



Supporting Pupils with Medical Needs Policy

This policy was approved and adopted by
the LAB
on 11th December 2025

It will be reviewed in Autumn 2026



1. RATIONALE

At Crawley Ridge Infant School we believe that inclusion and equal opportunities for pupils with medical needs are an entitlement. This policy gives details of the principles and procedures we have in place when medication is required.

2. PRINCIPLES

We recognise that children may be affected by a wide-range of medical needs during their time in school, both long term and short term. We are committed to providing pupils who have medical needs with as much education as their condition allows. We seek to create the best possible conditions to foster a school community that values the uniqueness of each individual and minimises any barriers so that the potential of each individual is realised. We recognise that some medical needs will require medication and follow the Surrey Guidance January 2023, *Supporting children and young people with medical conditions*.

3. PROCEDURES / GUIDANCE FOR USE

3.1 Who is Responsible?

It is important that responsibility for children's medication is clearly defined, and that each person involved with children with medical conditions is aware of what is expected of them. Close co-operation between school, parents, health professionals and other agencies is essential to ensure that any necessary medical interventions during school activities are undertaken safely and correctly. Schools need to agree and record secure arrangements to provide appropriate medical support for each child needing it, via prior discussion with their parents and relevant health professions before commencement.

In most circumstances the administration of medicines is the responsibility of parents, and they should be administered at home unless it is essential, they are administered during the school day.

The Governing Body has responsibility for

- The school's Supporting Pupils with Medical Needs Policy
- Complying with the LA Guidance January 2023, *Supporting children and young people with medical conditions*
- Ensuring that staff receive appropriate accredited training
- Agreeing the number of sufficiently trained staff to deliver against all individual Health Care Plans

The Headteacher has responsibility for

- Implementing the Governors' policy and for developing detailed procedures
- Ensuring that appropriate training is arranged as necessary
- Making local decisions about the administration of medicines in school
- Signposting parents to the school's policy and procedures
- Agreeing with parents the support that the school is able to provide
- A commitment that all relevant staff will be made aware of the child's condition



Policy: Supporting pupils with medical needs

Approval date: 11th December 2025

Review date: Autumn 2026

- Ensuring that risk assessments are completed for School Visits, holidays and other school activities outside of the normal timetable

Office staff

- At the start of the year office staff will alert class teachers and this will be updated on a termly basis or as necessary
- Up to date information is available for supply teachers with photographic lists in classroom cupboards and children with specific medical needs that may be critical (eg nut and more severe allergies) wear a green wrist band at all times in school. Red wrist bands are worn during lunchtimes by pupils who may have special dietary requirements (eg allergies, lifestyle choices, religious)
- Monitoring of Individual Healthcare Plans on a termly basis
- Attending any relevant training
- Following the policy and procedures carefully when administering any medication/medical treatment. See details in sections below.

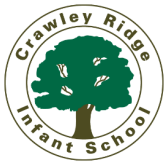
Teaching and other school staff have responsibility for

- Taking the same care that a reasonable, responsible, and careful parent would take in similar circumstances. There is no legal or contractual duty on staff to administer medicines or supervise a child taking medication, but staff do have a duty of care as specified and this duty of care could extend to administering medicines, including inhalers, or taking action in an emergency, such as administering auto-injector. This could extend to class teachers administering prescribed medicines during off-site visits, which would normally be given by office staff.
- Taking actions in emergencies (the consequences for taking no action are likely to be more serious than those of trying to assist in an emergency)
- Attending relevant training.

The RPA fully indemnifies all its staff against claims for alleged negligence providing they are acting within the remit of their employment. As the administration of medicines is considered to be an act of 'taking reasonable care' of the pupil, staff agreeing to administer medication can be reassured about the protection their employer would provide.

3.2 Parental Responsibility

- Parents, as defined in the Education Act 1996, are a child's main carers. They are responsible for making sure that their child is well enough to attend school and able to participate in the curriculum as normal.
- In most circumstances the administration of medicines is the responsibility of parents, and they should be administered at home unless it is essential, they are administered during the school day.
- Parents are responsible for the provision of accurate contact details and relevant medical information at the time of admission and ensuring that the information remains up to date.
- Parents should contact the school if they are requesting any medical support for their child during the day. Please see administering medicines in school below.
- The school cannot plan effective support arrangements unless parents provide sufficient information about their child's medical condition and any treatment or special care needed at the setting, at the admission stage, and keep the setting informed of any new or changing needs. If there are any special religious and/or cultural beliefs, which may



affect any medical care that the child / young person needs, particularly in the event of an emergency, it is the responsibility of the parent to inform the setting and confirm this in writing.

