BROMLEY TRUST ACADEMY

Supporting pupils with medical conditions policy

Responsible post holder	Headteacher
Approved by	Academy Council
Reviewed	September 2026
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This policy applies to all Bromley Trust Academy sites and to education provided off site as part of the academy's arrangements.

1. Purpose and principles

Bromley Trust Academy is committed to ensuring that pupils with medical conditions receive the support they need to access education, participate fully in academy life and achieve well. Arrangements will focus on the individual pupil, promote dignity and independence, and avoid unnecessary barriers to attendance, learning, trips, enrichment and social participation.

No pupil will be denied admission or prevented from attending solely because arrangements for a medical condition have not yet been completed. Where there is an immediate health or safeguarding risk, the academy will make a proportionate, time-limited decision based on available clinical advice and will work promptly with the family and relevant professionals to put safe arrangements in place.

2. Legal framework and related guidance

This policy has regard to the following legislation and guidance:

- Children and Families Act 2014, section 100
- Equality Act 2010
- Children Act 1989 and Children Act 2004
- Education Act 1996, including local authority duties for pupils unable to attend school because of health needs
- Special educational needs and disability code of practice: 0 to 25 years
- DfE statutory guidance, Supporting pupils at school with medical conditions, December 2015
- DfE guidance on mental health and behaviour in schools
- DfE guidance on school attendance, safeguarding and education for children with health needs who cannot attend school
- Department of Health guidance on emergency inhalers and emergency adrenaline auto-injectors in schools.

The Department for Education published draft revised guidance on medical conditions and allergy in March 2026. Until final guidance is issued, the December 2015 statutory guidance remains the principal statutory guidance. The strengthened approaches to allergy safety, incident learning and assurance in the draft guidance have informed this policy where they support safe practice.

3. Related academy and Trust policies

- Safeguarding and Child Protection Policy
- SEND Policy and SEND Information Report
- Attendance Policy
- Accessibility Plan
- Complaints Policy
- Data Protection Policy
- Health and Safety Policy
- Off-site Activities and Visits Policy and Procedures
- First Aid arrangements
- Food Allergy and Allergen Management arrangements
- Supporting pupils who cannot attend school because of health needs.

4. Definitions

A medical condition may be short term, recurring, fluctuating, long term or life threatening. It may affect physical health, mental health, attendance, communication, behaviour, concentration, stamina, mobility, continence, eating, drinking or access to learning. Some pupils have more than one condition.

A medical condition may amount to a disability under the Equality Act 2010. Where this is the case, the academy will make reasonable adjustments and will ensure that this policy aligns with the pupil's EHC plan, accessibility arrangements and any individual healthcare plan.

5. Governance and accountability

The Trust Board retains legal responsibility for ensuring that arrangements are in place to support pupils with medical conditions. The Academy Council provides local oversight and assurance. The Headteacher is responsible for effective implementation at Bromley Trust Academy.

- Arrangements are reviewed at least annually and following a serious incident, significant near miss or relevant change in guidance.
- The Headteacher will identify a senior leader to coordinate medical conditions and allergy safety across the academy.
- Each site will maintain a current list of trained first aiders and staff authorised and trained to administer medicines or carry out specific procedures.
- The Academy Council will receive assurance about policy implementation, training, individual plans, incidents, near misses and required actions, without receiving unnecessary personal information.
- Risks relating to medical conditions and allergy will be included within normal academy risk management and governance processes.

6. Roles and responsibilities

6.1 Headteacher

- Ensure this policy is implemented consistently across all sites and off-site provision.
- Ensure sufficient trained staff and cover arrangements are available at all relevant times.
- Make the final decision where agreement cannot be reached about whether an individual healthcare plan is required.
- Ensure that admissions, attendance and behaviour decisions do not discriminate against pupils because of a medical condition or disability.

6.2 Head of School or Head of Site

- Coordinate local arrangements, including emergency access, medicine storage, staff awareness and cover.
- Ensure supply, agency, visiting and relevant off-site staff receive the information needed to keep a pupil safe.
- Ensure medical needs are considered in risk assessments for trips, work experience, physical activity and other off-site activity.
- Monitor implementation and escalate concerns, incidents or gaps in provision to the Headteacher.

