

Mellor St Mary CE Primary School



*Believing, Learning &
Sharing Together*

Supporting Pupils with Medical Conditions Policy

Includes administering medicines in school

Academic Year 2026-27

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Statement of intent

Mellor St Mary CE Primary School wishes to ensure that pupils with medical conditions receive appropriate care and support at school, in order for them to have full access to education and remain healthy.

The Governing Board is committed to ensuring that pupils with medical conditions are properly supported so that they can access education safely, fully and inclusively. The school will comply with the statutory duty under Section 100 of the Children and Families Act 2014 and have regard to the Department for Education's *Supporting Pupils with Medical Conditions at School* guidance, together with the statutory *Allergy Safety in Schools* guidance introduced in 2026. Individual Healthcare Plans (IHPs) will be developed, implemented and reviewed in partnership with parents, healthcare professionals and pupils where appropriate.

The school will ensure that medicines are stored, administered and recorded safely in accordance with DfE guidance, that suitably trained staff are available to support pupils' medical needs, and that robust procedures are in place for managing emergencies, including anaphylaxis and the use of adrenaline auto-injectors. As part of our safeguarding responsibilities, all practice relating to medical conditions, medicines and allergy management will align with the principles set out in *Keeping Children Safe in Education (KCSIE) 2026*, ensuring that pupils' health, safety, wellbeing and access to learning remain paramount at all times

1 Key reference documents for the policy appendix

- **Keeping Children Safe in Education (KCSIE) 2026 (Statutory Guidance)** [\[schoolclerk.co.uk\]](https://www.schoolclerk.co.uk)
- **Allergy Safety in Schools (DfE Statutory Guidance, July 2026)** [\[gov.uk\]](https://www.gov.uk)
- **Supporting Pupils with Medical Conditions at School (DfE Statutory Guidance, pending update, current guidance remains in force until replaced)** [\[gov.uk\]](https://www.gov.uk)
- **Children and Families Act 2014, Section 100** [\[gov.uk\]](https://www.gov.uk), [\[vwv.co.uk\]](https://www.vwv.co.uk)
- **Human Medicines Regulations 2012 (administration of medicines in schools)**
- **The Special Educational Needs and Disability (SEND) Code of Practice: 0-25 Years**
- **Equality Act 2010 (including duties relating to disability and medical conditions)** [\[consult.ed...ion.gov.uk\]](https://www.consult.education.gov.uk), [\[gov.uk\]](https://www.gov.uk)

Ofsted places a clear emphasis on meeting the needs of pupils with special educational needs and disabilities (SEND), including children with medical conditions.

The school is committed to ensuring that parents/carers feel confident that we will provide effective support for their child's medical condition, and make the pupil feel safe.

The main aims of this policy are:

- To provide individualistic, appropriate support for all pupils with medical conditions.
- To make reasonable adjustments within the school to ensure pupils with medical conditions are included in daily activities, school trips and sporting events.
- To provide all parents/carers with the confidence that the school will provide effective support for their child and ensure their safety.
- To establish relationships with relevant local health services in the implementation of effective support, as well as valuing the views of parents/carers and pupils.
- To effectively manage absences caused by medical conditions, to limit the impact on a child's educational attainment.

The expectations are:

- parents will have confidence in the support provided by school
- there is a commitment that all relevant staff will be made aware of the child's condition
- procedures to be followed to support a pupil's medical condition should be clearly set out in the child's health care plan.
- cover arrangements are in place in case of staff absence or staff turnover to ensure someone is always available to support the child
- school seeks advice from healthcare professionals as well as listening to parents and the child.
- Individual health care plans will be reviewed annually or earlier if the child's needs change.
- No child should be put at risk

Signed by:

J.Embley-Peers

Headteacher

Date:

09.09.2026

P.Skupski

Chair of governors

Date

09.09.2027

Reviewed and approved by : Curriculum Committee (14.10.25)

1. Key roles and responsibilities

1.1. The LA is responsible for:

- Promoting cooperation between relevant partners and stakeholders regarding supporting pupils with medical conditions.
- Working with schools in order to encourage pupils with medical conditions to attend full-time.
- Providing support, advice and guidance to schools and their staff.
- Making alternative arrangements for the education of pupils who need to be out of school for 15 days or more due to a medical condition.
- Providing suitable training to school staff in supporting pupils with medical conditions to ensure that Individual Healthcare Plans (IHCP) can be delivered effectively.

