Saint Jérôme
Church of England
Bilingual School

Supporting Children with

Medical Needs Policy

Policy created:	June 2020
Policy reviewed and updated:	September 2026
Date of next review:	September 2027
Review cycle:	Annually.
Linked policies:	Child Protection and Safeguarding Policy, SEND and Inclusion Policy, Intimate Care Policy, Health, Safety and Security Policy, First Aid Policy, Educational Visits Procedures, Complaints Policy, Allergy Safety Policy.

Version history

Date	Version	Summary of changes
June 2020	V1	Original policy. Never signed off; review date of June 2021 was never met. Cited the 2015 DfE statutory guidance, since revised. Referred to 'the Council's Liability Insurance' for staff administering medicines, which does not reflect the school's status as an Academy Trust. Treated a defibrillator as a future purchase to consider, though the school has since acquired an AED.
September 2026	V2	Updated to the DfE's statutory guidance 'Supporting pupils at school with medical conditions', revised January 2025, replacing the 2015 version this policy previously cited. Corrected the insurance reference: as an Academy Trust, the relevant arrangement is the DfE's Risk Protection Arrangement (RPA) for Academy Trusts, not a local authority's liability insurance, which does not apply to Saint Jérôme's status. Updated the defibrillator reference to reflect that the school now has an AED on site, cross-referenced with the Health, Safety and Security Policy and First Aid Policy, rather than treating this as a future consideration. Added a cross-reference to the DfE's 'Using emergency adrenaline auto-injectors in school' guidance and to the new Allergy Safety in Schools statutory guidance (Benedict's Law, in force from 1 September 2026), noting that a standalone Allergy Safety Policy is still needed and does not yet exist. Put into house format; governance and named individuals updated.
September 2026	V3	Added a new section reflecting KCSIE 2026's dedicated content on safeguarding children with medical conditions, in force from this month, which the first pass missed entirely. Added a Notification Procedure section with a clear two-week timeline for new diagnoses; an Allergens, Anaphylaxis and Adrenaline Auto-Injectors section; and an Unacceptable Practice section, which echoes the DfE's own statutory guidance and sets clear boundaries, none of which existed

		before. Added an explicit admissions non-discrimination statement. Expanded the legal framework to include the Health and Safety at Work etc. Act 1974, the Misuse of Drugs Act 1971, the Medicines Act 1968, the School Premises (England) Regulations 2012, and Natasha's Law, all present in the comparator but missing here. Renumbered sections 4 onwards to accommodate the new sections.
September 2026	V4	The standalone Allergy Safety Policy referenced above has now been written. Updated the two notes in this policy that described it as not yet existing, and added it to the linked policies list on the cover.

Headteacher: Kate Schutte

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(Kate Schutte)

SENDCO:

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(Sarah Cox, Deputy Headteacher)

Co-Chairs of Governors: Approved by Governors on 17th September 2026

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(Vas Lappas and Edward Stowell)

1. Rationale

This policy has been drawn up to ensure that children with medical needs receive proper care and support at school to enable regular school attendance. Staff have a common law duty to act as any reasonably prudent parent would, to make sure that pupils are healthy and safe on school premises, and this may extend to administering medicine or taking action in an emergency. This duty also extends to off-site educational visits.

Parents of children with medical conditions are often concerned that their child's health will deteriorate when they attend school. This is because pupils with long-term and complex medical conditions may require ongoing support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and intervention in emergency circumstances. Children's health needs may also change over time in ways that cannot always be predicted, sometimes resulting in extended absences. It is therefore important that parents feel confident that the school will provide effective support for their child's medical condition, and that pupils feel safe.

In making decisions about the support it provides, the school establishes relationships with relevant local health services to help it do so. It is crucial that the school receives and fully considers advice from healthcare professionals, and listens to and values the views of parents and pupils.

Some children with medical conditions may be considered disabled under the definition set out in the Equality Act 2010. Where this is the case, the Governing Body must comply with its duties under that Act. Some may also have Special Educational Needs (SEN) and may have an Education, Health and Care (EHC) plan, which brings together health and social care needs alongside their special educational provision. For children with SEN, this policy should be read in conjunction with the SEND Code of Practice.

