



## ALTERNATIVE PROVISION

# Supporting Student Medical Conditions Policy

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Approved by: [RAISE-AP Educational Directors](#)

Approval Signatures

*RAISE-AP  
Directors*

## Table of Contents

<b>Statement of Intent .....</b>	<b>3</b>
<b>Communication .....</b>	<b>4</b>
<b>Emergency Procedure Management .....</b>	<b>4</b>
<b>Administration of Medicines .....</b>	<b>5</b>
<b>Storage of Medicines .....</b>	<b>8</b>
<b>Disposal of Medicines .....</b>	<b>9</b>
<b>Records Management .....</b>	<b>9</b>
<b>Environment.....</b>	<b>10</b>
<b>Physical Activity and Off-Site Visits .....</b>	<b>11</b>
<b>Medical Condition Triggers .....</b>	<b>11</b>
<b>Roles and Responsibilities .....</b>	<b>12</b>
<b>Monitoring.....</b>	<b>12</b>
<b>Raise Values .....</b>	<b>12</b>
<b>Appendix I .....</b>	<b>13</b>
<b>Appendix II .....</b>	<b>14</b>
<b>Appendix III .....</b>	<b>16</b>
<b>Appendix IV .....</b>	<b>17</b>
<b>Appendix V .....</b>	<b>18</b>
<b>Appendix VI .....</b>	<b>20</b>
<b>Appendix VII .....</b>	<b>22</b>

## Statement of Intent

**RAISE-AP** is welcoming and supportive of students with medical conditions. We provide children with medical conditions with the same opportunities and access to activities as other students. No child will be denied admission or prevented from taking up a place in **RAISE-AP** because arrangements for their medical condition have not been made.

Staff understand their duty of care to children and young people to act in loco parentis in the event of an emergency

**RAISE-AP** will listen to the views of pupils and parents.

Students and parents feel confident in the care they receive from **RAISE-AP** and the level of that care meets their needs.

Staff understand that some students at **RAISE-AP** have medical conditions of and that they may be serious, adversely affect a child's quality of life and impact on their ability and confidence

All staff understand their duty of care to children and young people and know what to do in the event of an emergency.

The whole provision and local health community understand and support the medical conditions policy.

**RAISE-AP** understands that all children with the same medical condition will not have the same needs, our school will focus on the needs of each individual child.

**RAISE-AP** recognises its duties as detailed in Section 100 of the Children and Families Act 2014. Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case, **RAISE-AP** complies with their duties under that Act. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision.

**RAISE-AP's** medical conditions policy is drawn up in consultation with a wide range of local key stakeholders within both the provision and health settings. Stakeholders include pupils, parents, school staff, educational directors, and relevant local health specialist services.

## Communication

The medical conditions policy is supported by a clear communication plan for staff, parents and other key stakeholders to ensure its full implementation.

Students, parents and carers, relevant local healthcare staff, and other external stakeholders are informed of and reminded about the medical conditions policy through clear communication channels.

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## Emergency Procedure Management

All staff understand and are trained in what to do in an emergency for children with medical conditions at [RAISE-AP](#). All children with medical conditions that are complex, long-term or where there is a high risk that emergency intervention will be required at [RAISE-AP](#) have a Medical Needs and Health Concerns form which explains what help they need in an emergency, or on a day-to-day basis.

This is similar to an Individual Healthcare Plan (IHP) but is tailored to [RAISE-AP](#) and replaces the IHP. The Medical Needs and Health Concerns form will accompany a student should they need to attend hospital.

[RAISE-AP](#) makes sure that all staff providing support to a student have received suitable training and ongoing support to ensure that they have confidence to provide the necessary support and that they fulfil the requirements set out in the student's Medical Needs and Health Concerns form. This should be provided by a specialist nurse/other suitably qualified healthcare professional and/or parent/carer.

The specialist nurse/other suitably qualified healthcare professional will confirm their competence and [RAISE-AP](#) keeps an up-to-date record of all training undertaken and by whom.

All staff understand and are trained in the provision's general emergency procedures. All staff, including temporary or supply staff should be aware of the medical conditions at [RAISE-AP](#) and know what action to take in an emergency and receive updates at least yearly.

