

Trinity St Mary's Supporting Pupils with Medical Conditions Policy

2026-2027



'For I will restore health unto thee, and I will heal thee of thy wounds.'

Jeremiah 30:17



The Diocese of
Southwark



Policy Lead: Lynn Anderson (Headteacher)

Designated Allergy Safety Lead: Lynn Anderson (Headteacher)

Designated Safeguarding Lead: Lynn Anderson (Headteacher)

Reviewed: September 2026

Next Review Date: September 2027 (or earlier if statutory guidance changes)

Governors responsible for oversight: Hayley Van Den Bergh & Diane Holmes

Approved by: Governing Body

Purpose and commitment

Trinity St Mary's CE Primary School is committed to ensuring that pupils with medical conditions receive appropriate care and support so that they can access education, participate fully in school life and achieve their potential. The school recognises that some medical conditions may be serious, long-term, fluctuating or life-threatening and may affect attendance, concentration, wellbeing, mobility, eating, communication or a pupil's ability to learn.

This policy replaces the school's previous policy and it reflects the current Department for Education (DfE) statutory guidance Supporting pupils at school with medical conditions, the 2026 statutory Allergy safety in schools guidance, and relevant current guidance on children who cannot attend school because of health needs.

Legal and guidance framework

- ✚ Section 100 of the Children and Families Act 2014: the appropriate authority must make arrangements for supporting pupils at school with medical conditions.
- ✚ DfE statutory guidance: Supporting pupils at school with medical conditions (current published guidance).
- ✚ Children's Wellbeing and Schools Act 2026 and DfE Allergy safety in schools: statutory guidance (published 6 July 2026), including the new allergy-safety duties applying from September 2026.
- ✚ DfE statutory guidance: Education for children with health needs who cannot attend school (updated December 2023).
- ✚ Equality Act 2010, including the duty to make reasonable adjustments for disabled pupils where applicable.
- ✚ SEND Code of Practice: 0 to 25 years, where a pupil also has special educational needs or an Education, Health and Care (EHC) plan.
- ✚ Keeping Children Safe in Education 2026 and the school's Safeguarding and Child Protection Policy 2026–2027.
- ✚ The Human Medicines (Amendment) Regulations 2017 relating to emergency adrenaline auto-injectors and the Human Medicines (Amendment) (No. 2) Regulations 2014 relating to emergency salbutamol inhalers, together with current DfE/DHSC guidance.

The DfE's core 'Supporting pupils with medical conditions' guidance has not been replaced by a new 2026 edition. This policy therefore retains that statutory framework while incorporating the new 2026 allergy duties and the school's updated safeguarding, allergy and safer-eating arrangements.

Links with other Trinity St Mary's policies

This policy must be read alongside the following school policies. Where a more specific policy or an individual healthcare plan (IHP) sets out additional controls, those arrangements must also be followed.

- ✚ Allergy Safety Policy (Including Anaphylaxis) 2026 - 2027 - for allergy identification, allergy IHPs/Action Plans, staff training, prescribed and spare adrenaline auto-injectors (AAIs), exposure reduction, incidents and near misses.

- ✚ Dietary, Food Hygiene & Safer Eating Policy 2026 - 2027 - for medically required diets, food allergy controls, food hygiene, choking prevention, EYFS safer eating and food-related activities.
- ✚ Safeguarding Policy & Procedures 2026 - 2027 where a medical issue, missed treatment, unexplained injury, fabricated or induced illness, neglect of health needs, persistent absence or any other concern raises a safeguarding issue. Safeguarding concerns must be reported immediately to the DSL/deputy DSL in accordance with that policy.
- ✚ SEND Policy/SEN Information Report, First Aid Policy, Health and Safety Policy, Educational Visits Policy, Attendance Policy, Intimate Care arrangements and Data Protection Policy.

Principles

At Trinity St Mary's Primary School, pupils with medical conditions will be/have:

- ✚ properly supported so that they have full access to education, including school trips, physical education and enrichment wherever reasonably possible;
- ✚ will not be denied admission or prevented from taking up a place because arrangements for a medical condition have not yet been finalised, unless admission would be unlawful for another reason;
- ✚ listened to and the school will work with parents/carers and relevant healthcare professionals;
- ✚ reasonable adjustments considered where a medical condition amounts to a disability;
- ✚ medical information shared on a need-to-know basis while ensuring that staff responsible for a pupil have the information required to keep them safe;

Emergency treatment must never be delayed while waiting for a parent/carer or senior member of staff.

