

# **SUPPORTING STUDENTS WITH MEDICAL NEEDS POLICY**

Created: March 2022  
Reviewed: February 2026  
Next review due: February 2027

As part of our focus on diversity and inclusion, BDAT pledges that our policies will seek to promote equity, fairness, and respect for all staff and students. Our policies reflect the BDAT values of inclusion, compassion, aspiration, resilience, and excellence. By working closely with a range of stakeholders, such as our school, recognised trade union, and HR colleagues, we have ensured that BDAT's policies do not unlawfully discriminate against anybody.

*Note: The words school and academy are used interchangeably throughout this policy.*

*Note: The words parent and carer are used interchangeably throughout this policy.*

This policy is divided into two sections. The first looks at the essential criteria for how the academies can meet the requirements of students with medical needs generally, and the second looks at how the academies must support students who cannot attend school due to medical needs.

### **PART ONE - How the academies can meet the requirements of students with medical needs generally**

#### **1. Recognise that the Trust and its academies are an inclusive community that welcome and support students with medical conditions.**

- Academies provide students with medical needs with the same opportunities as other students. No student will be denied admission or prevented from taking up a place in the academy because arrangements for their medical condition have not been made.
- Academies listen to the views of students and parents.
- Students and parents feel confident in the care they receive from the academy.
- Staff and volunteers understand the medical conditions of children at the academy, and that they may be serious, adversely affect a student's quality of life, and impact on their ability to learn.
- Academies understand that all students with the same medical conditions will not have the same needs.
- Academies recognise their duties in the Children and Families Act and the Equality Act in relation to students with medical needs, including disabilities.

#### **2. Clearly communicate the Trust's Supporting Students with Medical Needs Policy to staff, volunteers, and other key stakeholders to ensure its full implementation.**

- Staff, volunteers, and other key stakeholders are informed of and reminded about the Trust's Supporting Children With Medical Needs Policy through clear communication channels.
- Staff, volunteers, and other key stakeholders understand their roles and responsibilities in maintaining and implementing this policy effectively.
- Staff, volunteers, and other key stakeholders to work in partnership with all relevant parties including the student (where appropriate), parents, LGBs, healthcare professionals and more to ensure this policy is maintained and implemented effectively.

#### **3. Ensure that all students with a medical condition have an individual healthcare plan (IHP).**

- An IHP details what care a student needs in the academy, when they need it, and who is going to provide it.

- An IHP should include information on the impact any health condition may have on a student's learning, behaviour, or classroom performance.
- An IHP should also explain what help the student will need in an emergency. The IHP will accompany a student should they need to attend hospital. Parental permission will be sought and recorded in the IHP for sharing the IHP within emergency care settings.
- An IHP should be drawn up with input from the student (if appropriate), their parent, the relevant school staff, and healthcare professionals.
- IHPs are reviewed annually, or sooner if the student's needs change.
- An IHP template which has been produced by the DfE can be found at Appendix A of this policy.

**4. Ensure that all staff and volunteers understand and are trained in what to do in the event of a medical emergency.**

- Staff and volunteers are aware of the medical needs of the students within the academy, and understand their duty of care to children in the event of a medical emergency.
- All staff and volunteers receive first aid training in what to do in an emergency. This must be refreshed at least once every three years, although best practice is for first aiders to undertake annual refresher training to maintain their basic skills and keep up to date with any changes in procedures. This is in line with the non-statutory DfE guidance "[First aid in schools, early years and further education](https://www.gov.uk/government/publications/first-aid-in-schools)" - GOV.UK ([www.gov.uk](https://www.gov.uk)).
- If a student needs to attend hospital, a member of staff will stay with the student until a parent arrives, or accompany a student taken to hospital by ambulance. Staff will not take students to hospital in their own car.

**5. Provide clear guidance on administering medication.**

- Staff and volunteers are aware of the importance of medication being taken as detailed in the child's IHP.
- At least one member of staff will have been trained to administer the medication and meet the care needs of an individual student. This includes escort staff for home to school transport if necessary.
- Academies will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent, except in exceptional circumstances.
- When administering medication, e.g. pain relief, the academy will check the maximum dosage and when the previous dose was given. Parents will be informed when medicine has been administered.
- At least one trained member of staff will be made available to accompany a child with medical needs on an offsite visit, including overnight stays.
- Parents understand that they must let the academy know immediately if their child's needs change.
- If a child misuses their medication, or anyone else's, their parent will be informed immediately and the academy's internal disciplinary procedures will be followed.

