St Peter's
Church of England
Primary School

# St Peter's C of E Primary School

# Supporting Pupils with Medical Conditions and Allergy Safety Policies

Policy pack updated for 2026 consultation readiness

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| **Prepared** | April 2026 |
| **Includes** | Medical Conditions Policy |
| **Digital recording** | Medical Tracker will be used as the school's digital first-aid and accident recording system |
| **Review** | September 2026 or sooner on publication of revised DfE statutory guidance |

**Note**: These policies reflect current statutory duties and are written so the school is ready to update them once final Department for Education guidance is published following the 2026 consultation on supporting pupils with medical conditions and allergies.

DfE consultation reference (GOV.UK)

St Peter's C of E Primary School

# Policy for Supporting Pupils with Medical Conditions

*Excellence in All We Do – Excellence in Who We Are – Excellence in Our Service with Others*

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| **Updated** | April 2026 |
| **Review date** | September 2026 or sooner on publication of revised DfE statutory guidance |
| **Named lead** | Lynne McCullough |

## 1. Aims

This policy aims to ensure that pupils, staff and parents/carers understand how the school will support pupils with medical conditions; that pupils with medical conditions are properly supported so they have full access to education, including trips, clubs and sporting activities; that consultation takes place with parents/carers, pupils and relevant professionals; and that safe practices and procedures are in place so the school meets its duties for health and safety, inclusion and safeguarding.

The policy also prepares the school to review and update its arrangements in line with any revised Department for Education guidance following the current consultation on supporting pupils with medical conditions and allergies in schools.

## 2. Scope

This policy applies to all pupils at St Peter's C of E Primary School who have short-term, long-term or complex medical conditions requiring support during the school day or during school-led activities.

- medication in school
- monitoring or emergency support
- adjustments to routines or learning
- support during educational visits, PE, swimming, clubs or wraparound provision
- support during periods of medical absence

This policy should be read alongside the LSP separate Allergy Safety Policy.

## 3. Legislation and statutory guidance

This policy meets the requirements of section 100 of the Children and Families Act 2014, which places a duty on governing boards of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at school with medical conditions.

It is based on the current Department for Education statutory guidance Supporting pupils at school with medical conditions.

The school is also aware of the Department for Education consultation 'Proposal on support for pupils with medical conditions at school' (opened 5 March 2026, closes 1 May 2026), which proposes strengthened expectations in relation to a published medical conditions policy, strengthened Individual Healthcare Plans (IHPs), recording and learning from serious incidents and near misses, and a separate published allergy safety policy.

The governing board and headteacher will review this policy and associated procedures when final revised guidance is published.

## 4. Links with other policies

- LSP Allergy Safety Policy
- LSP Child Protection and Safeguarding Policy
- Health and Safety Policy
- Accessibility Policy and Plan
- SEND Information Report and LSP SEND Policy
- Equality Information and Objectives
- Attendance Policy
- Educational Visits Policy
- Complaints Policy

## 5. Roles and responsibilities

### 5.1 The governing board

The governing board has overall responsibility for making arrangements to support pupils with medical conditions.

- reviewing and publishing this policy on the school website
- ensuring sufficient staff receive suitable training and are competent before taking responsibility for supporting pupils with medical conditions
- ensuring there are effective arrangements for developing, implementing and reviewing IHPs
- ensuring there are appropriate systems for recording, reporting and reviewing serious incidents and near misses
- supporting pupils with medical conditions to participate fully and safely in all aspects of school life
- ensuring appropriate insurance and indemnity arrangements are in place
- maintaining robust allergy safety arrangements, and follow the LSP Allergy Safety Policy

### 5.2 The headteacher

- ensuring all staff are aware of this policy and understand their role in implementing it
- ensuring there are sufficient trained staff available to implement this policy and deliver support set out in IHPs, including in contingency and emergency situations
- ensuring all staff who need to know are aware of a child’s condition and the support required
- ensuring systems are in place for obtaining and updating information about pupils’ medical needs
- ensuring appropriate cover arrangements are in place when trained staff are absent
- ensuring supply staff are provided with appropriate information where relevant
- ensuring incidents and near misses are reviewed and acted upon
- reporting significant issues to the governing board as appropriate

### 5.3 Named person responsible for implementation

The named person with day-to-day responsibility for implementing this policy is **Lynne McCullough** (Assistant Head/ SENCO / designated lead for pupils with medical conditions).