1.2. The governing board is responsible for:

- Ensuring a named person, **J Embley-Peers Head teacher** has responsibility for the overall implementation of the Supporting Pupils with Medical Conditions Policy and procedures of Mellor St Mary CE Primary School. Reviewing this policy on an annual basis, and ensuring it does not discriminate on any grounds including, but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation.
- Handling complaints regarding this policy as outlined in the school's Complaints Policy.
- Ensuring that all pupils with medical conditions are able to participate fully in all aspects of school life.
- Ensuring that relevant training provided by the LA is delivered to staff members who take on responsibility to support children with medical conditions.
- Arranging appropriate cover in the event of staff absence or turnover to ensure someone is always available, and that supply staff are appropriately briefed.
- Ensuring that all relevant staff are made aware of pupils' individual conditions.
- Guaranteeing that information and teaching support materials regarding supporting pupils with medical conditions, are available to members of staff with responsibilities under this policy.
- Keeping written records of any and all medicines administered to [individual pupils](#) and [across the school population](#).
- Ensuring the level of insurance in place reflects the level of risk.

1.3. **The Headteacher is responsible for:**

- The day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and procedures of Mellor St Mary CE Primary School.
- Making any necessary changes to the policy, as discussed with the governing board upon review.
- Ensuring the policy is developed effectively with partner agencies.
- Making staff aware of this policy.

The Senco is responsible for:

- Liaising with healthcare professionals regarding the training required for staff with the School Business Manager.
- Making the relevant members of staff aware of a child's medical condition.
- Developing individual IHCPs.
- Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHCPs in normal, contingency and emergency situations.

- Contacting the school nursing service in the case of any child who has a medical condition.

The School Business Manager is responsible for:

- Ensuring the correct level of insurance is in place for teachers who support pupils in line with this policy.
- If necessary, facilitating the recruitment of a member of staff for the purpose of delivering the promises made in this policy.
- Organising first-aid training.
- Carrying out appropriate risk assessments when making reasonable adjustments for pupils with medical conditions, to ensure the inclusion of pupils in activities.

1.4. Staff members are responsible for:

- Taking appropriate steps to support children with medical conditions.
- Where necessary, making reasonable adjustments to include pupils with medical conditions into lessons.
- Administering medication, if they have agreed and are qualified to undertake that responsibility.
- Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, if they have agreed to undertake that responsibility.
- Familiarising themselves with procedures detailing how to respond when they become aware that a pupil with a medical condition needs help.

1.5. School nurses are responsible for:

- Notifying the school when a child has been identified as requiring support in school due to a medical condition.
- Liaising locally with lead clinicians on appropriate support.
- Supporting staff with implementing a child's IHCP, where necessary.

1.6. Parents and carers are responsible for:

- Keeping the school informed about any changes to their child/children's health.
- Completing a [parental agreement for school to administer medicine](#) form before bringing medication into school.
- Providing the school with the medication their child requires and keeping it up-to-date.
- Collecting any leftover medicine at the end of the course or year.
- Discussing medications with their child/children prior to requesting that a staff member administers the medication.

- Where necessary, developing an [IHCP](#) for their child in collaboration with the headteacher, other staff members and healthcare professionals.

1.7. Pupils are responsible for:

- Providing necessary information about how their medical condition affects them.
- Being actively involved in discussions about their medical support.
- Contributing to the development of, and complying with, their IHCP.
- Being sensitive to any other pupils with medical conditions.

2. Definitions

- 2.1. “Medication” is defined as any prescribed or over the counter medicine.
- 2.2. “Prescription medication” is defined as any drug or device prescribed by a doctor.
- 2.3. A “staff member” is defined as any member of staff employed at Mellor St Mary CE Primary School including teachers.

3. Training of staff

- 3.1. Teachers and support staff will receive training on the Supporting Pupils with Medical Conditions Policy as part of their new starter induction.
- 3.2. The school adopts a whole-school approach to training, ensuring that all staff employed by the school are aware of this policy and of their role when implementing the policy.
- 3.3. Teachers and support staff will receive regular and ongoing training, on an annual basis, or more frequent if deemed necessary as part of their development.
- 3.4. The clinical lead for this training is Gill Ross.
- 3.5. No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the responsibility, including administering medication.
- 3.6. No staff member may administer drugs by injection unless they have received training in this responsibility.
- 3.7. The Business Team will keep a record of training undertaken and a list of teachers qualified to undertake responsibilities under this policy.