The provision will arrange annual training for common conditions e.g. asthma, allergies, epilepsy and diabetes for members of staff in key positions e.g. matron and staff who take students on off-site trips.

If a student needs to attend hospital, a member of staff (preferably known to the student) will stay with them until a parent/carer arrives, or accompany a child taken to hospital by ambulance

## Administration of Medicines

**RAISE-AP** has clear guidance on providing care and support and administering medication at our provision. Our administration of medicine requirements will be achieved by:

- Establishing principles for safe practice in the management and administration of:
  - prescribed medicines
  - non-prescribed medicines
  - maintenance drugs
  - emergency medicine
- Providing clear guidance to all staff on the administration of medicines.
- Ensuring that there are sufficient numbers of appropriately trained staff to manage and administer medicines.
- Ensuring that there are suitable and sufficient facilities and equipment available to aid the safe management and administration of medicines.
- Ensuring the above provisions are clear and shared with all who may require them.
- Ensuring the policy is reviewed periodically or following any significant change which may affect the management or administration of medicines.

### Administration - General

The administration of medicines is the overall responsibility of the parents. The Head of Provision is responsible for ensuring children are supported with their medical needs whilst on site, and this may include managing medicines where appropriate and agreed with parents.

### Administration - Routine

#### Prescribed medicines

It is our policy to manage prescribed medicines (e.g. antibiotics, inhalers) where appropriate following consultation and agreement with, and written consent from the parents/carers.

#### Non-prescribed medicines

It is our general policy not to take responsibility for the storage or administration of non-prescribed medicines, (e.g. Calpol or cough mixtures provided by the parents) as this responsibility rests with the parents/carers. However, parents may request this, and we will consider it on a case-by-case basis.

On occasions when children require paracetamol it is our policy to administer providing that consent from the parents has been received in advance and administration is in accordance with guidance provided.

Children under 16 years old are never to be administered aspirin or medicines containing Ibuprofen unless prescribed by a doctor. Children may self-medicate under the written approval of parents.

Responsibility for decision-making about the administration of all non-prescribed medicines (including travel sickness tablets) will always be at the discretion of the Head of Provision who may decide to administer under certain exceptional circumstances. In these instances, parents/carers will have to give written consent, including the duration of treatment.

### Maintenance drugs

It is our policy to manage the administration of maintenance drugs (e.g. Insulin) as appropriate following consultation and agreement with, and written consent from the parents/carers. On such occasions, a Medical Needs and Health Concerns Form will be written for the child concerned.

## Administration - Non-Routine

### Emergency medicine

It is our policy (where appropriate) to manage the administration of emergency medicines such as (for example):

- Injections of adrenaline for acute allergic reactions
- In all cases, professional training and guidance from a competent source will be received before commitment to such administration is accepted
- In the event that only out of date medicine is available, staff will check with emergency services for permission to administer.

### Procedure for Administration

When deciding upon the administration of medicine needs for children we will discuss this with the parents/carers concerned and make reasonable decisions about the level of care required.

Parents/carers of any child required to have medicines administered will be given an Administration of Medicines & Treatment Consent Form.

For controlled medication parents/carers will be asked to complete a Consent for Controlled Medication Form. Controlled medication should be signed into the provision by a parent or carer.

Upon receipt of medication to be administered in the provision, a Student Medication Record will be completed to sign in the quantity of medicine received.

Medical Needs and Health Concerns forms will be completed for children where required and reviewed periodically by the Head of Provision in discussion with the parents/carers and relevant members of staff to ensure their continuous suitability.

It is the parent/carer's responsibility to ensure the provision is kept up to date about any changes to a child's medical condition.

Each time medicine is administered to a child a record is added to the daily incident log. It is also logged on the child's personal paper record stored with the medical consent form. Parents and carers will be informed every time any medication including paracetamol is administered.

If a child is due to have medicine at specific times of the day it is the child's responsibility to report to the Head of Provision. If the child is late they will be reminded and if a child misses their medication the parents/carers will be informed at the earliest available opportunity.

### **Contacting Emergency Services**

When a medical condition causes the child to become ill and/or requires emergency administration of medicines, then an ambulance will be summoned at the earliest opportunity.

Dial 999 or 112

Use 'what3words' app or website to convey location if possible.

### **Medical Accommodation**

The Medical Room will be used for medicine administration/treatment purposes. The room will be made available when required.