**6. Provide clear guidance on the storage of medication and equipment.**

- Emergency medication/equipment for individual children is readily available when the children are in the academy and also partaking in offsite activities. It should not be locked away at these times.
- If appropriate, children may carry their own medication/equipment, otherwise the academy will store these securely and safely and the children will know which staff member to talk to should they require it.
- Academies will store medication that is in date and labelled in accordance with its instructions, and if possible in the original packaging. The exception to this is insulin, which though must still be in date, will usually be supplied in an insulin injector pen or a pump.
- Parents will be asked to collect all medication and equipment at the end of the school term, and to provide the academy with new and in date medication at the start of each term.

## **7. Provide clear guidance around record keeping.**

- Parents are asked if their child has any medical conditions on the enrolment form.
- Academies hold a centralised register of IHPs, and an identified member of staff is responsible for maintaining the register.
- The child (if appropriate), their parent, the relevant school staff and healthcare professionals will hold a copy of the IHP. Other academy staff are made aware of this and have access to the IHP for the students in their care. It is vital, however, that academies seek parental permission before sharing medical information with any other party.
- Academies will ensure that the student's confidentiality is protected.
- Prior to any extended day visit or overnight stay, academies will meet with the child (if appropriate), their parent, and healthcare professionals to discuss and make a plan for any extra requirements that may be needed. This is recorded in the IHP with accompanies the child on the visit.
- Academies keep an accurate record of all medication administered, including the dose, time, date, and the member of staff who administered the medication.  
Academies ensure all staff providing support to a student and other relevant teams have received suitable training to ensure they have the confidence to provide the necessary support and that they fulfil the requirements set out in the student's IHP. Academies will keep an up to date record of all training undertaken.

## **8. Ensure the academy environment is inclusive and favourable to students with medical conditions, including the physical environment, and social, sporting, and educational activities.**

- Academies are committed to providing a physical environment accessible to students with medical condition. Students are consulted on this to ensure accessibility.
- Academies ensure the needs of students with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities, extended academy activities, and residential visits.
- Staff are aware of the potential social problems that students with medical conditions may experience and use this knowledge, alongside the academy's Behaviour and Anti-Bullying Policies to help prevent and deal with any such problems. Staff utilise lessons to raise awareness of medical conditions to help promote a positive environment.

- Academies understand the importance of all students taking part in physical activity and that all staff make appropriate adjustments to physical activity sessions to ensure they are accessible to all students.
- Academies ensure all staff are aware that a student should not be forced to partake in activities if they are unwell. Staff should also be aware of students who have been advised to avoid or take special precautions during physical activity.
- Academies ensure that students with medical conditions can participate fully in the curriculum, and that appropriate adjustments and extra support are provided.
- Academies will not penalise students for their attendance if their absences relate to their medical condition.
- Academies will refer students with medical conditions who are falling behind educationally to the SENCO, who will liaise with the student (if appropriate), their parents, and the relevant healthcare professionals.
- Academies ensure a risk assessment is carried out before any out of school visit. The needs of the students with medical conditions are considered during this process and plans are put in place for any additional medication, equipment, or support that may be required.

**9. Ensure staff are aware of the common triggers that can make medical conditions worse or bring on an emergency, and actively work towards reducing or eliminating these trigger risks.**

- Academies provide staff with training and written information on medical conditions which includes avoiding/reducing exposure to common triggers.
- Academies have a list of the triggers for students with medical conditions, have a trigger reduction schedule, and actively work towards reducing and eliminating those health and safety risks.
- The IHP details an individual student's triggers and details how to make sure the student remains safe throughout the school day and during out of school activities.
- Academies review all medical emergencies and incidents to see if lessons can be learnt, and update academy policy accordingly.

**PART TWO – How the academies must support children who cannot attend school due to medical needs**

**1. Aims**

Part two of this policy aims to ensure that:

- Suitable education is arranged for pupils on roll who cannot attend school due to health needs.
- Pupils, staff and parents understand what the academies within the Trust are responsible for when this education is being provided by the LA.

The Trust aims to ensure that all children who are unable to attend school due to medical needs, and who would not receive suitable education without such provision, continue to have access to as much education as their medical condition allows, to enable them to reach their full potential.

Due to the nature of their health needs, some children may be admitted to hospital or placed in alternative forms of education provision. We recognise that, whenever possible, pupils should

receive their education within their school and the aim of the provision will be to reintegrate pupils back into school as soon as they are well enough.

The Trust understands that our academies have a continuing role in a pupil's education whilst they are not in school and will work with the LA, healthcare partners and families to ensure that all children with medical needs receive the right level of support to enable them to maintain links with their education.