4. The role of the child

- 4.1. Children who are competent will be encouraged to take responsibility for managing their own medicines and procedures, following a discussion with their parents/carers.
- 4.2. Where possible, pupils will be allowed to carry their own medicines and devices. Where this is not possible, their medicines will be located in an easily accessible location.
- 4.3. If pupils refuse to take medication or to carry out a necessary procedure, parents will be informed so that alternative options can be explored.
- 4.4. Where appropriate, pupils will be encouraged to take their own medication under the supervision of relevant staff.

5. Individual Healthcare Plans (IHCPs)

- 5.1. Where necessary, an IHCP will be developed in collaboration with the pupil, parents/carers, headteacher, special educational needs coordinator (SENCO) and medical professionals.
- 5.2. IHCPs will be easily accessible to those who need to refer to them, whilst also preserving confidentiality.
- 5.3. IHCPs will be reviewed on an annual basis, or when a child's medical circumstances change, whichever is sooner.
- 5.4. Where a pupil has an education, health and care (EHC) plan or special needs statement, the IHCP will be linked to it or become part of it.
- 5.5. Where a child is returning from a period of hospital education or alternative provision or home tuition, we will work with the LA and education provider to ensure that the IHCP identifies the support the child needs to reintegrate.
- 5.6. The school will develop transport health care plans for pupils with life-threatening conditions, which effectively manages home-to-school transport for the pupil.
- 5.7. **Staff must not give prescription medicines or undertake without appropriate training.** A first aid certificate does not constitute appropriate training in supporting children with medical conditions.
- 5.8. Whole school training will be arranged annually for some conditions such as anaphylaxis, diabetes, asthma and epilepsy.

6. Medicines

- 6.1. Where possible, it is preferable for medicines to be prescribed in frequencies that allow the pupil to take them outside of school hours.

- 6.2. No child will be given any prescription or non-prescription medicines without written parental consent, except in exceptional circumstances. Verbal consent must always be supported with written consent (letter or email only)
- 6.3. Where a pupil is prescribed medication without their parents'/carers' knowledge, every effort will be made to encourage the pupil to involve their parents while respecting their right to confidentiality.
- 6.4. No child under 16 years of age will be given medication containing aspirin without a doctor's prescription.
- 6.5. No medication will be given without first checking the maximum dosages and when the previous dosage was taken. Parents will be informed of any given medication.
- 6.6. Medicines MUST be **in date, labelled**, and provided in the **original container** (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered.
- 6.7. A maximum of four weeks supply of the medication may be provided to the school at one time.
- 6.8. Controlled drugs may only be taken on school premises by the individual to whom they have been prescribed. Passing such drugs to others is an offence which will be dealt with under our Drug and Alcohol Policy.
- 6.9. All medications will be stored safely in the Headteacher's office or staff room fridge. Inhalers will also be stored in individual classrooms.
- 6.10. Pupils will be informed of where they can access their medication. Where relevant, pupils will know who holds the key to the storage facility. Pupils will never be prevented from accessing their medication.
- 6.11. Medicines and devices such as asthma inhalers, blood glucose testing and adrenaline pens will always be readily available to pupils and will not be locked away.
- 6.12. **Mellor St Mary CE Primary School cannot be held responsible for side effects that occur when medication is taken correctly.**
- 6.13. Any medications left over at the end of the course will be returned to the child's parents.

7. Administering medication

- 7.1. Teachers and support staff will receive training on the administering medicine as part of their new starter induction and will receive regular ongoing training as part of their development.

- 7.2. Medications will only be administered at school if it would be detrimental to the child not to do so.
- 7.3. Prior to staff members administering any medication, the parents/carers of the child must complete and sign a parental agreement.
- 7.4. Staff members must only administer medication if accompanied by another staff member.
- 7.5. Staff members may refuse to administer medication. If a class teacher refuses to administer medication, the headteacher will delegate the responsibility to another staff member.
- 7.6. Where appropriate, pupils will be encouraged to take their own medication under the supervision of a teacher.
- 7.7. Written records will be kept of any medication administered to children, stating what, how, and the quantity administered, when and by whom.