3.3 Administration of Medicines in school

3.3.1 Points for parents to consider before making a request

Parents are asked to note the following points:

- Wherever possible parents are asked to come to school and administer any medicines that are not suitable for self-administration e.g. antibiotics.
- Staff cannot be legally required to administer prescribed medication or supervise children taking it.
- School staff may be prepared to act as **volunteers** and administer prescribed medicines when it is **impossible** for parents to make other arrangements as listed below and where all the written information required is in place – see section 3.3.2.
- Medicines should only be taken to school **when essential**; that is where it would be detrimental to a child's health if the medicine were not administered during the school day.
- Some medication can be administered in school by the child with guidance, e.g. asthma inhalers.
- Wherever possible it would be helpful if medication can be prescribed in dose frequencies that occur outside school hours, e.g. 3xday medication before school, at 3pm pick up time and at bedtime. Parents are asked to consult the prescribing doctor about this.
- Teachers and other school staff have a duty of care to act as any reasonably careful parents would to make sure that pupils in their care are healthy and safe.

3.3.2 Procedures for parents to make a request for school staff to administer medicines

1. Parents should read carefully the guidance on the Pupil Medication request form.
2. (See Appendix 1 example form - please request a blank form from the School Office)
3. All written details must be completed on the request form and the form signed to indicate parental consent.
4. Parents should bring the request form to the school office for approval. If a member of staff is prepared to volunteer to administer medication and all the paperwork is in place, then the form will be signed by a member of staff.
5. It is the responsibility of parents to ensure that medicines do not exceed the expiry date as medicines that do exceed the expiry date will not be administered.
6. The school cannot accept any non-prescribed medication or medications that have been moved from their original packaging
7. Containers should be clearly labelled with the child's name, the type of medicine, dosage, storage instructions and expiry date and **MUST** be prescribed and issued from a doctor and pharmacist and in its original container.
8. Medicines should be brought to and collected from the school office by a responsible adult. Children must not carry medication to and from school.
9. Parents are asked to collect and sign for medication containers once the course has been completed or/and at the end of each academic year. School staff should not dispose of medicines or empty containers.

3.3.3 Procedures for Staff administering medication

- Office staff should make request forms available for parents to complete and offer guidance as necessary.



Policy: Supporting pupils with medical needs

Approval date: 11th December 2025

Review date: Autumn 2026

- Parents will be notified of the outcome by the Office.
- Office staff should receive and store medicine appropriately.
- Office staff should complete the records of administration held for individual children see record keeping below.
- Staff volunteering to administer medicines should follow the parent request information and school record keeping procedures – see information below.
- Staff involved with the administration of medicines should be alert to any excessive requests for medication by children / young people or by parents on their behalf. In any cases of doubt advice may be obtained from the School Health Team.

3.4 Storage of Medication in school

- Prescribed medication, such as antibiotics, brought in by parents will be stored in a safe place in the admin department of the school and away from the children. A designated space in the fridge is used for items needing cool storage.
- Inhalers and auto injectors are safely stored in non-locked cupboards in the child's classroom and 'follow' the child onto the school field, on school visits and to after-school clubs held on school premises.
- Non-prescribed medication, such as Calpol, is not kept in school (topical creams such as Aveeno used to soothe eczema may be kept for use by the individual at the discretion of the Headteacher).
- Parents are to collect and sign for all long-term medication at the end of each academic year.

3.5 Administration and Record keeping procedures in school

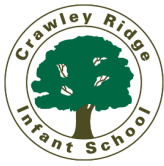
When any medication is administered the following procedure should be adopted:

- Wash hands
- Check the identity of the child
- Check the written parental consent form for administration of the medicine
- Check that the written instructions received from the parent and the medicines administration record match the instructions on the pharmacy dispensed label of the medicine container, i.e., name of medicine formulation strength and dose instructions
- Check that the name on the pharmacy dispensed label matches the name of the child
- Check any additional or cautionary information on the label which may affect the times of administration, give information on administration or affect performance, e.g. '1 hour before food', 'swallow do not chew'
- Check the medicine administration record to ensure the medicine is due at that time and has not already been administered
- Check the expiry date of the medicine
- Check that all the necessary equipment is ready, e.g., spoon, and administer the prescribed dose to the child
- Complete the record form giving details of day / time/ dosage and signature
- Return the medication to the storage place
- Wash hands

For self-administration follow all the steps in 3.5, but allow the child to manage the medication where this is requested under close observation.

3.6 Treatment for serious medical conditions

Some children may suffer from chronic medical conditions that may require urgent action to prevent a possible life-threatening situation from developing. Specially appointed staff may not be available to



carry out these tasks. Where there are willing staff, they may do so exercising their duty of care and having completed any required training.