6.3 SENDCo

- Coordinate the development and review of individual healthcare plans in partnership with the pupil, parents or carers and relevant healthcare professionals.
- Ensure medical support is aligned with SEND provision and any EHC plan.
- Ensure relevant staff can access the current plan while maintaining confidentiality.
- Support transition, reintegration and multi-agency planning.

6.4 Staff

- Understand the policy and know how to obtain help in an emergency.
- Follow individual healthcare plans and agreed procedures.

- Undertake required training and do not carry out a specialist procedure without appropriate training and confirmation of competence.
- Report medication errors, omissions, incidents, concerns and near misses promptly.
- Support inclusion and avoid assumptions about what a pupil can or cannot do.

6.5 Pupils

Pupils will be involved in decisions about their support in a way that reflects their age, understanding and wishes. Where appropriate, pupils will be supported to carry and manage their own medicines and devices. Pupils must not share medicines with others.

6.6 Parents and carers

- Provide accurate and current information about the pupil's medical needs.
- Supply medicines and devices in accordance with this policy and notify the academy promptly of changes.
- Participate in the development and review of the individual healthcare plan.
- Ensure that emergency contact details are current.
- Collect expired or discontinued medicines for safe disposal.

6.7 Healthcare professionals and partner agencies

The academy will work with school nursing services, GPs, paediatricians, specialist nurses, local authority services, NHS providers and the relevant integrated care board where appropriate. Healthcare professionals may advise on plans, training, emergency arrangements and confirmation of staff competence.

7. Notification and identification

The academy may be notified before admission, during transition, after a new diagnosis, following a change in need, or when a pupil returns after illness or hospital education. Support will not be delayed solely because a formal diagnosis has not been completed.

- For a planned admission or transition, arrangements should be ready for the pupil's start date wherever sufficient information has been provided.
- For a new diagnosis or change arising during the school year, the academy will aim to put arrangements in place as quickly as possible and normally within two weeks.
- Previous plans and relevant clinical information will be requested where appropriate.
- Where evidence is unclear or differs, the academy will consider the available information, consult the family and relevant professionals, make a proportionate interim arrangement and keep it under review.

8. Individual healthcare plans

An individual healthcare plan (IHP) provides clarity about a pupil's needs, the support required, who will provide it and what must happen in an emergency. An IHP will be considered where a condition is long term, complex, fluctuating, requires medicine or a healthcare procedure, presents a significant risk, affects attendance or access, or requires coordinated support. Not every pupil with a medical condition will need an IHP.

The academy, parent or carer and relevant healthcare professional will agree whether a plan is proportionate. The Headteacher will make the final decision where agreement cannot be reached. Responsibility for ensuring that the plan is completed, implemented and reviewed remains with the academy.

Each IHP should include, as relevant:

- diagnosis or description of need, triggers, signs, symptoms and treatment;
- medicine, dose, method, timing, side effects, storage and access;
- facilities, equipment, food, drink, rest, toilet access, mobility and environmental requirements;
- educational, social, emotional, communication and attendance support;

- reasonable adjustments and arrangements for examinations or assessments;
- the level of support required, including arrangements for self-management;
- named staff, training and cover arrangements;
- emergency signs, action, contacts and contingency arrangements;
- arrangements for trips, transport, work experience and off-site activity;
- information-sharing and confidentiality arrangements;
- review date and circumstances that will trigger an earlier review.

Plans will be reviewed at least annually and sooner when needs change, following a significant incident or near miss, when medicine or emergency advice changes, or when the pupil moves between sites or phases. Current plans will be securely stored and made readily available to staff who need the information to support the pupil safely.

9. Attendance, reintegration and education during absence

Medical absence will be handled supportively and in line with the academy's attendance policy. Pupils will not be penalised where absence is linked to their medical condition. The academy will consider reasonable adjustments, pastoral support, catch-up arrangements and a structured reintegration plan following prolonged absence.

