Leamington Federation
Sydenham Primary School and Lighthorne Heath Primary School
Medicines in School and Supporting Pupils with Medical Conditions Policy

1. Purpose and legal framework

The Leamington Federation is committed to ensuring that pupils with medical conditions are properly supported so that they have full access to education, including school trips, physical education and wider school life. The Governing Body will make arrangements to support pupils with medical conditions in accordance with section 100 of the Children and Families Act 2014 and the Department for Education (DfE) statutory guidance Supporting pupils at school with medical conditions.

This policy should be read alongside the Federation's Child Protection and Safeguarding Policy, Inclusion and SEND Policy, First Aid Policy, Asthma Care Plan, Allergy Safety Policy, Educational Visits procedures and any relevant individual healthcare plans (IHPs).

The Federation also has regard to the Equality Act 2010, the SEND Code of Practice: 0 to 25 years, the Human Medicines Regulations 2012 (as amended), current DfE guidance on emergency salbutamol inhalers and emergency adrenaline auto-injectors, and the statutory Allergy safety in schools guidance published in July 2026.

2. Key principles

- Pupils with medical conditions should be supported in a way that enables them to participate fully in school life and achieve their potential.
- No pupil should be denied admission, prevented from taking part in normal school activities, or sent home unnecessarily because of a medical condition where reasonable arrangements can be made.
- Medical information will be handled sensitively and shared only with staff who need it in order to keep the pupil safe and support them effectively.
- Parents/carers, pupils and relevant healthcare professionals will be involved in decisions about medical support wherever appropriate.
- Staff must not give prescription or non-prescription medicines without appropriate parental/carer consent, except in a genuine emergency where acting is necessary to protect life or prevent serious harm.

3. Individual healthcare plans (IHPs)

An IHP will be considered where a pupil has a long-term or complex medical condition, where emergency intervention may be required, where arrangements differ from the school's usual procedures, or where an IHP would help staff coordinate safe and inclusive support. The decision will be made in consultation with parents/carers and, where appropriate, healthcare professionals and the pupil.

IHPs will normally include the condition, symptoms and triggers; medication and dose; storage and access arrangements; emergency procedures; required staff training; arrangements for PE, trips and off-site activities; any reasonable adjustments; confidentiality arrangements; and review arrangements. Plans will be reviewed at least annually and sooner if needs change.

4. Prescribed medicines

Wherever clinically possible, medicines should be prescribed in dose frequencies that enable them to be taken outside school hours. However, the Federation will not refuse to administer prescribed medicine where this would disadvantage a pupil or prevent them from attending school.

- Parents/carers must bring medicines to the school office and complete the school's medication consent form. Pupils should not routinely carry medicines to school unless this has been agreed as part of safe self-management arrangements.
- Medicines must be in the original container as dispensed by a pharmacist, with the prescriber's instructions for administration, dosage and storage. The exception is insulin, which may be supplied in a pen or pump but must be clearly labelled.
- The school will not alter dosage instructions. If the label and parental instructions conflict, medication will not be given until clarification is obtained.
- Only the dose stated on the pharmacy label or authorised healthcare plan will be administered.
- Where specialist techniques are required, only staff who have received appropriate training and are competent to do so will administer the medicine.

5. Non-prescription medicines

The Federation does not routinely administer non-prescription medicines. Where there is a specific and reasonable need, the Executive Headteacher or delegated senior leader may agree administration following written parental/carer consent and clear instructions. The school will never administer aspirin, or medicines containing aspirin, to a pupil under 16 unless it has been prescribed by a doctor.

The school will not administer medication merely as a convenience where there is no clear medical need, and will not give doses more frequently than recommended on the product information or by an authorised healthcare professional.

6. Administration and recording

- Before administering medicine, the staff member will check the pupil's identity, the medicine, dosage, timing, route of administration, expiry date and parental consent/IHP instructions.
- A written record will be made as soon as possible after each dose, showing the pupil's name, medicine, dose, date, time and the name/signature or initials of the administering member of staff. A second witness may be used where the risk assessment, medicine type or local procedure makes this appropriate; it is not a routine requirement for all medicines.
- If a pupil refuses medicine, staff will not force them to take it. The refusal will be recorded and parents/carers informed as soon as practicable. If refusal creates an immediate risk, the emergency arrangements in the pupil's IHP will be followed.
- Any medication error, missed dose, adverse reaction or near miss will be reported promptly to a senior leader, parents/carers and, where necessary, relevant healthcare professionals. Serious incidents will be managed under safeguarding, first aid and incident-reporting procedures as appropriate.

7. Storage, access and disposal

- Medicines will be stored safely, securely and in accordance with the product instructions. Medicines requiring refrigeration will be kept in an appropriate refrigerator, in a labelled container, with access controlled by staff.
- Emergency medicines such as asthma inhalers, adrenaline auto-injectors, glucose and seizure-rescue medication must be readily accessible to the pupil and staff who may need them. They must not be locked away in a way that causes delay in an emergency.
- Where it is safe and appropriate, pupils who are competent to manage their own medicines will be encouraged to do so, with arrangements agreed with parents/carers and recorded in the IHP where relevant.

- Parents/carers are responsible for ensuring medicines remain in date and for collecting medicines that are no longer required. The school will not dispose of medicines in general waste; uncollected or expired medicines will be returned to parents/carers or a pharmacy as appropriate.
- Sharps and needles will be disposed of in an approved sharps container.