- oversight of Individual Healthcare Plans
- communication with parents/carers and relevant professionals

- staff awareness and dissemination of key information
- review of medical support arrangements
- liaison with the School First Aid Co-ordinator and school office

### 5.4 School First Aid Co-ordinator / designated first aid staff

- supporting the drafting and review of IHPs
- maintaining medical records, medication records and training records and log using Medical Tracker
- ensuring relevant staff are aware of emergency procedures
- supporting safe storage, access and administration of medicines
- checking expiry dates of emergency medication regularly
- supporting recording and review of incidents and near misses, including incidents entered onto Medical Tracker

### 5.5 Staff

Supporting pupils with medical conditions is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, including administering medicines, although they will not be required to do so unless appropriately trained and competent.

- following this policy and any relevant IHPs
- knowing what to do and responding appropriately when they become aware that a pupil with a medical condition needs help
- ensuring pupils can access medication and support when required
- taking account of pupils' medical needs in lessons, PE, visits and activities
- reporting concerns, incidents or near misses promptly
- maintaining confidentiality, sharing information only on a need-to-know basis

### 5.6 Parents/carers

- providing the school with sufficient and up-to-date information about their child's medical needs
- working in partnership with the school and relevant professionals
- being involved in developing and reviewing their child's IHP where one is required
- providing medicines, devices and equipment in date and in the correct form
- replacing medication before expiry and collecting unused medication when requested
- ensuring the school has up-to-date emergency contact details
- informing the school promptly of any changes in diagnosis, treatment or risk

### 5.7 Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them.

- contributing to discussions about their medical support needs where appropriate
- understanding and, where appropriate, taking increasing responsibility for managing their condition
- following agreed arrangements in their IHP
- telling an adult immediately if they feel unwell or require support

### 5.8 School nurses and other healthcare professionals

- notifying the school when a pupil has been identified as having a medical condition requiring support
- contributing to the development and review of IHPs
- providing or advising on training for staff
- providing advice on safe management, emergency procedures and inclusion

## 6. Equal opportunities and inclusion

The school is committed to ensuring that pupils with medical conditions are properly supported so that they can participate fully in school life.

- education and learning opportunities
- school trips and educational visits
- PE, swimming and sport
- clubs and enrichment activities
- lunch and social times
- wraparound or extended provision run by the school, where applicable

Reasonable adjustments will be considered and made where necessary. Risk assessments will be carried out where required, taking into account the views of the pupil and parents/carers, medical advice, the nature of the activity, the support and medication needed, and staffing and emergency arrangements.

## 7. Safeguarding

St Peter's C of E Primary School is committed to the welfare and safeguarding of all pupils. This policy should be read in conjunction with the school's Safeguarding and Child Protection Policy. Where a pupil's medical condition, treatment, attendance, presentation or home circumstances raise safeguarding concerns, these will be addressed in line with safeguarding procedures.

## 8. Policy publication and accessibility

- reviewing this policy at least annually and sooner where there is a significant change in guidance or practice
- publishing this policy on the school website and making it available on request from the school office
- ensuring staff, governors, parents/carers and, where appropriate, pupils know how to access this policy
- reading this policy alongside the school's separate Allergy Safety Policy

## 9. Being notified that a child has a medical condition

The school will have a clear and timely process for identifying pupils who have medical conditions and determining the level of support required.

Notification may come from parents/carers, admissions information, school nursing or other healthcare professionals, previous schools or settings, or the pupil themselves where appropriate.

1. acknowledge the information promptly
2. consider whether an Individual Healthcare Plan (IHP) is required
3. gather relevant information from parents/carers and, where appropriate, health professionals
4. identify any immediate safety arrangements required, including access to emergency medication
5. ensure relevant staff are informed on a need-to-know basis
6. agree next steps and review dates

The school will make every effort to ensure arrangements are put in place within 2 weeks, or by the beginning of the relevant term for new pupils, unless an earlier response is required because of risk.

## 10. Individual Healthcare Plans (IHPs)

The headteacher has overall responsibility for the development of IHPs. This responsibility is delegated to **Lynne McCullough**, working with the School First Aid Co-ordinator and relevant staff.

### 10.1 When an IHP is required

Not all pupils with a medical condition will require an IHP. An IHP will usually be considered where the condition is long-term or complex, may be life-threatening, emergency medication may be required, there is risk of allergy/anaphylaxis, there is a need for clarity about day-to-day support, the pupil needs support with participation, attendance or inclusion, or several staff need to know exactly what to do.

If there is disagreement about whether an IHP is needed, the headteacher will make the final decision, taking account of medical evidence and the child's best interests.

### 10.2 How IHPs are developed

- in partnership with parents/carers
- with the pupil, where appropriate
- with input from relevant healthcare professionals where needed
- in the child's best interests
- as soon as possible after the need is identified

Where a child has an Education, Health and Care Plan (EHCP), the IHP will be linked to or form part of that plan where appropriate. Where a child has SEND but no EHCP, relevant needs will be reflected in the IHP.