## Training

Where staff are required to carry out non-routine or more specialised administration of medicines or emergency treatment to children, appropriate professional training and guidance from a competent source will be sought before commitment to such administration is accepted.

**RAISE-AP** will make sure that there are sufficient members of staff who have been trained to administer the medication and meet the care needs of an individual child. This includes escort staff for home to provision transport if necessary. **RAISE-AP** will ensure that there are sufficient numbers of staff trained to cover any absences, staff turnover and other contingencies

A 'staff training record' sheet will be completed to document the level of training undertaken.

Such training will form part of the overall training plan and refresher training will be scheduled at appropriate intervals.

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## Storage of Medicines

**RAISE-AP** has clear guidance on the storage of medication and equipment at the provision. **RAISE-AP** makes sure that all staff understand what constitutes an emergency for an individual child and makes sure that emergency medication/equipment, e.g. asthma inhalers, adrenaline auto-injectors etc are readily available whenever the child is in the provision and on off-site activities, and are not locked away.

Students may carry their own medication/equipment, or they should know exactly where to access it. Those students deemed competent to carry their own medication/equipment with them will be identified and recorded through the student's Medical Needs and Health Concerns form in agreement with parents/carers.

Pupils can carry controlled drugs if they are deemed competent to do so, otherwise **RAISE-AP** will store controlled drugs securely in a locked box in the medical room, with only named staff having access. Staff at **RAISE-AP** can administer a controlled drug to a student once they have had training in the administration of medicines.

**RAISE-AP** will make sure that all medication is stored safely, and that students with medical conditions know where they are at all times and have access to them immediately. Under no circumstances will medication be stored in first aid boxes.



**RAISE-AP** will only accept medication that is in date, labelled and in its original container including prescribing instructions for administration. The exception to this is insulin, which though must still be in date, will generally be supplied in an insulin injector pen or a pump.

Parents/carers are asked to collect all medications/equipment at the end of the treatment period, and to provide new and in-date medication.

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## Disposal of Medicines

It is the responsibility of the parents/carers to ensure that all medicines which are no longer required including those which have passed their expiry date are returned to a pharmacy for safe disposal.

Parents/carers will receive written notice to collect the medication at the end of the treatment period. If the medicine has not been collected within four weeks the medication will be safely disposed of.

**RAISE-AP** disposes of needles and other sharps in line with local policies. Sharps boxes are kept securely at the provision. They are collected and disposed of by a professional hygiene company. If a student joins an off-site activity they should carry their own portable sharps box with them.

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## Records Management

**RAISE-AP** has clear guidance about record keeping.

As part of the provision's admissions process and annual data collection exercise parents/carers are asked if their child has any medical conditions. These procedures also cover transitional arrangements between schools and the provision.

**RAISE-AP** uses a Medical Needs and Health Concerns form to record the support an individual pupil needs around their medical condition. The Medical Needs and Health Concerns form is completed by the parent/carer and developed with the student (where appropriate), designated named member of school staff, specialist nurse (where appropriate) and relevant healthcare services.

Where a child has SEN but does not have a statement or EHC plan, their special educational needs are mentioned in their Medical Needs and Health Concerns form.

Medical Needs and Health Concerns forms will be shared with parents/carers.

Medical Needs and Health Concerns forms are regularly reviewed, at least every year or whenever the student's needs change.

The student (where appropriate) parents/carers, specialist nurse (where appropriate) and relevant healthcare services hold a copy of the Medical Needs and Health Concerns form. Other provision staff are made aware of and have access to the Medical Needs and Health Concerns form for the students in their care.

**RAISE-AP** makes sure that the student's confidentiality is protected.

**RAISE-AP** seeks permission from parents/carers before sharing any medical information with any other party, other than where it falls within our Privacy Notice (students).

**RAISE-AP** keeps an accurate record of all medication administered, including the dose, time, date and supervising staff.

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## Environment

**RAISE-AP** ensures that the whole provision environment is fully inclusive and favourable to students with medical conditions including physical disabilities. This includes the physical environment, as well as social, sporting and educational activities.

**RAISE-AP** is committed to providing a physical environment accessible to students with medical conditions and students are consulted to ensure this accessibility. **RAISE-AP** is also committed to an accessible physical environment for out-of-provision activities. **RAISE-AP** makes sure the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities, extended school activities and residential visits.