Roles and responsibilities

Governing Board

The Governing Board at Trinity St Mary's Primary School will:

- ✚ ensure arrangements are in place to support pupils with medical conditions and that this policy is implemented effectively;
- ✚ ensure the policy is regularly reviewed and readily accessible to parents/carers and staff;
- ✚ ensure sufficient staff are suitably trained and competent before taking responsibility for healthcare procedures;
- ✚ ensure appropriate insurance arrangements are in place;
- ✚ ensure pupils with medical conditions are not unnecessarily excluded from school activities; and
- ✚ ensure the school complies with the separate statutory allergy-safety duties from September 2026.

Headteacher

The Headteacher at Trinity St Mary's Primary School will:

- ✚ have overall responsibility for implementation of this policy;

- ✚ ensure relevant staff are aware of pupils' medical needs and of the procedures to follow;
- ✚ ensure IHPs are developed where appropriate and reviewed;
- ✚ ensures sufficient trained staff are available, including contingency arrangements for absence and emergencies;
- ✚ liaises with parents/carers, the school nurse and other healthcare professionals as required;
- ✚ ensure medicines are stored, accessed, administered and recorded safely; and
- ✚ ensure safeguarding, attendance, SEND, allergy and dietary concerns are escalated to the appropriate lead.

School staff

Trinity St Mary's Primary School, any member of staff may be asked to provide support to a pupil with a medical condition, including administering medicines, but they must receive sufficient and suitable training and achieve the necessary level of competency before undertaking a healthcare procedure requiring specialist knowledge. A first-aid certificate alone does not demonstrate competence for a specialist healthcare procedure.

Staff will:

- ✚ follow the pupil's IHP and emergency arrangements;
- ✚ know how to obtain help quickly;
- ✚ take account of medical needs in lessons and activities;
- ✚ maintain confidentiality while sharing safety-critical information appropriately; and
- ✚ report safeguarding concerns to the DSL without delay.

Parents and carers

Any parent or carer of Trinity St Mary's Primary School will:

- ✚ provide accurate, up-to-date information about their child's medical needs;
- ✚ participate in the development and review of IHPs;
- ✚ provide medicines/devices in accordance with school procedures and replace them before expiry;
- ✚ inform the school **promptly** of changes to treatment, diagnosis or healthcare advice; and
- ✚ provide emergency contact details and remain contactable where required by the IHP.

Pupils

Pupils will be involved in discussions about their medical support in a manner appropriate to their age, maturity and understanding. Where competent and agreed in the IHP, pupils may carry and/or self-administer their own medicines or devices, with appropriate supervision and access arrangements.

Identifying pupils with medical conditions

Medical information is requested on admission and parents/carers may update the school at any time. Trinity St Mary's Primary School will maintain an appropriate medical conditions register/list and ensure

relevant staff, including supply and temporary staff, receive information needed for safe care. Transition arrangements will be planned in advance where possible.

A medical diagnosis does not automatically mean that an IHP is required. The Headteacher, in consultation with parents/carers, school nurse and other relevant professionals, where appropriate, will determine whether an IHP is necessary. For allergies, the criteria and process in the Allergy Safety Policy and DfE 2026 allergy guidance apply.

Individual Healthcare Plans (IHPs)

IHPs help the school, parents/carers and healthcare professionals agree the support required. They will be clear, proportionate and focused on the pupil's individual needs. They will normally be reviewed at least annually and sooner if needs, medication or advice change, following a significant incident/near miss, or where the plan is no longer effective.

An IHP may include, as appropriate:

- ✚ the medical condition, triggers, signs, symptoms and treatments;
- ✚ the pupil's resulting needs, including medication, equipment, dietary requirements, environmental issues, access to food/drink/toilet/rest and adjustments to learning or attendance;
- ✚ specific support for educational, social and emotional needs;
- ✚ who will provide support, their training needs and cover arrangements;
- ✚ who in school needs to know about the condition and what information may be shared;
- ✚ arrangements for written parental consent for medicines and procedures;
- ✚ arrangements for self-management and access to medication/devices;
- ✚ what constitutes an emergency and the action to take;
- ✚ arrangements for trips, PE, clubs, wraparound care and other activities; and
- ✚ where relevant, links to an Allergy Action Plan, Asthma Action Plan, EHC plan, risk assessment or other clinical plan.

