





Supporting Pupils with Medical Conditions



Reviewed: September 2026



Next Review: September 2027

1. Policy statement and purpose

Green Park Community Primary School is committed to supporting pupils with medical conditions so that they can access education safely, fully and with the same opportunities as their peers. The school will work in partnership with pupils, parents/carers, governing body members, school staff and appropriate healthcare professionals to understand and meet individual medical needs.

The school recognises that medical conditions may be short-term or long-term, may fluctuate, and may affect a pupil's physical health, wellbeing, attendance, learning and participation. Support will therefore be based on the needs of the individual pupil rather than solely on their diagnosis.

The school will make reasonable adjustments where required and will not discriminate against disabled pupils. Pupils with medical conditions will not be prevented from taking part in school activities, educational visits, physical education or residential experiences because of their condition where appropriate arrangements and risk assessments can make participation safe.

2. Legal and statutory framework

This policy has been updated with reference to the current requirements and guidance applying to schools in England, including:

Children and Families Act 2014, section 100 – duty to make arrangements to support pupils with medical conditions.

Department for Education, Supporting pupils with medical conditions at school – statutory guidance (current guidance remains in force pending the planned revision).

Children's Wellbeing and Schools Act 2026 – new statutory allergy safety duties for schools, including the requirement for an allergy safety policy.

Department for Education, Allergy safety in schools – statutory guidance, published July 2026.

Equality Act 2010 – including duties relating to disability discrimination and reasonable adjustments.

SEND Code of Practice: 0 to 25 years.

Keeping children safe in education 2026, where relevant to safeguarding and emergency arrangements.

Relevant NHS, local authority and healthcare-professional guidance relating to individual medical conditions and medicines.

The school will also have regard to any relevant local authority guidance and current clinical advice.

Where national guidance is updated, this policy will be reviewed and amended as necessary.

3. Aims

To ensure pupils with medical conditions are supported safely and effectively in school.

To enable pupils to access the full curriculum and wider school life as far as reasonably possible.

To ensure staff understand their responsibilities and receive appropriate training before undertaking medical support.

To ensure individual healthcare plans (IHPs) are developed and reviewed where appropriate.

To ensure medicines and medical equipment are stored, administered, recorded and disposed of safely.

To ensure appropriate arrangements are in place for emergencies, educational visits, physical activity and residential visits.

To work in partnership with pupils, parents/carers and healthcare professionals.
To protect pupils' dignity, confidentiality and right to participate.

4. Definitions and individual needs

Medical needs may broadly include:

Short-term conditions where a pupil may require temporary medication or adjustments during the school day.

Long-term or complex conditions requiring ongoing support, medication, monitoring, treatment or emergency intervention.

Some pupils with medical conditions may also be disabled under the Equality Act 2010 or have special educational needs. Where applicable, this policy should be read alongside the school's SEND policy, SEN Information Report and relevant Education, Health and Care Plan (EHCP).

5. Individual Healthcare Plans (IHPs)

An IHP will be considered where a pupil has a long-term, complex or significant medical need, requires prescribed medication or healthcare procedures in school, requires additional support or adjustments, or may need emergency intervention. Not every pupil with a medical condition will necessarily require an IHP; this will be determined on an individual basis.

Where an IHP is appropriate, it should be developed in partnership with the pupil where appropriate, parents/carers, the school and relevant healthcare professionals. It should, where relevant, include:

The pupil's medical condition, needs, symptoms and triggers.

Medication, dosage, timing and method of administration.

What support is required during the school day and during activities or visits.

What constitutes an emergency and the action staff should take.

Emergency contact arrangements.

The roles and responsibilities of staff.

Arrangements for physical education, educational visits, residentials, clubs and other activities.

Any arrangements for the pupil to manage their own condition or carry medication.

Any reasonable adjustments required.

Arrangements for sharing information on a need-to-know basis.

IHPs will be reviewed at least annually and sooner where the pupil's needs change, following a significant incident, or where new clinical advice is received. The plan should be accessible to staff who need it while maintaining confidentiality.

6. Roles and responsibilities

Governing Body

Ensure arrangements are in place to support pupils with medical conditions.

Ensure this policy is reviewed regularly and is readily accessible to parents/carers and staff.

Ensure sufficient appropriately trained staff are available to support pupils, including contingency arrangements for absence and staff turnover.

Ensure the school has appropriate insurance and liability arrangements.

Monitor the effectiveness of the policy and the school's arrangements.

Headteacher / Senior Leadership Team

Have overall responsibility for implementing this policy.

Ensure staff are aware of the policy and understand their responsibilities.

Ensure staff who need to know are informed about pupils' medical needs, while respecting confidentiality.