Where a temporary part-time timetable is considered, it will be time limited, regularly reviewed, agreed with the family and used only as part of a plan towards full-time education. Remote education may be considered where appropriate, but will not replace the academy's duty to remove barriers and support a safe return. Where health needs prevent a pupil from receiving suitable education, the academy will work with the local authority and relevant providers.

10. Staff training and support

- All staff will receive induction and periodic awareness training on this policy, emergency response and how to obtain help.
- Staff supporting a named pupil will receive condition-specific training identified through the IHP.
- Training must be provided by an appropriately qualified person. A parent or carer may provide valuable information but will not be the sole trainer for a clinical procedure.
- A first aid qualification does not by itself demonstrate competence to administer a specific medicine or carry out a healthcare procedure.
- Training records, competency confirmation and review dates will be maintained.
- Staff will be told when a plan changes and cover arrangements will be checked following absence, turnover or deployment changes.

11. Managing medicines

Medicines will only be administered during academy time where it would be detrimental to the pupil's health or attendance not to do so. Staff will follow the prescriber's instructions and the pupil's IHP or written parental agreement.

- Prescription medicines will normally be accepted only when in date, labelled, supplied in the original pharmacy container and accompanied by written consent. Insulin may be supplied in a pen, pump or other clinically appropriate device.
- Non-prescription medicine may be administered only under the academy's agreed procedure and with written parental consent. Aspirin or medicine containing aspirin will not be given to a pupil under 16 unless prescribed by a doctor.
- Before administering pain relief, staff will check the maximum dose and when any previous dose was taken. Parents or carers will be informed in line with local arrangements.
- Medicines will be stored safely and according to the manufacturer's instructions. Refrigerated medicine will be stored securely in a suitable refrigerator.

- Routine medicines and controlled drugs will be stored securely. Controlled drugs will be kept in a non-portable locked container with access limited to authorised staff, while remaining accessible in an emergency. A running record of quantities received, administered and returned will be maintained.
- Emergency medicines and devices, including inhalers, blood glucose equipment and adrenaline auto-injectors, must be readily accessible and must not be locked away in a way that delays treatment. Site-specific locations will be communicated to relevant staff.
- A pupil assessed as competent may carry and self-administer their own medicine or device where this is set out in the IHP. Appropriate monitoring and safe arrangements for other pupils will be maintained.
- If a pupil refuses medicine or a procedure, staff will not force them. Staff will follow the IHP, inform parents or carers and seek clinical advice where required.
- Every administration, refusal, omission, error, side effect or return of medicine will be recorded.
- Unused or expired medicines will be returned to parents or carers. Sharps will be disposed of in an approved sharps container.

12. Allergy and anaphylaxis safety

Bromley Trust Academy will maintain allergy-aware arrangements and will not rely solely on blanket claims such as “nut free”. Controls will reflect identified allergens, individual plans, catering arrangements, curriculum activities and the environments used by pupils.

- Known allergies, prescribed devices and emergency plans will be identified through admission and on-roll procedures and kept current.
- Pupils requiring specific arrangements will have an IHP and, where provided, an Allergy Action Plan.
- Staff will receive appropriate allergy awareness and emergency response training. Staff expected to use an adrenaline auto-injector will receive practical training.
- Food provision will be planned with parents or carers, the pupil and catering providers. Allergen information, cross-contamination controls and safe meal arrangements will be maintained.
- Risks will be considered for cooking, science, craft materials, animals, rewards, celebrations, trips, work experience and off-site provision.
- Prescribed adrenaline devices will be accessible with the pupil. Any spare devices held by the academy will be stored, checked and used in accordance with current legal requirements and Department of Health guidance.
- Allergic reactions, use of adrenaline, food-safety concerns and near misses will be recorded and reviewed.

12.1 Suspected anaphylaxis

- Call 999 and state that anaphylaxis is suspected.
- Give adrenaline without delay in accordance with the pupil’s plan, device instructions and staff training. If in doubt, give adrenaline.
- Keep the pupil lying flat with legs raised where possible. If breathing is difficult, allow the pupil to sit only as needed. Do not allow the pupil to stand or walk.
- Give a second dose after five minutes if there is no improvement and a second device is available.
- Stay with the pupil, contact parents or carers and ensure an appropriate adult accompanies the pupil to hospital or remains until the parent or carer arrives.

