



SCHOOL POLICIES

Medical Conditions & First Aid

This policy was adopted by the Governors on: October 2026

The last review of this policy was: October 2026

This policy is due for review on: October 2029

Signed Headteacher: N. Craddock

Signed Chair of Governing Body: D. Garside

Hudson's approach

Hudson Primary School supports children with a wide range of medical, communication, sensory and additional support needs. We will work with families, pupils and health professionals so that medical conditions do not unnecessarily prevent attendance, learning, enrichment or participation.

This policy covers first aid, support for pupils with medical conditions, safe administration of medication, allergy and anaphylaxis safety, emergency response and record keeping. It must be read with each pupil's Individual Healthcare Plan (IHP), where applicable, and Hudson's safeguarding, SEND, intimate care, educational visits and health and safety arrangements.

1. Purpose, scope and principles

The school will maintain clear arrangements to provide appropriate first aid; support pupils with short- and long-term medical conditions; manage medication safely; reduce allergy and anaphylaxis risks; enable pupils to participate in school and off-site activities; ensure staff understand their responsibilities; and learn from incidents and near misses.

- Children's safety, dignity and welfare come first.
- Staff act promptly, calmly and within their training and the pupil's agreed plan.
- Medical information is handled sensitively and shared only with those who need it to keep a child safe.
- Reasonable adjustments and individual support should enable access rather than create unnecessary barriers.
- Parents/carers are partners in planning, and pupils are involved in ways appropriate to their age, understanding and communication.

2. Roles and responsibilities

Role	Responsibility
Governing Body / employer	Ensure suitable health and safety arrangements, a first aid needs assessment, appropriate equipment and personnel, and oversight of implementation.
Headteacher	Implement the policy; designate a medical needs lead and first aid lead; ensure suitable cover, training and staff information; respond to significant incidents and review arrangements.
Medical needs lead	Coordinate IHPs and medical records; liaise with families and healthcare professionals; ensure plans are current and accessible to relevant staff; coordinate training and medication arrangements.
First aid lead / appointed person	Maintain first aid equipment and procedures, check cover and supplies, communicate how to summon help, and report gaps to the Headteacher.
All staff	Know how to summon help, follow relevant IHPs and allergy procedures, act within training, maintain confidentiality and report incidents.
Parents/carers and pupils	Families provide accurate, updated information and agreed medication. Pupils are supported to understand their condition and seek help where appropriate.

3. First aid needs assessment and provision

Hudson will maintain a documented first aid needs assessment that considers site size and layout, pupil ages, Nursery/EYFS provision, the school's substantial SEND profile, activities and hazards, outdoor areas, clubs, trips, staff and visitor needs, and the availability of trained staff throughout the day. First aid cover must be sufficient and available without undue delay. Cover arrangements must account for absence, meetings, lunch and break duties, clubs and off-site activities. Current first aiders, the appointed person and how to summon help must be communicated to staff and displayed in suitable locations.

A suitable area must be readily available for assessment and short-term care of sick or injured pupils, offering privacy and dignity and appropriate access to washing facilities and a toilet where practicable. Pupils must be supervised while awaiting collection or medical assistance.

4. First aid response and emergency escalation

Any member of staff who becomes aware of an injury or illness should summon help promptly. Do not delay calling 999 where a serious or life-threatening emergency is suspected. Provide first aid within your training and competence and follow emergency services' instructions.

Call 999 immediately for an unconscious or unresponsive casualty, severe breathing difficulty, suspected anaphylaxis, severe bleeding, suspected serious head/spinal injury, a seizure requiring emergency escalation under the pupil's plan, or any other serious or life-threatening concern. If uncertain, seek urgent professional advice.

- Make the area safe and send a named person to summon the first aider and emergency services.
- Stay with the casualty and provide appropriate first aid within competence.
- Ask another adult to supervise other pupils and maintain safety.
- Send someone to meet the ambulance and direct responders to the location.
- Follow the pupil's IHP or emergency plan where relevant; do not delay urgent care to contact a parent.
- Inform the Headteacher or designated senior leader and arrange family contact.
- Record the event, treatment, advice and handover as soon as practicable.

5. Supporting pupils with medical conditions

Hudson will make arrangements to support pupils with medical conditions in line with current statutory guidance and the school's duties. A pupil should not be prevented from attending or taking part solely because they have a medical condition where suitable support can be arranged.

Individual Healthcare Plans (IHPs)

An IHP should be prepared where needed to ensure a pupil's medical needs can be managed safely and consistently. The plan should be developed with parents/carers and, where appropriate, the pupil and relevant healthcare professionals. Review it when needs or arrangements change, after a significant incident and at agreed intervals.

An IHP may include the condition and triggers; symptoms and emergency warning signs; medication, dose and instructions; when to call 999; staff training needs; arrangements for meals, PE, trips, clubs and evacuation; reasonable adjustments and communication needs; and review details.

Where no IHP is in place, staff must still follow reliable information available and seek advice from the medical needs lead. A missing plan must never delay emergency care.

6. Medication management

Medication will be administered or supported in line with school procedures, parental agreement where required, prescription/healthcare instructions and staff training. Routine arrangements should be agreed before the school accepts responsibility; emergency action must not be delayed where a child's health or life is at risk.