8. Emergencies

- 8.1. Medical emergencies will be dealt with under the school's emergency procedures.
- 8.2. Where an IHCP is in place, it should detail:
 - What constitutes an emergency?
 - What to do in an emergency.
- 8.3. Pupils will be informed in general terms of what to do in an emergency, such as telling a teacher.
- 8.4. If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents arrive.

9. Performing first aid

- 9.1. The School Business Manager will ensure that an annual risk assessment of first-aid needs is undertaken, appropriate to the circumstances of the school and the supporting of pupils with medical conditions.
- 9.2. The School Business Manager is responsible for organising first-aid training.
- 9.3. New staff members are offered first-aid training as part of their induction.
- 9.4. Lunch-time supervisors will also undertake first-aid training.
- 9.5. The school has a first-aid cabinet, which can be found in the resource room. This cabinet contain a sufficient number of suitable provisions to enable the administration of first-aid.

- 9.6. First-aiders will be made aware of any pupils with medical conditions and treat them accordingly, should the need for first-aid arise.
- 9.7. First aiders will give immediate help to casualties with common injuries and those arising from specific hazards or medical conditions at the school and ensure that an ambulance or other professional medical help is called where appropriate.
- 9.8. The school has requested a defibrillator as part of their first aid equipment, in order to effectively manage any incidents where a person may experience sudden cardiac arrest.
- 9.9. The school has notified the local NHS service of its location (once installed).
- 9.10. The Headteacher will ensure that procedures are in place to report any major or fatal injuries without delay (e.g. by telephone), as required by the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). Other reportable injuries will be reported in no more than 10 days.

10. Reasonable adjustments

- 10.1. The school will meet its duties under the Equality Act 2010.
- 10.2. The school will make reasonable adjustments for pupils with medical conditions, including the provision of auxiliary aids.
- 10.3. With consideration to day trips, residential visits and sporting activities, the school will make reasonable adjustments to promote flexibility and encourage pupil participation. A list containing medical conditions and emergency contact details will be taken on the trip by the Trip Leader. Where there is particular concern, an additional adult will be provided to look after the child.
- 10.4. The school will conduct risk assessments prior to the arrangement of any of the above, to ensure planning arrangements take into account the inclusion of pupils with medical conditions.

11. Avoiding unacceptable practice

- 11.1. The school understands that the following behaviour is unacceptable:
 - Assuming that pupils with the same condition require the same treatment.
 - Preventing pupils from easily accessing their inhalers and medication.
 - Ignoring the views of the pupil and/or their parents/carers.
 - Ignoring medical evidence or opinion.
 - Sending pupils home frequently or preventing them from taking part in activities at school.
 - Sending the pupil to the medical room or school office alone or with an unsuitable escort, if they become ill.

- Penalising pupils with medical conditions for their attendance record where the absences relate to their condition.
- Making parents feel obliged or forcing parents to attend school to administer medication or provide medical support, including toilet issues.
- Creating barriers to children participating in school life, including school trips.
- Refusing to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

12. Insurance

- 12.1. Teachers who undertake responsibilities within this policy are covered by the school's insurance.
- 12.2. Full written insurance policy documents are available to be viewed by members of staff who are providing support to pupils with medical conditions. Those who wish to see the documents should contact the Senco.

13. Complaints

- 13.1. The details of how to make a complaint can be found in the Complaints Policy:

- Stage 1 - Complaint heard by staff member
- Stage 2 - Complaint heard by Headteacher
- Stage 3 – Complaint heard by governing bodies' complaints appeal panel (CAP)

Disability/Medical Needs & Educational Visits:

- The Governing Body at Mellor St Mary CE Primary School have adopted the Lancashire County Council Educational Visits Policy and Guidelines. The document, the accompanying Forms and Appendices, sets out the safety policy for off-site educational visits, participation in adventurous outdoor activities, and the arrangements for the implementation of the Policy. Where staff have concerns regarding the safety and wellbeing of individual children due to disabilities/medical needs advice should first be sought from the school's own Educational Visits Coordinators (EVC) (Mrs Embley- Peers or Mr Blackburn) or from Local Authority EVC technical advisers. In addition, we should seek parent views and medical advice from the School Nurse or child's GP (where appropriate) in order that we can make informed decisions.
- When planning a visit staff will therefore take all reasonable steps and will undertake
- reasonable adjustments to try and ensure that the visit is accessible to children with
- disabilities and medical needs. The school will ensure that when included in an outdoor visit a child is not put at substantial disadvantage. These factors

may include: the time and effort that might need to be expended by a disabled/medical needs child; the inconvenience, indignity or discomfort a disabled/medical needs child might suffer; the loss of opportunity or the diminished progress that a disabled/medical needs child may make in comparison with his or her peers who are not disabled or have medical needs.

Sporting Activities:

- Most children with medical conditions can participate in physical activities and extracurricular sport. Some children may need to take precautionary measures before or during exercise, and may also need to be allowed immediate access to their medicines such as asthma inhalers. Staff supervising sporting activities should consider whether risk assessments are necessary for some children. They should also be aware of relevant medical conditions and any preventative medicine that may need to be taken and emergency procedures. It is the Parent's responsibility to provide the school with this information.
- Individual Health Care Plans should include instructions as to how to manage a child in an emergency, and identify who has the responsibility in an emergency, for example if there is an incident in the playground.

REVIEW Date:

The policy will be reviewed every 3 years

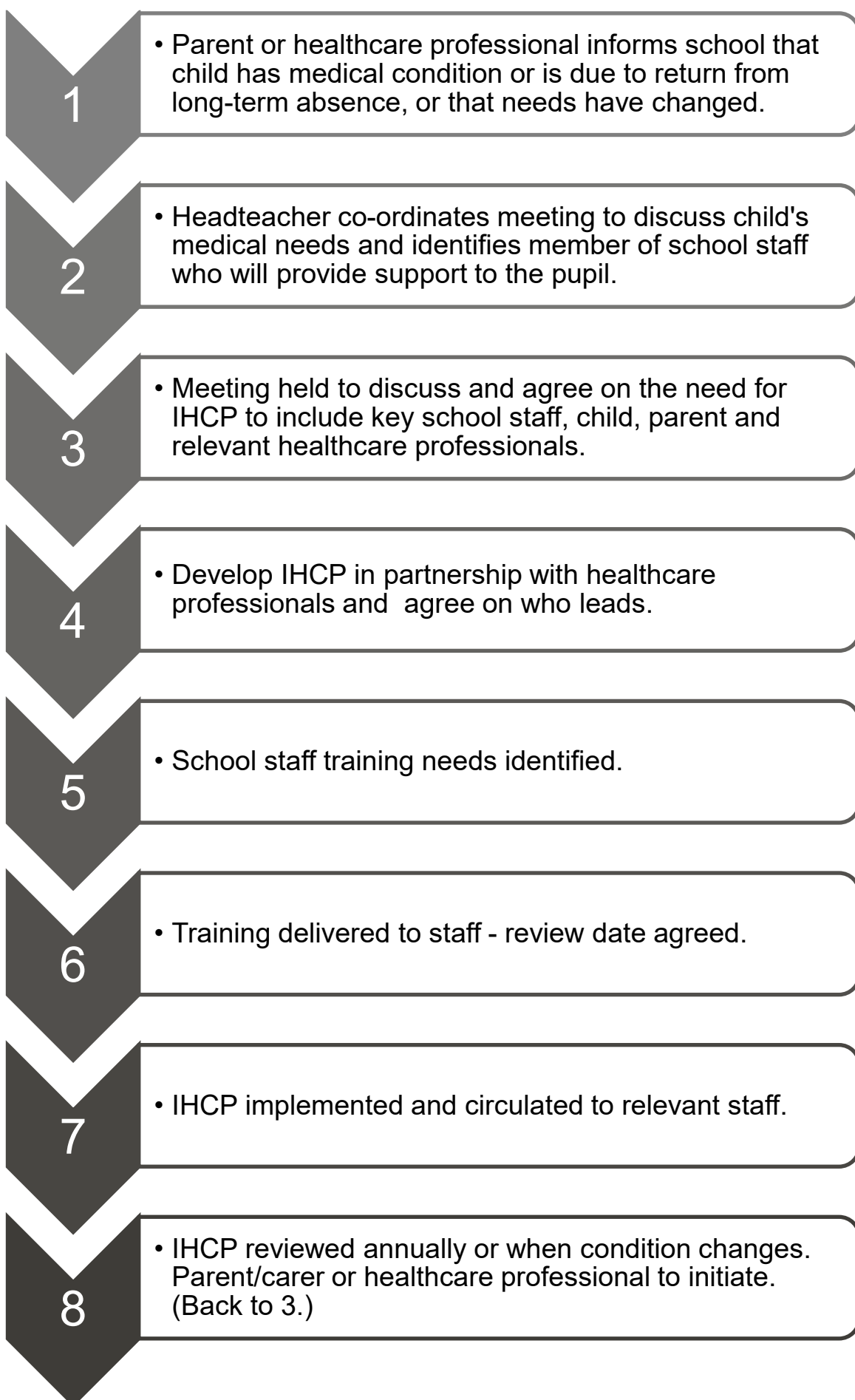
Signed: J.Embley-Peers (Head teacher)