13. Emergency procedures

- The IHP will define, where relevant, what constitutes an emergency and the action to take.
- Staff will call 999 where emergency treatment is required and will provide the correct site address, entrance and access information.
- Emergency medicine will be administered by trained staff where required.
- The pupil’s plan, medicine information and relevant records will be available to emergency services.

- An appropriate adult will remain with the pupil and accompany the pupil in an ambulance when required.
- Parents or carers will be contacted as soon as practicable.
- The incident will be recorded and reviewed, including whether the IHP, training, risk assessment or policy needs to change.

14. Trips, residential visits, sport and off-site activity

Pupils with medical conditions will be actively supported to participate. A proportionate risk assessment will identify reasonable adjustments, trained staffing, medicine and equipment, transport, emergency arrangements, food requirements, contact details and access to healthcare. Participation will not be restricted unless available clinical evidence shows that inclusion cannot be made safe through reasonable adjustments.

15. Transport

Where local-authority or commissioned transport is used and a pupil has a medical condition requiring emergency support, relevant information will be shared lawfully and securely with those who need it. The minimum necessary information will be provided, with clear emergency instructions and contact arrangements.

16. Incidents, medication errors and near misses

All serious medical incidents, medication errors, missed doses, accidental allergen exposures, emergency device use and significant near misses will be recorded promptly. The Head of School or Head of Site will ensure that parents or carers are informed, immediate safety actions are taken and relevant leaders are notified.

- The review will establish what happened, whether the IHP and procedures were followed, and what action is needed.
- Where appropriate, advice will be sought from healthcare professionals, the local authority, safeguarding leaders, the Trust health and safety team, insurers or regulators.
- Relevant IHPs, risk assessments, training and local procedures will be updated.
- Learning will be shared with staff and reported through governance arrangements without unnecessary personal information.
- Repeated failure to provide essential medicine, equipment or information may be considered under safeguarding procedures.

17. Information sharing, confidentiality and records

Medical information will be handled in accordance with data protection law and Trust policy. Information will be shared on a need-to-know basis where this is necessary to protect the pupil, provide support or meet a legal duty. Records will be stored securely, kept accurate and retained in accordance with the Trust retention schedule.

Relevant information may need to be shared with supply staff, agency staff, transport providers, trip leaders, caterers, off-site providers and emergency services. The academy will share only the information required for the person to carry out their role safely.

18. Liability and indemnity

The Trust will ensure that appropriate insurance arrangements are in place for staff supporting pupils with medical conditions. Staff must follow this policy, the pupil's IHP, training and agreed procedures. Any activity falling outside normal arrangements must be checked with the Headteacher and relevant Trust officers before it takes place.

19. Unacceptable practice

Although each case must be considered individually, it is not acceptable to:

- prevent a pupil from easily accessing inhalers, emergency medicine or other medication when needed;
- assume that pupils with the same condition need the same support;

- ignore the views of the pupil or parent or carer, or disregard clinical evidence without proper consideration;
- send a pupil with a medical condition home frequently or exclude them from normal activities unless this is set out in the IHP or supported by proportionate clinical advice;
- send an unwell pupil to an office or medical room unaccompanied or with an unsuitable person;
- penalise a pupil for attendance affected by their medical condition;
- prevent access to food, drink, toilet breaks, rest, movement or other adjustments needed to manage a condition;
- require parents or carers to attend the academy to provide routine medical support that the academy is responsible for arranging;
- create unnecessary barriers to trips, sport, enrichment or other aspects of academy life, including routinely requiring a parent or carer to accompany the pupil;
- delay emergency treatment while trying to contact a parent or carer.

20. Complaints

Concerns should normally be raised first with the relevant Head of School or Head of Site so that they can be addressed promptly. If the matter is not resolved, it should be referred to the Headteacher. Formal complaints will be considered under the Trust Complaints Policy. A complaint does not prevent the academy from taking immediate action to safeguard a pupil or address an urgent medical risk.