Ensure sufficient trained staff are available to implement IHPs and respond to emergencies.

Oversee the development, implementation and review of IHPs.

Liaise with parents/carers, the school nursing service and other healthcare professionals as appropriate.

Ensure appropriate arrangements are in place for educational visits, activities and emergencies.

School staff

Take reasonable steps to support pupils with medical conditions and follow relevant IHPs and school procedures.

Staff may be asked to administer medicines or support healthcare procedures, but will not be required to do so unless appropriately trained and willing.

Know what action to take in an emergency and how to obtain help.

Maintain confidentiality and share medical information only with those who need it.

Report concerns, incidents, medication errors and significant changes in a pupil's condition promptly.

Parents/carers

Provide accurate, sufficient and up-to-date information about their child's medical condition.

Work with the school and healthcare professionals to develop and review IHPs.

Provide prescribed medicines and medical equipment that the school has agreed to hold, ensuring they are in date and correctly labelled.

Inform the school promptly when medication, treatment, contact details or medical needs change.

Ensure a parent/carer or nominated emergency contact can be contacted when required.

Pupils

Where appropriate, contribute to discussions about their medical support and IHP.

Be supported to develop age-appropriate independence and self-management skills.

Follow agreed arrangements for managing their condition and medication.

Healthcare professionals

Provide appropriate clinical advice, information and training where required and available.

Contribute to IHPs and reviews where appropriate.

Support the school and family to understand the pupil's condition, treatment and emergency arrangements.

7. Staff training and support

Staff supporting pupils with medical conditions will receive suitable training or instruction before undertaking the relevant responsibility. Training will be proportionate to the pupil's needs and may be

provided by a school nurse, specialist nurse, other appropriately qualified healthcare professional or another competent person.

Training needs will be assessed regularly and following changes to a pupil's condition or treatment.

Training records will be maintained, including the staff member, training completed and date of review or renewal where applicable.

Temporary, supply and agency staff will be given appropriate information about relevant medical procedures and emergency arrangements.

Staff will not undertake a healthcare procedure for which they have not received appropriate training or instruction.

The school will maintain sufficient trained staff to provide continuity during absence and staff turnover.

8. Medication and healthcare procedures

Medication will only be administered by school staff where there is an appropriate agreement/parental consent and the school considers that administration is necessary to support the pupil's health or attendance. Staff must be appropriately trained and willing to administer the medication.

Medication should normally be supplied in the original container, clearly labelled and within its expiry date, with the prescribing instructions.

Staff must check the pupil, medicine, dose, route and timing before administration and check when the previous dose was given where relevant.

The school will keep an accurate record of medication administered, including date, time, dose and staff involved.

The school will not alter a prescribed dose on parental instruction alone. Any change to prescribed treatment should be supported by appropriate medical/prescribing information.

Where clinically appropriate, parents/carers should discuss with the prescriber whether doses can be scheduled outside school hours.

Unused or out-of-date medicines will be returned to parents/carers for safe disposal or disposed of through an appropriate route.

Needles and other sharps will be disposed of using suitable sharps containers and in line with relevant local arrangements.

Controlled drugs will be stored and managed securely and administered only by appropriately trained staff in accordance with the pupil's arrangements.

9. Non-prescription medicines

The school will not routinely administer non-prescription medicines. Any exception must be agreed in advance by the school and be consistent with the pupil's individual needs, parental consent, relevant clinical advice and school procedures. Staff will not give medicines where they are unsure of the correct dose, identity of the medicine or circumstances for administration.

10. Storage and access to emergency medication

Emergency medication and medical equipment must be readily accessible wherever the pupil is, including classrooms, outdoor areas, physical education, educational visits and residential activities. Emergency medication must not be stored in a way that prevents prompt access.

Medication will be stored securely and appropriately, taking account of temperature and manufacturer instructions.

Emergency medication such as prescribed inhalers and adrenaline auto-injectors (AAIs) will be immediately accessible to authorised staff and, where appropriate, to competent pupils.

Pupils who are competent to carry and use their own medication will be supported to do so in accordance with their IHP and agreement with parents/carers and relevant professionals.

Medication will be checked periodically for expiry and condition.

Parents/carers will be asked to replace medication before it expires or is used.

11. Allergy safety

From September 2026, schools in England are subject to new statutory allergy safety duties. Green Park Community Primary School will maintain a separate Allergy Safety Policy and will review it at least annually, publicise it to staff and pupils/parents and publish it on the school website, in accordance with the Children's Wellbeing and Schools Act 2026 and the Department for Education's Allergy safety in schools statutory guidance.

Pupils with allergies will have their individual needs identified and supported, including through an IHP where appropriate.