8. Controlled drugs

Where a prescribed medicine is a controlled drug, it will be stored securely in a non-portable container to which only named staff have access, except where a pupil has been assessed as competent to carry and self-administer it safely. A record will be kept of the amount held, doses administered and any balance, in accordance with school procedures. Controlled drugs will be returned to parents/carers for safe disposal when no longer required.

9. Self-management

Pupils should be supported to take increasing responsibility for managing their own medical needs where this is safe and appropriate for their age, maturity and condition. Decisions about carrying and self-administering medicines will be agreed with parents/carers and, where needed, healthcare professionals, and recorded in the pupil's IHP. Staff will maintain appropriate oversight and support.

10. Asthma and emergency salbutamol inhalers

Pupils with asthma should have immediate access to their own reliever inhaler and spacer in accordance with their Asthma Care Plan. Parents/carers must provide an in-date inhaler and complete the school's asthma documentation. Where the Federation keeps an emergency salbutamol inhaler, it will be used only in accordance with current national guidance, including appropriate parental consent and records of use.

11. Allergy and anaphylaxis

The Federation maintains a separate published Allergy Safety Policy in accordance with the statutory Allergy safety in schools guidance and section 100A of the Children and Families Act 2014, inserted by the Children's Wellbeing and Schools Act 2026. Pupils at risk of anaphylaxis will have appropriate individual arrangements, access to prescribed adrenaline auto-injectors (AAIs), and trained staff who understand emergency procedures.

Where the school holds spare emergency AAIs, these will be obtained, stored and used in accordance with current national guidance and the Federation's Allergy Safety Policy. Emergency treatment must never be delayed while attempting to contact a parent/carer.

12. Emergency medication and emergency response

Emergency medication will be immediately accessible and staff will follow the pupil's IHP or emergency plan. Where a pupil is seriously unwell, an ambulance will be called without delay. Parents/carers will be contacted as soon as possible, but this must not delay emergency treatment. A member of staff will accompany a pupil to hospital where appropriate if a parent/carer is not immediately available.

13. School trips, PE and off-site activities

Pupils with medical conditions will be actively included in trips, residential visits, PE and other activities wherever reasonable adjustments can make participation safe. Risk assessments and IHPs will identify any additional medicines, trained staff, emergency equipment or supervision required. Emergency medicines must remain readily accessible off site.

14. Staff roles, training and liability

The Governing Body is responsible for ensuring that appropriate arrangements are in place to support pupils with medical conditions. The Head Teachers are responsible for implementing this policy and ensuring sufficient trained staff are available to meet known needs, including foreseeable absences and emergencies.

Staff have a duty of care to pupils. However, no individual member of staff will be required to administer medication or undertake a medical procedure for which they have not been appropriately trained, except where immediate emergency action is necessary to preserve life or prevent serious harm. Training will be appropriate to the pupil's needs and refreshed where necessary. Staff acting within their training and school procedures are covered by the school's insurance arrangements.

15. Parents/carers and pupils

Parents/carers are responsible for providing accurate and up-to-date medical information, medicines and equipment; completing consent documentation; informing the school of changes; and replacing expired medication. Pupils will be encouraged, according to their age and understanding, to contribute to their IHP and to tell an adult if they feel unwell or require medication.

16. Equality, SEND and attendance

The Federation will make reasonable adjustments for disabled pupils in accordance with the Equality Act 2010 and will ensure that pupils with medical conditions are not placed at a substantial disadvantage. Some pupils with medical conditions may also have SEND; where this is the case, this policy will operate alongside the Inclusion and SEND Policy and any Education, Health and Care Plan. The school will work with families and relevant professionals to minimise avoidable absence and support successful attendance and reintegration following illness or treatment.

17. Unacceptable practice

The Federation will not normally regard the following as acceptable practice:

- preventing pupils from easily accessing their inhalers or other emergency medication and administering it when and where necessary;
- assuming every pupil with the same condition needs the same treatment;
- ignoring the views of the pupil, parents/carers or medical evidence without good reason;
- sending pupils with medical conditions home frequently or preventing them from staying for normal school activities where reasonable adjustments could allow participation;
- penalising pupils for attendance affected by their medical condition where this is properly evidenced;
- preventing pupils from drinking, eating or taking toilet or other breaks where needed to manage a medical condition;
- requiring parents/carers to attend school to administer medication or provide medical support as a condition of attendance where the school can reasonably make arrangements;
- preventing pupils from participating in trips or activities solely because of a medical condition without considering reasonable adjustments and risk management.

18. Complaints

Concerns about the support provided for a pupil with a medical condition should normally be raised with the class teacher, school office or a senior leader in the first instance. Formal complaints will be considered under the Federation Complaints Policy. Safeguarding concerns will be dealt with under the Child Protection and Safeguarding Policy.

19. Monitoring and review

The Governing Body will monitor the implementation of this policy. The policy will be reviewed at least annually, and sooner if there are significant changes to legislation, statutory guidance or school practice.

Key statutory and national guidance

- Children and Families Act 2014, section 100 (and section 100A on allergy safety).
- DfE: Supporting pupils at school with medical conditions – statutory guidance.
- DfE: Allergy safety in schools – statutory guidance (July 2026).
- Department of Health/DfE: 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.
- Equality Act 2010 and SEND Code of Practice: 0 to 25 years.

This policy was ratified:	September 2026
This policy will be reviewed:	September 2027
Executive Headteacher:	Juliette Westwood
Chair of Governors:	Richard Butler