## **2. Legislation and guidance**

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Education Act 1996
- Equality Act 2010
- Data Protection Act 2018
- DfE (2015) [Supporting pupils at school with medical conditions \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/426222/Supporting_pupils_at_school_with_medical_conditions.pdf)
- DfE (2023) [Arranging education for children who cannot attend school because of health needs \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1214422/Arranging_education_for_children_who_cannot_attend_school_because_of_health_needs.pdf)

This policy operates in conjunction with the following Trust policies:

- BDAT Attendance Statement
- Safeguarding and Child Protection Policy
- GDPR Policy

This policy also operates in conjunction with the following academy policies:

- School Level Attendance Policy
- School Level Safeguarding and Child Protection Policy
- Special Educational Needs and Disabilities (SEND) Policy
- Accessibility Plan

## **3. Definitions**

Children who are unable to attend school as a result of their medical needs may include those with:

- Physical health issues.
- Physical injuries.
- Mental health problems, including anxiety issues.
- Emotional difficulties or emotionally based school absence.
- Progressive conditions.
- Terminal illnesses.
- Chronic illnesses.

Children who are unable to attend mainstream education for health reasons may attend any of the following:

- **Hospital school:** a special school within a hospital setting where education is provided to give continuity whilst the child is receiving treatment
- **Home tuition:** many LAs have home tuition services that act as a communication channel between schools and pupils on occasions where pupils are too ill to attend school and are receiving specialist medical treatment.
- **Medical PRUs:** these are LA establishments that provide education for children unable to attend their registered school due to their medical needs.

#### 4. LA duties

If the school can't make suitable arrangements, Bradford LA will become responsible for arranging suitable education for these children.

The LA should:

- Provide such education as soon as it is clear that a pupil will be away from school for 15 days or more, whether consecutively or cumulatively. They should liaise with the appropriate medical professionals to ensure minimal delay in arranging appropriate provision for the pupil.
- They should ensure that the education pupils receive is of good quality, allows them to take appropriate qualifications, prevents them from falling behind their peers in school, and allows them to reintegrate successfully back into school as soon as possible.
- Address the needs of individual pupils in arranging provision.
- Have a named officer responsible for the education of children with additional health needs and ensure parents know who this is.
- Have a written, publicly accessible policy statement on their arrangements to comply with their legal duty towards children with additional health needs.
  - The Bradford Medical Needs Policy can be found here on the LA's website - [Medical Needs and Hospital Education Service | Bradford Schools Online](#)
- Review the provision offered regularly to ensure that it continues to be appropriate for the child and that it is providing suitable education.
- Give clear policies on the provision of education for children and young people under and over compulsory school age.

The LA should not:

- Have processes or policies in place which prevent a child from getting the right type of provision and a good education.
- Withhold or reduce the provision, or type of provision, for a child because of how much it will cost.
- Have policies based upon the percentage of time a child is able to attend school rather than whether the child is receiving a suitable education during that attendance.
- Have lists of health conditions which dictate whether or not they will arrange education for children or inflexible policies which result in children going without suitable full-time education (or as much education as their health condition allows them to participate in).

In cases where the LA makes arrangements, the school will:

- Work constructively with the LA, providers, relevant agencies and parents to ensure the best outcomes for the pupil.

- Share information with the LA and relevant health services as required.
- Help make sure that the provision offered to the pupil is as effective as possible and that the child can be reintegrated back into school successfully.
- Recognise that they remain responsible for the safeguarding and welfare of that child whilst they remain on the school roll and ensure that all necessary measures are taken (e.g. attendance monitoring, safeguarding due diligence checks etc.)

## **5. Reintegration**

Each school should identify a named person who will support with the reintegration process. When a pupil is considered well enough to return to school, this named person, as a representative of the school, will develop a tailored reintegration plan in collaboration with the LA.

The school will work with the LA when reintegration into school is anticipated to plan for consistent provision during and after the period of education outside school.

As far as possible, the pupil will be able to access the curriculum and materials that they would have used in school.

If appropriate, the school nurse will also be involved in the development of the pupil's reintegration plan and informed of the timeline of the plan by the named member of staff, to ensure they can prepare to offer any appropriate support to the pupil.

The school will consider whether any reasonable adjustments need to be made to provide suitable access to the school and the curriculum for the pupil.

For longer absences, the reintegration plan will be developed near to the pupil's likely date of return, to avoid putting unnecessary pressure on an ill pupil or their parents in the early stages of their absence.

The school is aware that some pupils will need gradual reintegration over a long period of time and will always consult with the pupil, their parents and key staff about concerns, medical issues, timing and the preferred pace of return.