All staff are aware of the potential social problems that students with medical conditions/physical disabilities may experience and use this knowledge, alongside the provision's anti bullying policy, to help prevent and deal with any problems. They use opportunities such as PSHE and science lessons to raise awareness of medical conditions to help promote a positive environment.

**RAISE-AP** understands the importance of all students taking part in off site visits and physical activity and that all relevant staff make reasonable and appropriate adjustments to such activities in order they are accessible to all students. This includes out-of-provision clubs and team sports. Risk assessments will be conducted as part of the planning process to take account of any additional controls required for individual student needs.

**RAISE-AP** understands that all relevant staff are aware that students should not be forced to take part in activities if they are unwell. They should also be aware of students who have been advised to avoid/take special precautions during activity, and the potential triggers for a student's medical condition when exercising and how to minimise these.

## Physical Activity and Off-Site Visits

**RAISE-AP** makes sure that students have the appropriate medication/equipment/food with them during physical activity and offsite visits. We makes sure that students with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at the provision as any other child, and that appropriate adjustments and extra support are provided.

All provision staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition.

**RAISE-AP** will not penalise pupils for their attendance if their absences relate to their medical condition.

**RAISE-AP** will refer pupils with medical conditions who are finding it difficult to keep up educationally to the SENDCo who will liaise with the student (where appropriate), parent/carer and the student's healthcare professional.

Students at **RAISE-AP** learn what to do in an emergency.

**RAISE-AP** makes sure that a risk assessment is carried out before any out-of-provision visit, including work experience and educational placements. The needs of 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.

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## Medical Condition Triggers

**RAISE-AP** is aware of the common triggers that can make common medical conditions worse or can bring on an emergency. The provision is actively working towards reducing or eliminating these health and safety risks and has a written schedule of reducing specific triggers to support this.

**RAISE-AP** is committed to identifying and reducing triggers both at the provision and on out-of-provision visits. Provision staff have been given training and written information on medical conditions which includes avoiding/reducing exposure to common triggers.

The IHP details an individual student's triggers and details how to make sure the student remains safe throughout the whole day and on out-of-provision activities. Risk assessments are carried out on all out-of-provision activities, taking into account the needs of students with medical needs.

**RAISE-AP** reviews all medical emergencies and incidents to see how they could have been avoided, and changes provision policy according to these reviews.

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## Roles and Responsibilities

Each member of the provision and health community knows their roles and responsibilities in maintaining and implementing an effective medical conditions policy.

**RAISE-AP** works in partnership with all relevant parties including the student (where appropriate), parents/carers, **RAISE-AP** educational directors, all provision staff, employers and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.

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## Monitoring

The medical conditions policy is regularly reviewed, evaluated and updated. Updates are produced every year.

In evaluating the policy, **RAISE-AP** seeks feedback from key stakeholders including students, parents/carers, specialist nurses and other relevant healthcare professionals, provision staff, local emergency care services and **RAISE-AP** educational directors. The views of students with medical conditions are central to the evaluation process.

Should parents/carers and students be dissatisfied with the support provided they should discuss these concerns with the Head of Provision.

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## Raise Values

Our **RAISE-AP values** (Resolve, Attitude, Invest, Social Skills and Education) are key in everything we do, specifically with attitudes (modelling and expectations), invest (tailoring setup for our young people) social skills (becoming part of a community) which are linked to our Supporting Student Medical Conditions policy.

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# Appendix I

## Process for developing Medical Needs and Health Concerns forms

1. Medical Needs and Health Concerns Data Collection - included in online registration process for new students (and sent to parents/carers of current students where medical information is incomplete)
2. Head of Provision – if a child lives with a severe medical condition will call the child’s parents/carers
3. Head of Provision – to call parents and ensure all information in the data collection is fully complete
4. Head of Provision – to convert data into a Medical Needs and Health Concerns Form.
5. Head of Provision – to alert staff if a child’s condition requires sharing and whether additional training is required
6. Head of Provision – parents/carers are reminded annually to check that all information is accurate and up-to-date

## Appendix II

### Roles and Responsibilities

**RAISE-AP** educational directors – must make arrangements to support students with medical conditions in the provision, including making sure that a policy for supporting students with medical conditions in provision is developed and implemented.