The following medical conditions are commonly found amongst the school age population:

- Anaphylaxis
- Asthma
- Diabetes
- Epilepsy

Parents of children suffering from a serious medical condition should contact the school and complete an Individual Healthcare Plan (see Appendices 2 and 3). The plan should be completed and agreed between:

- the relevant medical experts
- the school
- the parent and, where appropriate, the child.

The plan needs to be tailored to the particular circumstances of the setting and child, but should include the following:

- a communication system for alerting trained setting staff (e.g., use of adrenaline auto-injector device etc)
- a system for calling an ambulance and where necessary contacting parents
- evacuating other children from the room (i.e., in the event of a seizure)
- first aid provisions

3.7. Sun Exposure and extreme hot weather

We recognise the need for sun safety and take precautionary measures in school. We help the children understand how to stay safe in the sun through assembly and classroom work. There are shaded areas in the outside areas.

Parents are asked to supply a sunhat and apply sun cream before school. Children may bring their own sun cream, clearly marked with their name, to school for self-administration.

3.8.1 Training

Where appropriate, specialist training for particular conditions will be arranged with Children & Families Health Surrey NHS, CSH Surrey, Leatherhead Hospital, Poplar Road, Leatherhead, KT22 8SD, under the School Nursing Service, Camberley Health Centre, 159 Frimley Road, Camberley, Surrey, GU15 2QA. Telephone 01276 21799. www.cshsurrey.co.uk.

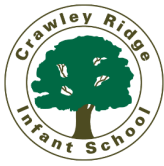
3.8.2 Information and support arrangements from health professionals

We value the positive links we have with other health agencies and professionals. We work closely with the school nursing team who visit the school for medical screening.

3.9 Action to be taken in the event of emergencies

Normally a child who is unwell or injured is looked after in school until a parent arrives.

In the case of a more severe illness or injury a member of staff will remain with the child and send two children for another adult to assist. Professional medical care will be sought if this is deemed appropriate and the parents would be contacted.



Policy: Supporting pupils with medical needs

Approval date: 11th December 2025

Review date: Autumn 2026

3.10 Arrangements advice for staff transporting children to hospital

In the event of a child needing hospital treatment an ambulance will be called.

Parents will be notified. A member of staff will accompany the child in the ambulance, if the parent is not present, and wait with the child until the parent/carer arrives. Staff should not take children to hospital in their own car.

3.11 Arrangements for publishing policy and procedures to parents, staff and others needing it

Parents can obtain the school's policy from the school website. Staff will be informed about the policy at induction. Governors will review the policy with the Headteacher annually.

3.12 Children leaving/starting School

On transfer, schools will be alerted that a child has an existing medical condition. For children joining our school, we collect medical information on our registration form and where appropriate, a meeting will be arranged to discuss their needs further.

4. MONITORING EVALUATION AND REVIEW

This policy will be reviewed and evaluated by staff and the Local Academy Board on an annual basis.

5. LINKS TO OTHER POLICIES

- Supporting Pupils with Personal/Intimate Care Needs Policy
- Health and Safety Policy
- Single Equality Policy
- Single Equality Scheme
- SEND Policy
- Drug and Alcohol Policy
- Emergency Plan
- Child Protection and Safeguarding Policy
- First Aid Policy
- Asthma Policy



APPENDIX 1 SAMPLE FORM – REQUEST FORM FROM SCHOOL OFFICE

REQUEST FOR MEDICATION TO BE ADMINSTERED

Child's Name		Child's Class	
Home address			
Condition or Illness			
Emergency Contact 1			
Emergency Contact 2			
GP Surgery		GP Tel No	

Please tick the appropriate box :

- My child will be responsible for the self-administration of medicines as directed below.
- I request & agree to members of staff administering medicines / providing treatment to my child as directed below.

- I agree to update information about my child's medical needs held by the school and that this information will be verified by my GP and/or medical consultant.
- I will ensure that the medicine held by the school has not passed its expiry date and understand that medication that has exceeded the expiry date will not be administered.
- I will collect the medication from school on completion of the course.