### 10.3 What an IHP will include

- the medical condition, diagnosis and how it presents in school
- known triggers, warning signs, symptoms and deterioration indicators
- the pupil's resulting needs, including medication, equipment, treatment, testing, access to food or drink, dietary requirements and environmental considerations
- medication details, including dose, route, timing, storage and side effects
- whether the pupil can self-manage medication and any supervision arrangements
- educational, social and emotional support needs
- arrangements for attendance, absences and catch-up support
- the level of support needed, including in emergencies
- who will provide support, what training they need and confirmation of competency where appropriate
- cover arrangements when usual staff are absent
- who in school needs to know about the condition
- arrangements for school trips, visits, PE, clubs and other activities
- arrangements for confidentiality and information sharing
- emergency procedures, including when to call 999
- review date and triggers for early review

For pupils with allergies or risk of anaphylaxis, the IHP should also clearly identify allergens and likely exposure risks, symptoms of allergic reaction and anaphylaxis, the location and availability of prescribed adrenaline auto-injectors, food, classroom, trip and activity precautions, and emergency response steps.

### 10.4 Reviewing IHPs

- at least annually
- whenever there is a change in the pupil's medical condition, treatment or medication
- after a significant incident or near miss
- before major transitions where appropriate

## 11. Training

The headteacher will ensure that staff are appropriately trained.

### 11.1 General training

- this policy and school procedures
- recognising common medical needs and emergencies
- asthma awareness
- allergy and anaphylaxis awareness
- accessing emergency medication
- escalation and emergency response procedures

### 11.2 Condition-specific training

Where staff are required to support a specific pupil with a medical condition, they will receive appropriate training before taking responsibility for that support.

This may be delivered by the school nurse, specialist nurses, paediatric services, other relevant healthcare professionals or appropriately qualified trainers.

No member of staff will be expected to administer prescription medication or undertake healthcare procedures unless appropriately trained, competent and acting in accordance with the pupil's IHP and school procedures.

### 11.3 Training records

Training will be recorded and monitored. Records will include who has been trained, what training was completed, the date of training, who delivered the training and when refresher training is due.

Training records are kept with the Business Manager, but are also logged on Medical Tracker.

## 12. Coordination and sharing of information

The School First Aid Co-ordinator, in conjunction with the SENCO / designated lead, will ensure that all relevant staff are aware of individual pupils' medical needs and emergency arrangements.

- class teachers
- teaching assistants
- SMSAs
- office staff
- Sports coaches
- trip leaders
- wraparound staff, where applicable
- supply staff, where relevant

Information will be shared on a need-to-know basis, with due regard to confidentiality and the safety of the child. Transition arrangements will ensure relevant information is passed to new teachers and settings.

## 13. Long-term medical absence

Where a pupil is absent for 15 school days or more for medical reasons, whether consecutively or cumulatively, the school will consider this a long-term medical absence.

In such cases, the school will work with parents/carers, relevant health professionals, the local authority and any other relevant professionals to plan support for the pupil. This may include maintaining contact and pastoral support, providing work or remote access where appropriate, phased return arrangements, referral for alternative provision or tuition where a child is too ill to attend school, and multi-agency planning.

## 14. Managing medicines

### 14.1 General principles

Prescription and non-prescription medicines will only be administered at school when it would be detrimental to the pupil's health or school attendance not to do so and the school has written parental consent. The exception is where a medicine has been prescribed to a pupil without the knowledge of the parents/carers.

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

### 14.2 Medicines accepted by the school

- in date
- labelled
- in the original container as dispensed by the pharmacist, except where alternative devices such as insulin pens or pumps are standard
- clearly including instructions for administration, dosage and storage

### 14.3 Delivery to school

Medication must be delivered to school by a parent/carer or responsible adult, not sent in a child's bag, unless there is agreed written permission for the pupil to carry their own medication. Medication will be signed in and recorded in the school's medication records.

### 14.4 Storage and access

All medicines will be stored safely in the First Aid room. However, medicines and devices such as inhalers, blood glucose testing equipment and adrenaline auto-injectors must be readily available and not locked away if immediate access is required. Pupils will know where their medication is stored and how to access it. Staff will know how to access emergency medication quickly. Arrangements will apply during PE, playtimes, trips, visits and clubs. The school will maintain an effective system for checking expiry dates of emergency medication.

### 14.5 Administration and records

Each request for administration of medication will be considered individually. Medication will not be administered without written parental consent and clear written instructions.

A medication record will be completed whenever medicine is administered, online using Medical Tracker, including pupil name, medicine name, dose, time/date, name/signature of the person administering and any observations. Parents/carers will be informed when appropriate, especially where emergency or non-routine medication is administered.

### 14.6 Disposal

Medicines no longer required will be returned to parents/carers for safe disposal.