21. Monitoring and review

The Headteacher will ensure that this policy is reviewed annually and sooner following a serious incident, significant near miss, change in statutory guidance or identified weakness in implementation. Local checks will include IHP completion and review, training, medicine records, expiry checks, emergency device access, allergy controls, trips and incident learning.

Annex A: Model process for developing an individual healthcare plan

1	Parent, carer or healthcare professional notifies the academy of a new diagnosis, admission, return after prolonged absence or change in need.
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2	Head of School or Head of Site gathers available information, assesses immediate risk and puts interim arrangements in place where needed.
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3	SENDCo coordinates discussion with the pupil, parent or carer, relevant staff and healthcare professional to decide whether an IHP is required.
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4	The IHP is written in partnership, with clear support, emergency action, training, information-sharing and review arrangements.
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5	Relevant staff receive information and training. Competence is confirmed where a healthcare procedure is required.
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6	The IHP is approved, securely stored, shared with staff who need it and implemented.
↓	
7	The plan is reviewed at least annually and earlier when needs change or following an incident or near miss.
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Template A: Individual healthcare plan

Name of academy/setting	Bromley Trust Academy
Pupil's name	
Group/class/form	
Date of birth	
Address	
Medical diagnosis or condition	
Plan date	
Review date	

Family contact name	
Relationship to pupil	
Telephone number(s)	
Alternative contact	
Clinic/hospital contact	
GP name and telephone	

Lead member of academy staff	
Staff providing support	
Plan developed with	
Staff who need a copy	

Medical needs, symptoms, triggers and signs

Treatment, facilities, equipment, devices and environmental needs

Medicine: name, dose, method, timing, side effects and storage

Daily care requirements

Educational, social, emotional and attendance support

Reasonable adjustments and examination arrangements

Self-management and supervision arrangements

Trips, transport and off-site arrangements

What constitutes an emergency and action to take

Emergency contacts and contingency arrangements

Training required and competency confirmation

Confidentiality and information-sharing arrangements

Review triggers and other information

Template B: Parental agreement for the academy to administer medicine

Name of academy/setting	Bromley Trust Academy
Pupil's name	
Date of birth	
Group/class/form	
Medical condition or illness	
Medicine name/type	
Strength and dose	
Method and timing	
Expiry date	
Special precautions/storage	
Known side effects	
Self-administration	Yes / No / With supervision
Emergency action	
Parent/carer name	
Daytime telephone	
Relationship to pupil	
Medicine delivered to	
Quantity received	

I confirm that the information given is accurate and consent to academy staff administering the medicine in accordance with the academy policy and the prescriber's instructions. I will notify the academy immediately, in writing, of any change.

Parent/carer signature	
Date	
Agreed by academy	
Date	

Template C: Record of medicine administered to an individual pupil

Name of academy/setting	Bromley Trust Academy
Pupil's name	
Group/class/form	
Medicine and strength	
Dose and frequency	
Date received	
Quantity received	
Expiry date	
Quantity returned	

Date	Time	Dose	Route	Staff name	Initials	Notes/reaction
Staff signature on receipt						
Parent/carer signature						
Date returned/disposed						

Template D: Record of medicine administered to pupils

Name of Academy Setting:

Date	Pupil	Time	Medicine	Dose	Reaction/notes	Signature	Print name

Template E: Staff training and competency record

Name of academy/setting	Bromley Trust Academy
Member of staff	
Training received	
Condition/procedure covered	
Date completed	
Training provided by	
Professional role/title	
Competence confirmed for	
Review/update due	

I confirm that the member of staff named above has received the training recorded and has demonstrated competence for the activity stated, subject to the review arrangements shown.

Trainer's signature	
Date	
Staff signature	
Date	

Template F: Medical incident and near-miss review

Pupil	
Date, time and location	
Incident or near miss	
Condition/medicine involved	
Immediate action taken	
Emergency services contacted	Yes / No
Parent/carer informed	Yes / No - time:
Staff involved/witnesses	
Was the IHP available and followed?	
Was medicine/equipment available?	
Contributing factors	
Learning and actions required	
IHP/risk assessment/training update	
Action owner and deadline	
Reviewed by	
Date	