Parent Name : _____ Signed : _____ Date : _____

Name of Medicine	Dose	Frequency / Timing *	Date for last dose	Expiry date of Medicine

* Please note medication such as antibiotics will normally be given at lunchtime (12pm – 1pm)

Special Instructions : _____

Allergies : _____

Other prescribed medicines taken at home : _____



APPENDIX 2 SAMPLE FORM – REQUEST FORM FROM SCHOOL OFFICE

ALLERGY AND ANAPHYLAXIS HEALTHCARE PLAN

This child / young person is at risk of Anaphylaxis

Name: _____

DOB: _____

Current Year/Class: _____

GP/Local Hospital No: _____

(Name) _____ may suffer from an anaphylaxis reaction

if he/she is exposed to _____

(Name) _____ also has (other medical conditions)

His/her usual allergic symptoms are:

Procedures

In the event of an acute allergic reaction, staff will follow this procedure:

- ◆ Contact Ambulance Service — dial 112 or 999
- ◆ One adult will inform the headteacher immediately of action taken
- ◆ Then inform the following contact numbers in order of priority



Policy: Supporting pupils with medical needs

Approval date: 11th December 2025

Review date: Autumn 2026

Contact No 1 Name:

Telephone No

Relationship:

Contact No 2 Name:

Telephone No:

Relationship:

Contact No 3 Name:

Telephone No:

Relationship:

- ◆ One adult should stay with the child / young person to assess the severity of symptoms and in case of:

- Itchiness
- Tingling of lips and face
- Tummy cramps
- Vomiting
- Blotchiness of skin

Give _____ (Oral Antihistamine) ml at once

In cases of:

- Wheeziness
- Swelling of face and throat
- Difficulty in breathing/swallowing
- Feeling faint

Place child / young person on floor in recovery position (Safe Airway Position)

Give preloaded adrenaline injection to outer thigh
(this can be administered through light clothing).

- ◆ If no breathing/pulse, initiate basic life support (CPR).



Policy: Supporting pupils with medical needs

Approval date: 11th December 2025

Review date: Autumn 2026

- ◆ If there is no improvement to above action within 10 minutes and there are symptoms of weakness/floppiness pallor then:

Repeat preloaded adrenaline injection once more if 2nd preloaded adrenaline injection is available

- ◆ Hand over child / young person's care to Ambulance Team/parents on their arrival
- ◆ Handover preloaded adrenaline injection to ambulance staff or if this hasn't been done, safely dispose of it.
- ◆ Record all medication given with date and time of administration

Awareness

The headteacher will arrange for the staff in the setting to be briefed about his/her condition and about other arrangements contained in this document.

The setting staff will take all reasonable steps to ensure that _____(Name) does not eat any food items unless they have been prepared/approved by his/her parents.

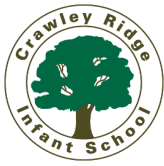
_____ (Name) parents will remind their child regularly of the need to refuse any food items, which might be offered to them by other children / young people.

In particular, _____(Name) parents will provide for him/her the following food items: _____

Medication/Staff training

The setting will hold, under secure conditions, appropriate medication, clearly marked for use by designated staff or qualified personnel and showing an expiry date.

It is the parents' responsibility to ensure the setting has appropriate up-to-date medication.



Policy: Supporting pupils with medical needs

Approval date: 11th December 2025

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The following volunteers from the school have undertaken to administer the medication. A training session was attended by:

Name _____ Date/s _____

Name _____ Date/s _____

Further advice is available to setting staff at any point in the future where they feel the need for assistance. The medical training will be repeated on _____

If there are proposals, which mean that, he/she may leave the setting site, prior discussions will be held between the setting and his/her parents to agree appropriate provision and safe handling of his/her medication.

STAFF INDEMNITY

Crawley Ridge Infant School is a member of the Department for Education's Risk Protection Arrangement (RPA), which provides indemnity for any setting staff who agree to administer medication to a child / young person given the full agreement of the parents and the setting.

AGREEMENT AND CONCLUSION

A copy of these notes will be held by the setting and the parents. A copy will be sent to the GP for information.

Any necessary revisions will be the subject of further discussions between the setting and parents.

Signed and agreed:

Parent / Guardian

Signature: _____

Date: ____/____/____

Print Name: _____



Policy: Supporting pupils with medical needs

Approval date: 11th December 2025

Review date: Autumn 2026

School / Setting Representative Agreement:

Signature: _____ Date: ____/____/____

Print Name: _____

Job Title: _____



APPENDIX 3 SAMPLE FORM – REQUEST FORM FROM SCHOOL OFFICE

INDIVIDUAL HEALTHCARE PLAN

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

Family Contact Information

Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

Clinic/Hospital Contact

Name	
Phone no.	

G.P.

Name	
Phone no.	

Who is responsible for providing support in school	
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Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

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Policy: Supporting pupils with medical needs

Approval date: 11th December 2025

Review date: Autumn 2026

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with



Policy: Supporting pupils with medical needs

Approval date: 11th December 2025

Review date: Autumn 2026

Staff training needed/undertaken – who, what, when

Form copied to