Saint Jérôme Church of England Bilingual School wishes to ensure that pupils with medical conditions receive appropriate care and support at school. All pupils have an entitlement to a full-time curriculum, or as much as their medical condition allows.

This policy has been developed in line with the Department for Education's statutory guidance 'Supporting pupils at school with medical conditions' (revised January 2025), under a statutory duty from section 100 of the Children and Families Act 2014, which applies to academy trusts as well as maintained schools. The school will have regard to the statutory guidance issued: we take account of it, carefully consider it, and make all efforts to comply.

This policy also has regard to the DfE's guidance 'Using emergency adrenaline auto-injectors in school', the DfE's guidance 'First aid in schools, early years and further education', and to the new statutory guidance 'Allergy Safety in Schools' (Benedict's Law), in force from 1 September 2026. It also has regard to the Health and Safety at Work etc. Act 1974, the Misuse of Drugs Act 1971, the Medicines Act 1968, the School Premises (England) Regulations 2012, and the Food Information (Amendment) (England) Regulations 2019 (Natasha's Law), so far as it relates to allergen labelling of food prepared on site.

KCSIE 2026 makes clear that a medical condition does not, in itself, indicate that a child is at greater safeguarding risk. Where a clinical incident occurs relating to the management of a pupil's medical condition, including an allergic reaction, this would not by itself warrant a referral to local safeguarding partners. A referral is only required where the incident gives rise to concerns that, because of their medical condition, the child may be at increased risk of neglect, abuse or exploitation, whether within or outside their family. Where such a concern arises, staff will follow the procedures set out in our Child Protection and Safeguarding Policy and report it to the Designated Safeguarding Lead.

The Allergy Safety in Schools guidance expects a standalone Allergy Safety Policy; see our Allergy Safety Policy for full detail on identifying, supporting and responding to pupils with allergy.

2. Introduction

Under the Equality Act 2010, responsible bodies for schools, including the Nursery, must not discriminate against disabled children in relation to their access to education and associated services, including all aspects of school life, school trips, clubs and activities.

Saint Jérôme Church of England Bilingual School will endeavour to adhere to the aforementioned Acts through the implementation of this policy, which aims to:

- Avoid disability discrimination
- Ensure all children are included
- Ensure that children with medical conditions are properly supported so they have full access to education, including school trips and physical education
- Enable regular attendance.

No child will be denied admission to the school, or prevented from taking up a school place, because arrangements for their medical condition have not yet been made; a child may only be refused admission where it would be detrimental to the health of the child, or others, to admit them. The school will not ask, or use any supplementary form that asks, for details about a child's medical condition during the admissions process.

3. Key Roles and Responsibilities

Ofsted

As part of Ofsted's inspection framework, inspectors must consider how well a school meets the needs of the full range of pupils, including those with medical conditions. Key judgements are informed by the progress and achievement of these children alongside those of pupils with special educational needs and disabilities, and by pupils' spiritual, moral, social and cultural development.

The Local Authority

The Local Authority is responsible for promoting co-operation between relevant partners regarding supporting pupils with medical conditions; providing support, advice and guidance to schools and their staff to help ensure Individual Healthcare Plans (IHPs) are effectively delivered; and working with schools to ensure pupils attend full-time, or make alternative arrangements for the education of pupils who need to be out of school for fifteen days or more due to a health need and who would not otherwise receive a suitable education.