The reintegration plan will include:

- The date for planned reintegration, once known.
- Details of regular meetings to discuss reintegration.
- Details of the named member of staff who has responsibility for the pupil.
- Clearly stated responsibilities and the rights of all those involved.
- Details of social contacts, including the involvement of peers and mentors during the transition period.
- A programme of small goals leading up to reintegration.
- Follow-up procedures.

The school will ensure a welcoming environment is developed and encourage pupils and staff to be positive and proactive during the reintegration period.

Following reintegration, the school will support the LA in seeking feedback from the pupil regarding the effectiveness of the process.

Please visit Bradford Schools Online for further information around the reintegration of children into school due to medical needs. This includes modified timetable guidance, the modified timetable notification form, and the risk assessment and review form: [Modified / Part-Time Timetables | Bradford Schools Online](#)

## **6. Responsibilities**

The Governing Body is responsible for:

- Ensuring arrangements for pupils who cannot attend school as a result of their medical needs are in place and are effectively implemented.
- Ensuring the termly review of the arrangements made for pupils who cannot attend school due to their medical needs.
- Ensuring the roles and responsibilities of those involved in the arrangements to support the needs of pupils are clear and understood by all.
- Ensuring robust systems are in place for dealing with health emergencies and critical incidents, for both on- and off-site activities.
- Ensuring staff with responsibility for supporting pupils with health needs are appropriately trained.

The Head Teacher is responsible for:

- Working with the governing body to ensure compliance with the relevant statutory duties when supporting pupils with additional health needs.
- Working collaboratively with parents and other professionals to develop arrangements to meet the best interests of pupils.
- Ensuring the arrangements put in place to meet pupils' health needs are fully understood by all those involved and acted upon.
- Appointing a named member of staff who is responsible for pupils with healthcare needs and liaises with parents, pupils, the LA, key workers and others involved in the pupil's care.
- Providing teachers who support pupils with health needs with suitable information relating to a pupil's health condition and the possible effect the condition and/or medication taken has on the pupil.
- Ensuring the support put in place focusses on and meets the needs of individual pupils.
- Arranging appropriate training for staff with responsibility for supporting pupils with additional health needs.
- Providing teachers who support pupils with additional health needs with suitable information relating to a pupil's health condition and the possible effect the condition and/or medication taken has on the pupil.
- Providing annual reports to the governing body on the effectiveness of the arrangements in place to meet the health needs of pupils.
- Notifying the LA when a pupil is likely to be away from the school for a significant period of time due to their health needs.

The named member of staff is responsible for:

- Pupils who are unable to attend school because of medical needs.
- Actively monitoring pupil progress and reintegration into school.

- Supplying pupils' education providers with information about the child's capabilities, progress and outcomes.
- Liaising with the Head Teacher, education providers and parents to determine pupils' programmes of study whilst they are absent from school.
- Keeping pupils informed about school events and encouraging communication with their peers.
- Providing a link between pupils and their parents, and the LA.

Teachers and support staff are responsible for:

- Understanding confidentiality in respect of pupils' health needs.
- Designing lessons and activities in a way that allows those with health needs to participate fully and ensuring pupils are not excluded from activities that they wish to take part in without a clear evidence-based reason.
- Understanding their role in supporting pupils with health needs and ensuring they attend the required training.
- Ensuring they are aware of the needs of their pupils through the appropriate and lawful sharing of the individual pupil's health needs.
- Ensuring they are aware of the signs, symptoms and triggers of common life-threatening medical conditions and know what to do in an emergency.
- Keeping parents informed of how their child's health needs are affecting them whilst in the school.

Parents are expected to:

- Ensure the regular and punctual attendance of their child at the school where possible.
- Work in partnership with the school to ensure the best possible outcomes for their child.
- Notify the school of the reason for any of their child's absences without delay.
- Provide the school with sufficient and up-to-date information about their child's medical needs.
- Attend meetings to discuss how support for their child should be planned.

## **7. Managing absences**

Parents are advised to contact the school on the first day their child is unable to attend due to illness.

Absences due to illness will be authorised unless the school has genuine cause for concern about the authenticity of the illness.

The school will provide support to pupils who are absent from school because of illness for a period of less than 15 school days by liaising with the pupil's parents to arrange schoolwork as soon as the pupil is able to cope with it or part-time education at school. The school will give due consideration to which aspects of the curriculum are prioritised in consultation with the pupil, their family and relevant members of staff.

For periods of absence that are expected to last for 15 or more school days, either in one absence or over the course of a school year, the named person with responsibility for pupils with health needs will notify the LA, who will take responsibility for the pupil and their education.

Where absences are anticipated or known in advance, the school will liaise with the LA to enable education provision to be provided from the start of the pupil's absence.

