping and Monitoring

Robust systems are in place for:

- Medication logs
- IHCP documentation and reviews
- Incident and accident records
- Near-miss tracking

Records are:

- Accurate, up-to-date and securely stored
- Used to inform evaluation and improvement

Incident Reporting and Review

All medical incidents are:

- Recorded promptly
- Reviewed for effectiveness of response
- Used to identify improvements

Near misses are also tracked to improve safety.

Serious incidents are reported to senior leaders and governors where appropriate.

12. Emergencies

Clear procedures are in place for responding to medical emergencies.

These include:

- Defined staff roles and responsibilities
- Established communication procedures
- Immediate access to emergency services

IHCPs will clearly specify:

- What constitutes an emergency
- Required actions and responses

A member of staff will always remain with the student until appropriate support arrives.

All incidents will be recorded and reviewed.

13. Avoiding Unacceptable Practice

The school is committed to ensuring that students with medical needs are treated fairly, safely and with dignity.

The school will not:

- Assume all medical conditions have the same impact
- Ignore medical advice or parental concerns
- Exclude students from activities unnecessarily
- Penalise absence related to medical conditions

- Require parents to attend school to administer care

Failure to make reasonable adjustments may constitute discrimination under the Equality Act (2010).

14. Insurance / Risk Protection

The school is committed to ensuring that students with medical needs are fully included in educational visits wherever possible.

This includes:

- Individual risk assessments
- Appropriate staffing and training
- Clear planning for medication storage and administration

Essential medication (e.g. inhalers, AAI) must be accessible at all times.

15. Educational Visits

The school will ensure:

- Full inclusion wherever possible
- Individual risk assessments
- Trained staff accompany visits

Medication will:

- Be stored and administered safely
- Be recorded appropriately

Students must carry essential medication (e.g. inhalers).

16. Information Sharing

Medical information is shared on a need-to-know basis, in line with GDPR and safeguarding requirements.

In the event of an emergency:

- Accurate information will be shared with emergency services
- Parents/carers will be contacted promptly
- Appropriate transport arrangements will be made

17. Adrenaline Auto-Injectors (EpiPens)

- Trained staff may administer AAls in line with guidance
- Emergency services will be contacted immediately
- Parents/carers will be informed without delay

The school may hold **spare AAls** in accordance with current legislation.

Allergy Management and Safety

Include:

- Identification of allergens
- Avoidance strategies
- Staff training
- Spare AAls available
- Emergency response

18. Complaints

The school is committed to resolving concerns promptly and fairly. Parents/carers are encouraged to raise any concerns at the earliest opportunity using the following staged approach:

1. Initial Contact – SENDCo
Concerns regarding medical needs provision should, in the first instance, be discussed with the Special Educational Needs and Disabilities Coordinator (SENDCo), who will seek to address and resolve the issue promptly.
2. Escalation – Headteacher
If the matter remains unresolved, it should be referred to the Headteacher for further investigation and response.
3. Formal Complaints Procedure
Where concerns are not satisfactorily resolved, parents/carers may make a formal complaint in line with the school's published Complaints Procedure.

The school will ensure that all complaints are handled sensitively, in a timely manner, and in accordance with statutory guidance.

19. First Aid Provision

The school ensures that appropriate first aid provision is always available, including:

- Enough trained first aid staff
- Coverage during the school day, visits and extracurricular activities
- Clear communication of first aid personnel across the school

20. Mental Health

The school recognises that mental health is a key aspect of medical need.

We are committed to:

- Early identification of mental health concerns
- Providing appropriate adjustments and support
- Working with external services (e.g. CAMHS)
- Ensuring alignment with SEND, safeguarding and pastoral systems

Support is delivered through a coordinated, graduated and person-centred approach, ensuring that students feel safe, supported and able to access learning.

21. Attendance and Reintegration

- **Statutory Duty**
The school recognises its duty under Section 19 of the Education Act 1996 to ensure that children of compulsory school age who are unable to attend school due to health needs receive suitable full-time education (or as much education as their health condition allows). Provision will be arranged promptly and reviewed regularly to ensure continuity of learning.
- **Maintaining Engagement During Absence**
The school will take reasonable steps to maintain a pupil's connection to learning and the school community during periods of medical absence. This may include the provision of remote learning, liaison with medical professionals, and coordination with alternative provision where appropriate.
- **Reintegration Planning**
A structured reintegration plan will be developed for all pupils returning from a period of medical absence. This will be personalised, proportionate, and informed by medical advice. Plans may include a phased return, reasonable adjustments, and ongoing pastoral or academic support to ensure a successful transition back into school.
- **Multi-Agency Collaboration**
Reintegration will be supported through effective communication between the school, family, healthcare professionals, and any external agencies involved. The pupil's voice will be central to planning.
- **Avoiding Long-Term Absence**
The school is committed to preventing unnecessary long-term absence by acting early, maintaining regular contact with families, and adapting provision where needed. Barriers to attendance linked to health needs will be identified and addressed through reasonable adjustments and flexible approaches.
- **Monitoring and Review**
Attendance, engagement, and progress will be closely monitored during and after medical absence. Reintegration plans will be reviewed regularly and adjusted in response to the pupil's changing needs.