The Governing Body

The Governing Body is responsible for:

- Ensuring arrangements are in place to support pupils with medical conditions
- Ensuring the focus is on the needs of each individual child and how their medical condition impacts on their school life
- Ensuring the policy is developed collaboratively across services, clearly identifies roles and responsibilities, and is implemented effectively
- Ensuring this policy does not discriminate on any grounds, including but not limited to the protected characteristics of race, religion or belief, sex, gender reassignment, pregnancy and maternity, disability or sexual orientation
- Ensuring the policy covers arrangements for pupils who are competent to manage their own health needs
- Ensuring all pupils with medical conditions can play a full and active role in school life, participate in visits, trips and sporting activities, remain healthy and achieve their academic potential
- Ensuring relevant training is delivered to a sufficient number of staff with responsibility to support children with medical conditions, and that they are signed off as competent to do so
- Ensuring written records are kept of all medicines administered to pupils
- Ensuring the policy sets out procedures for emergency situations
- Ensuring the level of insurance and risk protection in place reflects the level of risk
- Handling complaints regarding this policy in line with our Complaints Policy.

The Senior Leadership Team

The Senior Leadership Team is responsible for:

- Ensuring the policy is developed effectively with partner agencies, and that staff are made aware of it
- The day-to-day implementation and management of this policy and its procedures
- Liaising with healthcare professionals regarding staff training
- Identifying staff who need to be aware of a child's medical condition
- Developing Individual Healthcare Plans
- Ensuring a sufficient number of trained staff are available to implement the policy and deliver IHPs in normal, contingency and emergency situations, with more than one staff member identified to cover holidays, absences and emergencies

- If necessary, facilitating the recruitment of staff for the purpose of delivering the commitments made in this policy
- Ensuring appropriate risk protection is in place, through the DfE's Risk Protection Arrangement (RPA) for Academy Trusts, for staff who support pupils in line with this policy
- Continuous two-way liaison with the school nursing service in the case of any child who has or develops an identified medical condition
- Ensuring confidentiality and data protection
- Assigning appropriate accommodation for medical treatment and care
- Maintaining the school's automated external defibrillator (AED); see also our Health, Safety and Security Policy and First Aid Policy for its location and check schedule
- Holding emergency salbutamol asthma inhalers for emergency use for children who already use inhalers for a medically diagnosed condition.

Staff Members

Staff members are responsible for:

- Taking appropriate steps to support children with medical conditions, and familiarising themselves with procedures for responding when they become aware that a pupil with a medical condition needs help
- Knowing where controlled drugs are stored and where the key is held
- Taking account of the needs of pupils with medical conditions in lessons
- Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, with particular specialist training if they have agreed to undertake a medication responsibility
- Allowing inhalers, adrenaline pens and blood glucose testers to be held in an accessible location, following DfE guidance.

The Welfare Officer

The Welfare Officer is responsible for:

- Collaborating on developing an Individual Healthcare Plan in anticipation of a child with a medical condition starting school
- Notifying the school when a child has been identified as requiring support due to a medical condition at any point in their school career
- Supporting staff to implement an IHP and participating in regular reviews of it
- Giving advice and liaison on training needs
- Liaising locally with lead clinicians on appropriate support, and assisting the Senior Leadership Team in identifying training needs and providers.

Parents and Carers

Parents and carers are responsible for:

- Keeping the school informed about any new medical condition or changes to their child's health
- Updating the school with contact details
- Participating in the development and regular reviews of their child's IHP
- Completing a parental consent form to administer medicine or treatment before bringing medication into school
- Providing the school with the medication their child requires, keeping it up to date, and collecting leftover medicine
- Carrying out actions assigned to them in the IHP, with particular emphasis on being, or nominating an adult to be, contactable at all times.

Pupils

Pupils are responsible for:

- Providing information on how their medical condition affects them
- Contributing to their IHP
- Complying with the IHP and self-managing their medication or health needs, including carrying medicines or devices, if judged competent to do so by a healthcare professional and agreed by parents.

4. Notification Procedure

Where the school is notified that a pupil has a medical condition requiring support, this is passed to the SENDCO and Welfare Officer, who will arrange a meeting with parents, relevant healthcare professionals and, where appropriate, the pupil, to discuss whether a Health Care Plan is needed. The school will not wait for a formal diagnosis before providing support; where a pupil's condition is unclear, or there is a difference of opinion about what support is needed, a judgement will be made based on the available evidence, including medical evidence and consultation with parents.

For a pupil starting at the school, arrangements will be put in place before they join, informed by information from their previous setting. Where a pupil joins mid-term, or receives a new diagnosis while already at the school, arrangements will be put in place within two weeks.