For a pupil with an allergy, an Allergy Action Plan and/or Asthma Action Plan supplied by a healthcare professional will be attached to or referenced in the IHP where applicable, consistent with the school's Allergy Safety Policy.

Medicines in school

Medicines will only be administered at school when it would be detrimental to a pupil's health or school attendance not to do so. Where clinically appropriate, parents/carers should seek prescribing arrangements that minimise the need for doses during the school day; this must never be used to refuse necessary medication.

- ✚ Prescription medicines must be in date, labelled and, except where a different arrangement is clinically appropriate, supplied in the original container as dispensed by a pharmacist with instructions for administration, dosage and storage.

- ✚ Non-prescription medicines will only be administered in accordance with the school's agreed procedures and written parental consent.
- ✚ A child under 16 will not be given medicine containing aspirin unless prescribed by a doctor.
- ✚ Written records will be kept of medicines administered, and parents/carers will be informed in accordance with school procedures.
- ✚ Medicines will be stored safely but pupils will have prompt access to emergency medicines such as inhalers, glucose treatments and adrenaline devices.
- ✚ Controlled drugs will be stored and administered in accordance with legal and school requirements, while allowing a competent pupil to possess a controlled drug where lawful and agreed.
- ✚ Unused or expired medicines should be returned to parents/carers for safe disposal; sharps will be disposed of in an appropriate sharps container.

Emergency medicines: asthma and anaphylaxis

Trinity St Mary's Primary School may hold an emergency salbutamol inhaler for use in accordance with current national guidance and parental consent arrangements. However, it is the responsibility of the pupil's parent / carer to ensure that the school has any in date inhalers required by for their child. Pupils' own prescribed inhalers are readily accessible in line with their plans.

From 1st September 2026, allergy safety is subject to additional statutory duties. Trinity St Mary's arrangements for prescribed and spare AAIs, staff training, storage, accessibility, consent, use, recording and incident review are set out in the Allergy Safety Policy. **Where anaphylaxis is suspected, staff must give adrenaline immediately in accordance with the emergency arrangements and call 999. Treatment must not be delayed.**

Food, dietary needs and safer eating

Where a medical condition affects food, eating, swallowing or nutrition, the pupil's IHP must be consistent with the Dietary, Food Hygiene & Safer Eating Policy. Medically required diets, allergies, intolerances, coeliac disease, swallowing difficulties and other food-related medical needs must be communicated to relevant staff and the catering provider on a need-to-know basis.

For allergy-specific food controls, the Allergy Safety Policy takes precedence. For EYFS safer-eating requirements, including supervision, choking prevention and food-hygiene arrangements, staff must follow the Dietary, Food Hygiene & Safer Eating Policy.

Safeguarding and medical needs

A medical condition can increase a child's vulnerability. Staff must remain alert to safeguarding concerns including unexplained or repeated injuries, missed essential treatment, persistent failure to provide medication, fabricated or induced illness, neglect of health needs, emotional impact, bullying linked to a condition, or patterns of absence that may indicate wider harm.

At Trinity St Mary's a safeguarding concern must not be managed solely as a medical or attendance matter. Staff must follow the Safeguarding Policy & Procedures 2026 - 2027 and report concerns immediately to the DSL or a deputy DSL's. **In an emergency, staff must secure urgent medical assistance first while ensuring safeguarding action follows without delay.**

Educational visits, PE, clubs and wraparound provision

Pupils with medical conditions are supported to participate fully wherever reasonably possible. Planning and risk assessment will consider medication, equipment, food/dietary needs, trained staff, emergency procedures, transport, access to medical assistance and any reasonable adjustments. Parents/carers will not routinely be required to accompany a pupil solely because of a medical condition.

The requirements of this policy apply to school-operated breakfast/after-school clubs and extracurricular activities. Relevant information and arrangements are agreed with external providers where necessary.