For hospital admissions, the appointed named member of staff will liaise with the LA regarding the programme that should be followed while the pupil is in hospital.

The LA will set up a personal education plan (PEP) for the pupil which will allow the school, the LA and the provider of the pupil's education to work together to support the pupil.

The school will monitor pupil attendance and mark registers to ensure it is clear whether a pupil is, or should be, receiving education otherwise than at school.

## **8. Support for pupils**

Where a pupil has a complex or long-term health issue, the school will discuss the pupil's needs and how these may be best met with the LA, relevant medical professionals, parents and, where appropriate, the pupil.

The LA expects the school to support pupils with health needs to attend full-time education wherever possible, or for the school to make reasonable adjustments to pupils' programmes of study where medical evidence supports the need for those adjustments.

The school will make reasonable adjustments under pupils' individual healthcare plans (IHCPs).

Pupils admitted to hospital will receive education as determined appropriate by the medical professionals and hospital tuition team at the hospital concerned.

During a period of absence, the school will work with the provider of the pupil's education to establish and maintain regular communication and effective outcomes.

Whilst a pupil is away from school, the school will work with the LA to ensure the pupil can successfully remain in touch with their school using the following methods:

- School newsletters
- Emails
- Invitations to school events
- Cards or letters from peers and staff

Where appropriate, the school will provide the pupil's education provider with relevant information, curriculum materials and resources.

To help ensure a pupil with additional health needs is able to attend school following an extended period of absence, the following adaptations will be considered:

- A personalised or modified timetable, drafted in consultation with the named staff member
- Access to additional support in school
- Online access to the curriculum from home
- Movement of lessons to more accessible rooms
- Places to rest at school
- Special exam arrangements to manage anxiety or fatigue

## **9. Information sharing**

It is essential that all information about pupils with additional health needs is kept up-to-date.

To protect confidentiality, all information-sharing techniques, e.g. staff noticeboards, will be agreed with the pupil and their parent in advance of being used

All teachers, TAs, supply and support staff will be provided with access to relevant information, including high-risk health needs, first aiders and emergency procedures, via a noticeboard in the staffroom.

Parents will be made aware of their own rights and responsibilities regarding confidentiality and information sharing. To help achieve this, the school will:

- Ensure this policy and other relevant policies are easily available and accessible.
- Provide the pupil and their parents with a copy of the policy on information sharing.
- Ask parents to sign a consent form which clearly details the organisations and individuals that their child's health information will be shared with and which methods of sharing will be used.
- Consider how friendship groups and peers may be able to assist pupils with additional health needs.

When a pupil is discharged from hospital or is returning from other education provision, the school will ensure the appropriate information is received to allow for a smooth return to the school. The named member of staff will liaise with the hospital or other tuition service as appropriate.

## **10. Record keeping**

Written records will be kept of all medicines administered to pupils.

Proper record keeping will protect both staff and pupils and provide evidence that agreed procedures have been followed.

## **11. Training**

Healthcare professionals should be involved in identifying and agreeing with the school the type and level of training required. Training will be sufficient to ensure staff are confident in their ability to support pupils with additional health needs.

Staff will be trained in a timely manner to assist with a pupil's return to school.

Once a pupil's return date has been confirmed, staff will be provided with relevant training one week before the pupil's anticipated return.

Parents of pupils with additional health needs may provide specific advice but will not be the sole trainer of staff.

## **12. Examinations and assessments**

The named member of staff will liaise with the alternative provision provider over planning and examination course requirements where appropriate.

Relevant assessment information will be provided to the alternative provision provider if required.

Awarding bodies may make special arrangements for pupils with permanent or long-term disabilities and learning difficulties, or temporary disabilities and illnesses. Applications for such arrangements will be submitted by the school, or LA if more appropriate, as early as possible.

## **13. Monitoring arrangements**

Any changes in the policy will be clearly communicated to all members of staff involved in supporting pupils with additional health needs, and to parents and pupils themselves.

### **Complaints**

If parents or carers are dissatisfied with the support provided by the academy to their child in line with this policy, they must refer to the BDAT Complaints Policy which outlines the complaints procedure. A copy of the BDAT Complaints Policy can be found on the BDAT website.

**Appendix A – IHP template produced by the DfE**

Name of academy/setting

Student's name

Group/class/form

Date of birth

Student's address

Medical diagnosis or condition

Date

Review date

**Family Contact Information**

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

**Clinic/Hospital Contact**

Name

Phone no.

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G.P.

Name

Phone no.

Who is responsible for providing support in  
the academy

Describe medical needs and give details of student's symptoms, triggers, signs, treatments, facilities,  
equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-  
indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the student's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to