5. Training of Staff

Suitable training should have been identified during the development or review of individual healthcare plans. Some staff may already have knowledge of the specific support needed by a child with a medical condition, so extensive training may not be required. Staff who provide support to pupils with medical conditions should be included in meetings where this is discussed.

The relevant healthcare professional should normally lead on identifying and agreeing with the school the type and level of training required, and how this can be obtained. The school may arrange training itself and will ensure this remains up to date.

Appropriate staff have received First Aid training; however, additional training may be required for specific medical needs to ensure staff are competent and confident in supporting pupils with medical conditions, and to fulfil the requirements set out in individual healthcare plans. Staff need an understanding of the specific medical conditions they are being asked to deal with, their implications, and preventative measures.

Healthcare professionals, including the school nursing service, can confirm the proficiency of staff in a medical procedure or in providing medication.

The school's arrangements include whole-school awareness training so that all staff are aware of this policy and their role in implementing it, with induction arrangements for new staff. The relevant healthcare professional can advise on training to help ensure that all medical conditions affecting pupils in the school are understood fully, including preventative and emergency measures, so staff can recognise and act quickly when a problem occurs.

The family of a child will often be key in providing relevant information to school staff about how their child's needs can be met, and parents will be asked for their views; they should provide specific advice, but should not be the sole trainer.

No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the condition, updated to reflect any individual healthcare plans, and signed off as competent.

6. Health Care Plans

Individual Health Care Plans help ensure the school effectively supports pupils with medical conditions. They provide clarity about what needs to be done, when and by whom. They are often essential where conditions fluctuate or where there is a high risk that emergency intervention will be needed, and are likely to be helpful in most other cases, especially where medical conditions are long-term and complex.

Healthcare plans must be drawn up for any child with a medical condition that needs management. A Health Care Plan includes detailed instructions on day-to-day management of the condition, together with procedures to follow in an emergency and the level of support required. Not all children require an individual healthcare plan; some children can have a group plan if they have a common medical condition and the same treatment or management of the condition. The school, healthcare professional and parent will agree, based on evidence, whether an individual or group healthcare plan is appropriate.

Health Care Plans are easily accessible to all relevant staff, including supply and agency staff, while preserving confidentiality. Where a pupil has an EHC plan, the Health Care Plan may be linked to it or become part of it if appropriate. Where a child is returning from a period of hospital education, alternative provision or home tuition,

collaboration between the provider and school ensures the Health Care Plan identifies the support the child needs to reintegrate.

The school nursing service may provide advice and support to the school, parents and healthcare professionals in formulating the Health Care Plan, and may deliver necessary training, in conjunction with other agencies, including refresher training annually or as required.

Individual Health Care Plans are kept in a file in the school Welfare Room, accessible to all staff; each class also has a paper copy. These are updated at least annually, or earlier if there is evidence the child's needs have changed. Detailed medication administration sheets are kept.

7. Allergens, Anaphylaxis and Adrenaline Auto-Injectors

Parents are required to provide the school with up-to-date information about their child's allergies and the action to take in the event of a reaction, including any medication required. Where a pupil is prescribed an adrenaline auto-injector (AAI), this is written into their Health Care Plan.

The school keeps a register of pupils prescribed an AAI, and designated staff are trained to administer one. In line with the DfE's guidance on using emergency AAIs in school, the school also holds a spare AAI for emergency use, checked regularly to ensure it remains in date. Where a pupil is having, or appears to be having, a severe allergic reaction, emergency services will be contacted, even where an AAI has already been administered.

Where food is prepared on site for direct sale, the school ensures allergen information complies with the Food Information (Amendment) (England) Regulations 2019 (Natasha's Law). See also our Packed Lunch Policy.

8. Medical Conditions Register

A medical conditions register is kept, updated and reviewed regularly by the Welfare Officer. Each class teacher has an overview of the list for the pupils in their care, within easy access; this is kept electronically so staff can access information. Supply and support staff similarly have access on a need-to-know basis. Parents should be assured that data sharing principles in line with UK GDPR are adhered to.

