



Medical Needs Policy

The Beeches Primary School

Version 7.0 | September 2026

Policy owner	Headteacher / Senior Leadership Team
Version	7.0
Approval date	September 2026
Next review	September 2027, or sooner if statutory guidance changes
Approval body	Governing Body

Policy status: This policy should be read alongside the school Allergy Safety Policy, First Aid Policy, SEND Policy, Educational Visits procedures, Data Protection Policy and Complaints Policy.

1. Policy statement and aims

The Beeches Primary School is committed to ensuring that pupils with medical conditions are properly supported so that they have full access to education, including physical education, school visits and extracurricular activities. The school will work collaboratively with pupils, parents/carers and relevant healthcare professionals so that individual needs are understood and safely supported.

The school will make arrangements to support pupils with medical conditions in accordance with section 100 of the Children and Families Act 2014 and will have regard to the Department for Education statutory guidance Supporting pupils at school with medical conditions.

- Ensure pupils with medical conditions can participate fully and safely in school life.
- Provide clear arrangements for managing medicines and responding to emergencies.
- Use Individual Healthcare Plans (IHCPs) where these are required to ensure appropriate support.
- Ensure relevant staff receive suitable information, instruction and training.
- Promote pupil dignity, independence, inclusion and wellbeing.

2. Legislation and statutory guidance

This policy has been prepared with regard to the Children and Families Act 2014, in particular section 100, the Equality Act 2010, the Health and Safety at Work etc. Act 1974, and the Department for Education statutory guidance Supporting pupils at school with medical conditions.

For allergies and anaphylaxis, the school has a separate Allergy Safety Policy reflecting the Children's Wellbeing and Schools Act 2026 and the Department for Education statutory guidance Allergy safety in schools (July 2026). Detailed allergy arrangements are not duplicated in this policy.

The Department for Education consulted in 2026 on revised general medical-conditions guidance. At the date of approval of this policy, revised general guidance had not yet been published. This policy will therefore be reviewed sooner than the scheduled review date if new statutory medical-conditions guidance is issued.

3. Scope

This policy applies to pupils with short-term and long-term medical needs during the school day and during school-organised activities, including educational visits, residential visits, physical education and extracurricular activities. It also applies to staff who support pupils with medical needs.

4. Equality, inclusion and safeguarding

Some medical conditions may meet the definition of disability under the Equality Act 2010. Where this applies, the school will comply with its duties, including making reasonable adjustments and avoiding discrimination. Medical support will be planned so that pupils are not unnecessarily excluded from education or wider school activities.

A medical condition does not remove or replace the school's safeguarding responsibilities. If information relating to a pupil's health gives rise to a safeguarding concern, the school's safeguarding procedures will be followed.

5. Roles and responsibilities

5.1 Governing Body

The Governing Body is responsible for ensuring that arrangements are in place to support pupils with medical conditions and for having regard to statutory guidance. It will ensure that this policy is implemented effectively, sufficient staff are appropriately trained, appropriate insurance arrangements are in place and pupils with medical conditions are supported to access education and school activities.

5.2 Headteacher

- Implement this policy and ensure that appropriate school procedures are in place.
- Ensure sufficient trained staff are available, including appropriate contingency arrangements for absence and staff turnover.
- Ensure staff who need to know are appropriately informed of a pupil's medical condition and agreed support.
- Oversee the development and review of IHCPs, delegating coordination as appropriate.
- Contact the school nursing service or relevant healthcare professional where appropriate when a pupil has a medical condition that may require support in school.
- Ensure risk assessments and emergency arrangements take account of relevant medical needs.

5.3 School staff

Any member of staff may be asked to provide support to pupils with medical conditions as part of the school's arrangements. Staff must not undertake a medical procedure or administer medication for which they have not received the information, instruction or training required to do so safely. Staff should know how to obtain help in an emergency and follow the pupil's IHCP or emergency plan where one is in place.

5.4 Parents and carers

- Provide the school with accurate and up-to-date information about their child's medical condition and treatment.
- Inform the school promptly of changes to medication, dosage, treatment or emergency contacts.
- Provide medicines and equipment in accordance with this policy and collect expired or no-longer-required medicines.
- Participate in developing and reviewing the IHCP where one is required.
- Ensure their child is well enough to attend school, while working with the school to minimise avoidable absence.

5.5 Pupils

Pupils will be involved in discussions about their medical support where appropriate to their age, maturity and understanding. Pupils who are competent to manage elements of their own healthcare will be supported to do so safely.

5.6 Healthcare professionals and local authority

Relevant healthcare professionals may advise on a pupil's medical needs, IHCP, training and emergency arrangements. The local authority, where it is the employer, retains its relevant health and safety responsibilities.

6. Identifying pupils with medical conditions

The school will seek medical information at admission and will ask parents/carers to notify the school promptly when a medical condition is diagnosed or changes. Information will be reviewed as needed and at appropriate transition points. Arrangements will be put in place as soon as reasonably practicable when a pupil enters school with an existing condition or receives a new diagnosis.