Signed: P Skupski (Chair of Governors)

Date: 09.09.2025

Next review: Academic year 2027-28

Appendix 1 - Individual healthcare plan implementation procedure



Appendix 2 - Individual healthcare plan template



Mellor St Mary CE Primary School

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Individual Health Care Plan

Child's name:

Group/class/form:

Date of birth:

Child's address:

Medical diagnosis or condition:

Date:

Review date:

Family contact information

Name:

Phone number (work):

(home):

(mobile):

Name:

Relationship to child:

Phone number (work):

(home):

(mobile):

Clinic/hospital contact

Name:

Phone number:

G.P.

Name:

Phone number:

Who is responsible for providing support in school?

Describe medical needs and give details of child'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 pupil’s educational, social and emotional needs:

Arrangements for school visits/trips:

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:

Appendix 3 - Parental agreement for a school to administer medicine template



Mellor St Mary CE Primary School

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Medicine administering form The school will not give your child medicine unless you complete and sign this form.

Date for review to be initiated by:

Name of child:

Date of birth:

Group/class/form:

Medical condition or illness:

Medicine

Name/type of medicine
(as described on the container):

Expiry date:

Dosage and method:

Timing:

Special precautions/other instructions:

Are there any side effects that the
school needs to know about?

Self-administration – Y/N:

Procedures to take in an emergency:

NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name:

Daytime telephone number:

Relationship to child:

Address:

I understand that I must deliver the
medicine personally to:

Add name of agreed member of staff

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____

Date _____

Appendix 4 - Record of medicine administered to an individual child template



Mellor St Mary CE Primary School

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Record of medicine administered to an individual child

Name of child:

Date medicine provided by parent:

Group/class/form:

Quantity received:

Name and strength of medicine:

Expiry date:

Quantity returned:

Dose and frequency of medicine:

Staff signature _____

Signature of parent _____

Daily Record:

Date:

Time given:

Dose given:

Name of member of staff:

Staff initials:

Date:

Time given:

Dose given:

Name of member of staff:

Staff initials:

Date:
Time given:
Dose given:
Name of member of staff:
Staff initials:

Date:
Time given:
Dose given:
Name of member of staff:
Staff initials:

Date:
Time given:
Dose given:
Name of member of staff:
Staff initials:

Date:
Time given:
Dose given:
Name of member of staff:
Staff initials:

Record of medicine administered to all children

[illegible]

Appendix 6 - Staff training record



Mellor St Mary CE Primary School

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Administration of medicines

Name of staff member	
Type of training received:	
Date of training completed:	
Training provided by:	
Profession and title:	

I confirm that (add name of member of staff) has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated by (add name of member of staff).

Trainer's signature: _____ Date: _____

I confirm that I have received the training detailed above.

Staff signature: _____

Date: _____

Suggested review date: _____

Appendix 7 - Contacting emergency services



Mellor St Mary CE Primary School

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Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

- Your telephone number – 01254 812581
- Your name.
- Your location as follows:
Brundhurst Fold
Mellor
Lancashire
BB2 7JL
- The exact location of the patient within the school.
- The name of the child and a brief description of their symptoms.
- The best entrance to use and state that the crew will be met and taken to the patient.

Appendix 8 - Incident reporting form



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[illegible]