Attendance and education during periods of ill health

At Trinity St Mary's we work with families to support attendance and avoid unnecessary absence. Where a pupil cannot attend school because of physical or mental health needs, the school will work with the local authority and relevant services in accordance with DfE statutory guidance on education for children with health needs who cannot attend school. Support will be arranged as soon as it is clear that absence is likely to be significant, recurring or prolonged; the school will not wait mechanically for a fixed number of days where earlier action is appropriate.

Where alternative education or hospital education is required, the school will maintain appropriate contact, support continuity of learning and plan reintegration carefully. An IHP should be reviewed where necessary as part of reintegration.

Staff training and competence

Training will be based on the individual pupil's needs and the healthcare procedure involved. The School Nurse and other healthcare professionals will provide or confirm specialist training where required. The school will maintain appropriate records of training and competence and ensure that cover arrangements are sufficient.

Allergy and anaphylaxis awareness/emergency-response training is provided in accordance with the Allergy Safety Policy and DfE 2026 statutory allergy guidance. New, temporary, supply and relevant agency staff will receive the information and training needed for their responsibilities.

Unacceptable practice

At Trinity St Mary's, although each case will be judged on its circumstances, it is generally unacceptable to:

-  prevent pupils from easily accessing their inhalers or other emergency medication/devices where they are able and authorised to carry them;

- ✚ assume that every pupil with the same condition requires the same treatment;
- ✚ ignore the views of the pupil, parents/carers or healthcare evidence without proper consideration;
- ✚ send a pupil who becomes ill to the school office or medical room unaccompanied where they may need assistance;
- ✚ penalise pupils for attendance affected by their medical condition, including in ways that prevent access to activities or rewards, without considering the circumstances and applicable attendance guidance;
- ✚ prevent pupils from drinking, eating, taking toilet/rest breaks or taking medication where needed to manage their condition;
- ✚ require parents/carers to attend school routinely to administer medicine or provide medical support, or make their attendance a condition of participation, where the school should reasonably provide support;
- ✚ prevent or create unnecessary barriers to participation in trips, PE, clubs or other activities; or
- ✚ **delay emergency treatment while seeking permission from a parent/carers or senior leader.**

Record keeping, confidentiality and information sharing

The school will keep appropriate records of IHPs, parental consent, medicines administered, staff training and relevant incidents. Medical information is special category personal data and will be handled in accordance with data-protection law and school policy. Information will be shared with staff who need it to keep the pupil safe and support their education.

For life-threatening conditions, arrangements must ensure safety-critical information is immediately available to staff who need it while avoiding unnecessary public display of confidential medical information.

Complaints

Concerns should normally be raised with the school promptly so that they can be resolved. Formal complaints will be handled under the school's Complaints Policy. A safeguarding concern must be reported through safeguarding procedures and must not wait for the complaints process.

Monitoring and review

The Headteacher will monitor implementation. The Governing Body will review this policy regularly and sooner where statutory guidance, legislation, school arrangements or learning from an incident requires change. IHPs are reviewed individually and are not dependent on the policy review cycle.

Appendix A - IHP checklist

- ✚ Condition/diagnosis and impact in school

- ✚ Triggers, signs and symptoms
- ✚ Medication/equipment and storage/access
- ✚ Dietary, eating, toileting, mobility or environmental needs
- ✚ Learning, attendance and wellbeing adjustments
- ✚ Named support staff and training/competence
- ✚ Emergency response and 999 instructions
- ✚ Parent/carer and healthcare contacts
- ✚ Trips/PE/clubs/wraparound arrangements
- ✚ Safeguarding or SEND links where relevant
- ✚ Allergy/Asthma Action Plan attached or referenced where relevant
- ✚ Review date and triggers for earlier review

Appendix B - Key references

DfE - Supporting pupils with medical conditions at school

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

DfE - Allergy safety in schools (statutory guidance), 6 July 2026

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

DfE - Education for children with health needs who cannot attend school

<https://www.gov.uk/government/publications/education-for-children-with-health-needs-who-cannot-attend-school>

DfE - Keeping Children Safe in Education 2026

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

DfE - School food standards: resources for schools

<https://www.gov.uk/government/publications/school-food-standards-resources-for-schools>