For pupils on the medical conditions register, key stage transition point meetings take place in advance of transferring, to enable parents, school and health professionals to prepare the IHP and train staff if appropriate.

9. Transport Arrangements

Where a pupil with a Health Care Plan is allocated school transport, the school will invite a member of the transport team to participate in the IHP meeting. A copy of the Health Care Plan will be shared with the transport team and kept on the pupil record. The IHP must be passed to the current operator for use by the driver or escort, and the transport team will ensure this information is supplied when a change of operator takes place.

For some medical conditions, the driver or escort will require adequate training. For pupils who receive specialised support in school with their medical condition, this must equally be planned for in travel arrangements and included in the specification when tendering for that pupil's transport.

When prescribed controlled drugs need to be sent into school, parents are responsible for informing the school in advance and completing a consent form, and for handing them to the adult in the car in a suitable, clearly labelled bag or container. Controlled drugs will be kept under the supervision of the adult in the car throughout the journey and handed to a school staff member on arrival. Any change to this arrangement will be reported to the transport team for approval or appropriate action.

10. Emergencies

Medical emergencies will be dealt with under the school's emergency procedures, communicated to all relevant staff so they are aware of signs and symptoms. Pupils will be informed in general terms of what to do in an emergency, such as telling a teacher. If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents arrive.

11. Unacceptable Practice

Staff will not:

- Assume that pupils with the same condition require the same treatment
- Prevent pupils from easily accessing their inhalers or medication
- Ignore the views of the pupil or their parents, or ignore medical evidence or opinion
- Send pupils home frequently for reasons associated with their medical condition, or prevent them taking part in school activities, including lunchtimes, unless this is specified in their Health Care Plan
- Send an unwell pupil to the medical room or school office alone, or with an unsuitable escort
- Penalise pupils with medical conditions for their attendance record, where the absences relate to their condition
- Make parents feel obliged to come into school to administer medication or provide medical support that the school should be providing
- Create unnecessary barriers to pupils participating in school life, including school trips
- Refuse to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

12. Day Trips, Residential Visits and Sporting Activities

Arrangements are made, and kept flexible, to ensure pupils with medical conditions can participate in school trips, residential stays and sports activities, and are not prevented from doing so unless a clinician states it is not possible.

To comply with best practice, risk assessments are undertaken, in line with Health and Safety Executive guidance on school trips, to plan for including pupils with medical conditions. Consultation with parents and healthcare professionals on trips and visits is separate to the normal day-to-day Individual Health Care arrangements for the school day.

All staff supervising visits are made aware of any medical needs and relevant emergency procedures. Where necessary, individual risk assessments are conducted; it may be necessary for an additional teacher, parent or other volunteer to accompany a particular child on a one-to-one basis. Where a specific medication such as an adrenaline auto-injector may be needed, it is ensured that a member of staff trained to administer it accompanies the child, and that the appropriate medication is taken on the visit.

Medicines are kept in their original containers. On residential trips, all medicines must be stored in a locked, secure container. For all educational trips, including residential trips, the school will not administer non-prescription medicine; if a child needs treatment or medication while on a school trip, professional medical advice will be sought. See also our Educational Visits Procedures, which include a dedicated section on allergy safety on visits.

13. Administration of Medicines

There is no legal duty requiring schools to administer medicines; however, we have a duty to make arrangements to support pupils with medical conditions. As such, we will administer, after appropriate training, prescription medication to assist children with medical needs if required:

- Where possible, unless advised it would be detrimental to health, medicines should be prescribed in frequencies that allow the pupil to take them outside school hours. Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so
- Any staff giving medication of any kind do so voluntarily and are supported by the school with training if required. Staff who administer medication are covered under the school's arrangements through the DfE's Risk Protection Arrangement (RPA) for Academy Trusts, provided they have received training, taken any necessary refresher training, followed the Health Care Plan, and used appropriate protective equipment
- We work with local authorities, health professionals and other support services to ensure children with medical conditions receive a full education.