## 15. Controlled drugs

Controlled drugs will be managed in accordance with legal requirements. A pupil who has been prescribed a controlled drug may have it in their possession if they are competent to do so and this is agreed in writing and recorded in their IHP.

All other controlled drugs will be kept securely, with access restricted to named staff. A record will be kept of doses administered, stock held, and receipt and disposal where relevant. Controlled drugs must remain easily accessible in an emergency.

## 16. Pupils managing their own medical needs

Where appropriate, pupils will be encouraged to take increasing responsibility for managing their own medicines and procedures. This will be discussed with parents/carers and reflected in the IHP where applicable.

Pupils may carry their own medicines and devices where this is considered safe and appropriate, parents/carers have provided written consent and the school agrees the arrangement.

Staff will not force a pupil to take medication or undertake a procedure if they refuse. Instead, staff will follow the agreed procedure in the IHP and inform parents/carers as soon as possible.

## 17. Unacceptable practice

The governing body is responsible for ensuring that there are sufficient arrangements to support pupils with medical conditions in school and for ensuring processes are in place to enable the policy to be developed and implemented.

Staff recognise their duty under the DfE statutory guidance Supporting Pupils at School at School with Medical Conditions and are committed to upholding best practice.

The following examples would be considered unacceptable practice:

- preventing pupils from easily accessing inhalers, adrenaline auto-injectors or other required medication
- assuming every child with the same condition requires the same treatment
- ignoring the views of parents/carers or pupils
- ignoring medical evidence or opinion without clear reason
- failing to put support in place in a timely way after notification of a medical condition
- sending pupils with medical conditions home frequently or preventing them from staying for normal activities unless this is clearly justified and agreed
- sending an unwell pupil to the office or medical room unaccompanied where this would be unsafe
- penalising a pupil for absence related to a medical condition, such as hospital appointments
- preventing a pupil from eating, drinking, resting or taking medication where this is needed to manage their condition
- requiring parents/carers to attend school routinely to provide medical support because the school has not made proper arrangements
- preventing pupils from participating in school trips, PE, sport or other activities without proper justification
- administering or asking a pupil to administer medication in a toilet
- failing to review arrangements after a serious incident or near miss
- failing to ensure emergency medication is readily accessible

## 18. Recording, reporting and learning from incidents and near misses

The school will maintain clear procedures for recording, reporting, reviewing and learning from medical incidents.

St Peter's C of E Primary School will use Medical Tracker, a digital first-aid and accident recording system for schools, to record first-aid incidents, accidents, medical emergencies and relevant near misses, alongside any additional safeguarding, health and safety or medication records required.

- any medical emergency requiring first aid, emergency medication or emergency services
- administration of emergency medication
- significant deterioration in a pupil's condition while in school
- any incident where procedures in an IHP were not followed

- any near miss where harm was avoided but there was a risk of harm, for example inaccessible medication, incorrect medication prepared, allergen exposure without reaction, delay in treatment or communication failure

Following a serious incident or near miss, the school will inform parents/carers as soon as reasonably practicable, review what happened, identify whether procedures were followed, update the pupil's IHP and/or risk assessments where needed, identify any training, communication or procedural improvements, and consider whether the issue should also be addressed under safeguarding, health and safety or local authority reporting procedures.

## 19. Emergency procedures

Staff will follow the school's normal emergency procedures, including calling 999 where required.

- what constitutes an emergency
- what immediate action must be taken
- where emergency medication/equipment is located
- who should be contacted
- when emergency services must be called

Where emergency medication is administered, it will be recorded and parents/carers will be informed as soon as possible. If a pupil needs to be taken to hospital, a member of staff will remain with the pupil until the parent/carer arrives, or accompany the pupil in the ambulance where appropriate and in line with emergency service advice.

## 20. Liability and indemnity

The governing board will ensure that the appropriate level of insurance is in place and that it appropriately reflects the school's level of risk. The school will ensure that insurance arrangements provide appropriate cover for staff who are acting in accordance with this policy and who are providing support to pupils with medical conditions, including the administration of medication and emergency response as required. The headteacher will ensure that staff are aware of the scope of this cover.

If the school uses local authority or Risk Protection Arrangement wording for insurance, the exact approved wording should be inserted on adoption.

## 21. Complaints

If parents/carers or pupils are dissatisfied with the support provided, they should discuss their concerns in the first instance with the headteacher or the named designated lead. If the issue is not resolved, the school's Complaints Policy should be followed.

## 22. Monitoring and review

This policy will be reviewed annually, sooner if there is a significant change in statutory guidance or school practice, and sooner following any serious incident or learning review where policy changes are required.

## Approval

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| **Approved by** | _____ |
| **Role** | _____ |
| **Date** | _____ |
| **Next review due** | September 2026 (or sooner on publication of revised DfE statutory guidance) |