Relevant staff will receive appropriate allergy awareness and emergency response training.

The school will maintain arrangements for the safe storage and use of prescribed adrenaline auto-injectors.

The school will follow the current statutory arrangements for spare/backup adrenaline devices where applicable.

Allergy incidents and serious near misses will be recorded and reviewed so that lessons can be learned and arrangements improved.

This section should be read alongside the school's separate Allergy Safety Policy and any pupil-specific IHP/allergy management plan.

12. Emergency procedures

All staff must know how to summon emergency assistance. Staff must not delay calling 999 when a pupil's condition requires urgent medical attention.

Follow the pupil's IHP/emergency plan where available.

Call 999 where the condition is life-threatening or urgent medical assistance is required.

Administer emergency medication in accordance with the pupil's IHP and staff training, where appropriate.

Contact the parent/carer or emergency contact as soon as reasonably practicable.

Provide relevant medical information and the pupil's IHP to emergency services where appropriate.

A member of staff, preferably known to the pupil, should accompany the pupil to hospital where required until a parent/carer arrives.

Staff should not transport a pupil to hospital in their own vehicle.

Following an emergency, the school will record the incident, inform relevant people, review the arrangements and update the IHP or risk assessment where necessary.

13. Educational visits, physical education and activities

Pupils with medical conditions should be enabled to participate in educational visits, physical education, clubs, residential visits and other activities wherever reasonably possible. A risk assessment will consider the pupil's individual needs and any additional medication, equipment, supervision or adjustments required.

Emergency medication must accompany the pupil and remain accessible.

A suitably trained member of staff will be identified where a pupil requires medical support.

Staff will consider potential triggers and how these can be reduced or avoided.

Pupils will not be required to participate in an activity when they are medically unfit to do so.

Arrangements for overnight stays will be planned in advance and reflected in the relevant IHP/risk assessment.

14. Attendance, learning and reasonable adjustments

The school recognises that medical conditions may affect attendance, concentration, stamina and learning. Pupils will not be unfairly penalised because of absence arising from a medical condition. Where medical needs affect learning, the school will consider appropriate support and reasonable adjustments and will involve the SENCO where appropriate.

15. Confidentiality and information sharing

Medical information is sensitive personal information and will be handled confidentially. Information will be shared on a need-to-know basis with staff and professionals who require it to support the pupil safely. Relevant information may be shared in an emergency where necessary to protect the pupil's health and safety or where required by law.

16. Record keeping, incidents and review

The school will maintain appropriate records of medical conditions, IHPs, parental consents, medication administered and relevant staff training.

Records will be stored securely and accessed only by authorised individuals.

Medication errors, serious incidents and relevant near misses will be recorded, reported and reviewed.

The school will review incidents to identify whether changes to procedures, training, risk assessments or IHPs are required.

IHPs will be reviewed at least annually and sooner if the pupil's needs change.

This policy will be reviewed annually, or sooner where legislation, statutory guidance or local arrangements change.

17. Monitoring and evaluation

The Headteacher and Governing Body will monitor the implementation and effectiveness of this policy. Feedback may be sought from pupils, parents/carers, staff, governors and relevant healthcare professionals. The views and experiences of pupils with medical conditions will inform review and improvement.

18. Related school policies

Allergy Safety Policy
First Aid Policy
SEND Policy and SEN Information Report
Safeguarding and Child Protection Policy
Educational Visits Policy
Health and Safety Policy
Supporting Attendance Policy
Equality Information and Equality Objectives
Data Protection / Privacy Notice
Behaviour and Anti-Bullying Policy

19. Policy approval and review

Policy	Supporting Pupils with Medical Conditions Policy
Approved by	Staff and Governing Body
Reviewed / updated	September 2026
Next review	September 2027

20. Key external references

Children and Families Act 2014, section 100:

<https://www.legislation.gov.uk/ukpga/2014/6/section/100>

Supporting pupils with medical conditions at school – DfE statutory guidance:

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

Allergy safety in schools – DfE statutory guidance:

<https://www.gov.uk/government/publications/allergy-safety-in-schools>

Equality Act 2010: <https://www.legislation.gov.uk/ukpga/2010/15/contents>

SEND Code of Practice: 0 to 25 years: <https://www.gov.uk/government/publications/send-code-of-practice-0-to-25>

Keeping children safe in education 2026: <https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>

Update note: The Department for Education confirmed in July 2026 that the existing statutory guidance on supporting pupils with medical conditions remains in force while revised guidance is developed. The new statutory allergy safety requirements and dedicated DfE allergy guidance have been incorporated into this version.

Appendix 1

Model process for developing individual healthcare plans