They should ensure that students with medical conditions are supported to enable the fullest participation possible in all aspects of provision life. **RAISE-AP** educational directors should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. They should also ensure that any members of provision staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

Head of Provision – should ensure that the policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting students with medical conditions and understand their role in its implementation. The Head of Provision should ensure that all staff who need to know are aware of the child's condition. They should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. The Head of Provision has the overall responsibility for the development of individual healthcare plans. They should also make sure that provision staff are appropriately insured and are aware that they are insured to support pupils in this way.

Provision staff – any member of provision staff may be asked to provide support to students with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of students with medical conditions that they teach. Provision staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of provision staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

Other healthcare professionals - including GPs, paediatricians, nurse specialists/community paediatric nurses – should notify the Head of Provision and work jointly when a child has been identified as having a medical condition that will require support at the provision. They may provide advice on developing healthcare plans. Anyone dealing with the medical care of a student in the provision should contact the Head of Provision to ensure a coordinated approach.

Students – with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other students will often be sensitive to the needs of those with medical conditions.

Parents/carers – should provide the provision with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the provision that their child has a medical condition. Parents/carers are key partners and should be involved in the development and review of their child's individual healthcare plan and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are always contactable.

## Appendix III

### Salbutamol Inhaler

**RAISE-AP** holds an emergency salbutamol inhalers for each student who has been prescribed a reliever inhaler and for whom written parental consent for its use has been obtained.

The use, storage, care and disposal of inhalers and spacers will follow the provision's policy on supporting students with medical conditions.

**RAISE-AP** holds a register of children prescribed an inhaler and this list is kept with the emergency inhalers.

Parents/carers will be informed if their child has used the emergency inhaler.

The provision's member of staff responsible for ensuring this protocol is followed is the Head of Provision. Appropriate support and training has been provided in line with the provision's policy on supporting students with medical conditions.



## Appendix IV

### Adrenaline Auto-Injectors (Epi-Pens)

RAISE-AP holds an emergency auto-injector for each student who has been prescribed an auto-injector and for whom written parental consent for its use has been obtained.

The use, storage, care and disposal of auto-injectors will follow the provision's policy on supporting students with medical conditions.

RAISE-AP holds a register of children prescribed an auto-injector and this list is kept with the emergency auto-injector.

Parents/carers will be informed if their child has used the emergency auto-injector.

The provision's member of staff responsible for ensuring this protocol is followed is the Head of Provision. Appropriate support and training has been provided in line with the provision's policy on supporting students with medical conditions.

## Appendix V

### Administration of Medicines and Treatment Consent Form

RAISE-AP	
Name of Student	
Address of Student	
Parent / Carer Telephone	
Parent / Carer Mobile	
Name of GP Practice	
GP Telephone Number	

Please tick the appropriate box **a or b** plus box **c**

(a) My child will be responsible for the self-administration of prescription or non-prescription medicines as directed below	
(b) I agree to members of staff administering prescription only medicines/providing treatment to my child as directed below	
(c) I recognise that provision staff are not medically trained	

Name of parent/carers	
Signature of parent/carers	
Date	

Name of Medicine	Required Dose	Frequency	Course Finish	Medicine Expiry

Special Instructions	
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Allergies	
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Other Prescribed Medicines	
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## Appendix VI

### Parent/Carer Agreement for Provision to Administer Controlled Medicines

**RAISE-AP** will not give your child controlled medicine until you have completed and signed this form. **Medicines must be in the original container as dispensed by the pharmacy.**

RAISE-AP	
Name of Student	
Date of Birth	
Medical Condition / Illness	
Date for Review	

Name / Type of Medicine (As Described on the Contained)	
Expiry Date	
Dosage and Method	
Timing	
Special Precautions / Other Instructions	
Side Effects <b>RAISE-AP</b> should be made aware of	
Self-Administration (Yes/No)	

## Contact Details

Name	
Daytime Telephone Number	
Relationship to the Child	
Address	

I understand that I must give this medicine to the Head of Provision to be counted and signed in.

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to [RAISE-AP](#) staff administering medicine in accordance with [RAISE-AP's](#) policy.

I will inform the provision immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