7. Individual Healthcare Plans (IHCPs)

Not every pupil with a medical condition will require an IHCP. The need for a plan will be considered in light of the complexity, variability and potential impact of the condition, the level of support required and relevant professional advice. Where an IHCP is required, it will be developed in partnership with parents/carers, the pupil where appropriate, school staff and relevant healthcare professionals.

An IHCP may include, as relevant:

- The medical condition, triggers, signs, symptoms and treatments.
- The pupil's resulting needs, including medication, dose, side effects, storage and other treatments or equipment.
- Dietary, environmental, mobility, toileting or access requirements.
- Specific support for educational, social and emotional needs, including managing condition-related absence.
- The level of support required and who will provide it.
- Training requirements and any competency assessment required for staff.
- Who needs access to the information and arrangements for confidentiality.
- Arrangements for self-management or carrying medication.
- Arrangements for school trips, PE and extracurricular activities.
- What constitutes an emergency, the action to take, what not to do and whom to contact.

IHCPs will be reviewed at least annually, or earlier if needs change, treatment changes, an incident or near miss identifies a need for review, or the pupil, parent/carers, school or healthcare professional considers a review necessary.

8. Staff information, training and competency

Relevant staff will receive sufficient information about medical conditions and emergency procedures to fulfil their responsibilities safely. Condition-specific or procedure-specific training will be arranged where required. Where competency needs to be demonstrated, staff will not undertake the procedure independently until this has been confirmed by an appropriate person. Records of relevant training will be retained.

Information will also be made available, as appropriate, to supply staff, midday supervisors, wraparound staff, volunteers and staff leading visits or activities. No pupil's safety should depend on one named member of staff being present.

9. Managing medicines in school

Medicines will normally be administered at school only when it would be detrimental to a pupil's health or school attendance not to do so. Where possible, parents/carers may discuss with the prescriber whether dosing can be arranged outside school hours, but pupils will not be denied necessary medication solely because it is required during the school day.

Except in an emergency where the law permits immediate life-saving treatment, medicines will be administered only with appropriate written parental consent and in accordance with the prescriber's instructions where prescribed.

Prescribed medicines should be provided in the original container as dispensed by a pharmacist or other dispensing healthcare professional, clearly labelled for the pupil with relevant instructions. The school will not routinely alter a prescribed dose solely on verbal parental instruction.

Before administering a medicine, staff will check, as applicable:

- The pupil's identity.
- The name of the medicine.
- The prescribed or agreed dose and method of administration.
- The time/frequency and whether a previous dose has been given.
- The expiry date.
- Instructions on the label, container, consent form or healthcare plan.

The school may administer agreed non-prescription medicines where this is permitted by school procedure and written parental consent has been obtained. The procedure will specify the medicine, dose, minimum dosing interval, maximum frequency, relevant contraindications and recording/notification requirements. Aspirin will not be given to a pupil under 16 unless prescribed by a doctor.

10. Self-management

Pupils who are sufficiently competent will be encouraged to take responsibility for managing their own medicines and procedures, following discussion with parents/carers and relevant healthcare professionals where appropriate. Arrangements, including whether medication is carried by the pupil or safely stored nearby, will be recorded in the IHCP where one is in place. Emergency medication must remain readily accessible.

11. Storage, access and disposal of medicines

Medicines will be stored securely and in accordance with the manufacturer's or prescriber's instructions, while ensuring that emergency medicines can be accessed without avoidable delay. Medicines requiring refrigeration will be stored appropriately. Access will be limited to those who need it, except where a pupil has agreed self-management arrangements.

Controlled drugs will be stored securely in a non-portable locked container, with access limited to authorised staff. Administration will be recorded. A pupil who is competent may carry their own controlled drug where this has been appropriately agreed and risk assessed.

Parents/carers will normally be asked to collect medicines that are expired or no longer required. Where this is not possible, disposal will be arranged safely through an appropriate route. Sharps will be disposed of in an approved sharps container.

12. Record keeping

The school will maintain accurate records of medicines administered. Records will identify, as appropriate, the pupil, medicine, dose, date and time, and the member of staff responsible. Refusal, omission, error or other relevant issue will also be recorded and followed up appropriately. Records will be stored securely in accordance with data protection and records-management arrangements.

13. Refusal, missed doses and medication errors

A pupil will not be forced to take medicine. If a pupil refuses, staff will follow the agreed plan, record the refusal and inform parents/carers promptly. If the medicine is essential or the pupil's condition gives cause for concern, staff will seek urgent medical advice or call 999 as appropriate.

Any medication error, missed essential dose or suspected adverse reaction will be dealt with promptly, with medical advice sought where required, parents/carers informed, and the incident recorded and reviewed.

14. Emergency procedures

All staff should know how to summon emergency assistance. Where a pupil has an IHCP or condition-specific emergency plan, relevant staff will know how to access and follow it. In a medical emergency, staff will call 999 without delay where indicated and provide first aid or emergency medication within their training and competence. Parents/carers will be contacted as soon as practicable, but contact with a parent will not delay emergency treatment.

A pupil who becomes acutely unwell will not be sent unaccompanied to the school office or medical area where this would create a risk.

15. Asthma and the school emergency salbutamol inhaler

Pupils with asthma should have ready access to their prescribed reliever inhaler in accordance with their individual arrangements. The school may hold emergency salbutamol inhalers for use in accordance with current government guidance and the school's emergency inhaler protocol.

The protocol will cover supply, storage, checking and replacement of inhalers and spacers; parental consent and eligibility; staff awareness; administration; recording; notifying parents/carers following use; and action to

take during an asthma attack. The school emergency inhaler is a back-up and does not replace a pupil's own prescribed inhaler.

16. Allergy and anaphylaxis

The school's arrangements for allergy prevention, allergic reactions and anaphylaxis, including use of prescribed and spare adrenaline auto-injectors (AAIs), are contained in the separate Allergy Safety Policy and individual allergy healthcare plans. The school will follow the Department for Education statutory guidance Allergy safety in schools and relevant Department of Health and Social Care guidance on emergency AAIs. The school's spare AAIs do not replace a pupil's own prescribed devices.

17. Physical education, school visits and extracurricular activities

Pupils with medical conditions will be supported to participate as fully as possible in PE, educational visits, residential visits and extracurricular activities. Staff planning activities will consider reasonable adjustments, relevant risk assessments, access to medicines and equipment, healthcare information, emergency contacts and staff training. A medical condition alone will not be used as a reason to exclude a pupil from an activity where safe and reasonable arrangements can be made.

18. Unacceptable practice

It is generally unacceptable practice to:

- Prevent pupils from readily accessing their inhalers or other medication and administering it when and where necessary.
- Assume that every pupil with the same condition requires the same treatment.
- Ignore the views of the pupil or parent/carer, or ignore relevant medical evidence or opinion without good reason.
- Send a pupil who becomes ill to the school office or medical room alone where this would create a risk.
- Penalise pupils where their attendance is affected by their medical condition, for example by denying opportunities because of condition-related absence.
- Prevent pupils from drinking, eating, taking toilet or other breaks whenever required to manage their condition effectively.
- Require parents/carers, as a routine condition of attendance, to attend school to administer medication or provide medical support that the school should reasonably arrange.
- Prevent or create unnecessary barriers to participation in trips, visits, PE or extracurricular activities because of a medical condition.

19. Medical incidents and near misses

Significant medical incidents and near misses will be recorded and reviewed. Where appropriate, the school will identify learning and make changes to individual arrangements, IHCPs, risk assessments, equipment, training or procedures. Safeguarding, health and safety, data-protection and reporting requirements will be followed where applicable.

20. Confidentiality and information sharing

Medical information will be treated confidentially and shared only with those who need it to fulfil responsibilities for the pupil's health, safety, wellbeing and education, or where there is another lawful basis for disclosure. Relevant staff must have sufficient information to respond safely to foreseeable needs and emergencies. Records will be stored and handled in accordance with the school's data-protection arrangements.

21. Transition and changes in need

Medical arrangements will be reviewed when a pupil joins the school, moves class or phase, develops a new condition, has a significant change in treatment or needs, or prepares to transfer to another setting. Relevant information will be shared securely and promptly with staff who need to know, and with receiving settings in accordance with data-protection requirements and appropriate information-sharing arrangements.

22. Complaints

Parents/carers or pupils who are dissatisfied with the support provided should raise the matter with the school in the first instance. If the concern is not resolved, they may use the school's published complaints procedure. Urgent health or safeguarding concerns will be addressed immediately through the appropriate procedure and will not wait for the conclusion of a complaint.

23. Monitoring and review

The Headteacher will oversee implementation of this policy and report significant issues to the Governing Body as appropriate. The policy will be reviewed at least annually and sooner where changes in legislation or statutory guidance, significant incidents, identified risks or changes in school practice require this.

24. Related policies and guidance

- Allergy Safety Policy.
- Health and Safety Policy.
- SEND Policy and Accessibility Plan.
- Positive Handling Policy
- Educational Visits Policy.
- GDPR Data Protection Policy.
- Complaints Procedures Policy.
- Department for Education: Supporting pupils at school with medical conditions (statutory guidance).
- Department for Education: Allergy safety in schools (statutory guidance, July 2026).
- Department of Health and Social Care: Guidance on the use of emergency salbutamol inhalers in schools.
- Department of Health and Social Care: Guidance on the use of adrenaline auto-injectors in schools.

Version control

Date	By	Version	Changes
September 2026	School leadership	7.0	Full policy update:

			legislation/guidance references, governance, IHCPs, equality, medicines, training, emergency arrangements, asthma, allergy cross-reference, incidents and near misses, information sharing and unacceptable practice.
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