Area	Requirement
Receipt	Medication should be supplied by a parent/carer in original labelled packaging where possible, with the pupil's name, expiry date and clear written instructions. Staff must not alter doses.
Storage	Store securely with suitable temperature and access controls. Emergency medication must remain rapidly accessible and not be locked away in a way that delays use.
Administration	Check the correct pupil, medication, dose, time, route and instructions. Use authorised/trained staff. Record administration, refusal, omission, error or reaction.
Self-administration	May be agreed where safe and suitable, with the family and healthcare advice where appropriate. Staff must know the arrangements and contingency if the pupil cannot self-administer.
Expiry / disposal	Check dates and stock routinely. Return expired or no-longer-needed medication to parents/carers for safe disposal in accordance with school procedures.
Error / adverse reaction	Seek medical advice immediately; call 999 if serious. Inform the Headteacher and parent/carer, record the incident and review how recurrence can be prevented.

7. Allergy safety and anaphylaxis

Hudson will follow the DfE's allergy safety statutory guidance applicable in England. A separate Allergy Safety Policy must set out arrangements for identifying pupils at risk, IHPs, staff training, prevention, emergency response, record keeping and learning from incidents and near misses.

- Maintain an up-to-date register of known allergies and make relevant information accessible to staff who need it.
- Prepare and review allergy IHPs with families and appropriate healthcare input.
- Train staff in allergy awareness, recognising anaphylaxis and emergency response; provide additional training for staff who may administer emergency medication.
- Consider food, cross-contamination, food sharing, cooking, school meals, trips, clubs, visitors and celebrations.
- Do not rely on a blanket 'allergen-free' claim as the only control; use individual plans and practical risk reduction.
- Ensure pupils are not stigmatised or unnecessarily excluded because of an allergy.

Suspected anaphylaxis: act immediately in line with the pupil's emergency plan and staff training. Use the pupil's prescribed adrenaline auto-injector (AAI) promptly where indicated, call 999 and state that anaphylaxis is suspected. Do not allow the pupil to stand or walk around. Follow emergency operator advice and ensure urgent medical assessment even if symptoms improve.

Hudson must verify and implement current statutory requirements for spare/emergency adrenaline devices, including purchase, storage, accessibility, training, checks, recording and replacement after use or expiry.

The separate Allergy Safety Policy must specify the actual number and location of devices, responsible staff and authorisation process before this policy is adopted.

8. Asthma and other urgent medical conditions

Pupils with asthma should have access to their prescribed reliever inhaler and spacer where prescribed, with an individual plan where needed. Staff should follow the pupil's plan and call 999 if breathing difficulty is severe, symptoms worsen or the child does not respond as expected.

For epilepsy, diabetes, bleeding disorders, cardiac conditions or other medical needs, staff must follow the pupil's IHP and emergency plan. Staff must not improvise clinical treatment or exceed their training. Seek urgent help when symptoms are severe, recovery is not as expected or the plan directs emergency escalation.

9. First aid equipment, hygiene and infection prevention

First aid kits (Grab bags) must be located in identified places, checked regularly by a named person and replenished promptly. Supplies must be appropriate to school activities. Staff should use suitable personal protective equipment when there is a risk of contact with blood or bodily fluids, wash hands after care and dispose of contaminated waste under school procedures.

First aid kits should not contain medication for general use unless specifically authorised.

10. Accidents, incidents and records

Record first aid treatment and medical incidents promptly in the school's approved system. Include the pupil/adult's name, date, time, location, incident or symptoms, injury observed, first aid provided, medication given, advice or emergency services contacted, witnesses, parent/carers notification and the staff member completing the record.

Keep records factual, secure and in line with data protection arrangements. Escalate serious incidents, medication errors, anaphylaxis, emergency use of medication, significant deterioration, hospital transfer and near misses promptly to the Headteacher or designated senior leader. Complete accident and safeguarding records as required. Review incidents to identify learning, update plans and training, and report externally where required by law or employer procedure.

11. Confidentiality and communication

Medical information is confidential personal information. Share it with staff who need it to support the pupil and respond to emergencies. Confidentiality must not prevent necessary information being shared to protect a child's health or life.

Parents/carers should inform school about diagnosis, medication or emergency-plan changes. Staff must not discuss medical details in public or share them through personal messaging or social media.

12. Educational visits, PE, clubs and off-site activities

Before any visit or off-site activity, the leader must check the register against medical information and IHPs; confirm allergies and prescribed medication; check inhalers and AAIs are present, in date and immediately accessible; identify a named adult responsible for medical grab bags; and ensure relevant staff understand emergency procedures. Risk assessments must consider transport, accessibility, food, toileting, communication and additional support.

Pupils should not be excluded from PE, swimming, clubs, performances, residential or visits solely because of a medical condition. Plan reasonable adjustments and consult the family, pupil, SENDCO and healthcare professionals as appropriate.

Any decision that participation is unsafe despite reasonable adjustments must be individual, evidence-based, proportionate and reviewed.

13. Staff training and induction

The school will maintain records of first aid qualifications, paediatric first aid requirements for EYFS, medical-condition training, allergy awareness and pupil-specific training. Training must be appropriate to the tasks staff are expected to undertake and renewed in line with certificate requirements, guidance and assessed need.

Induction must explain how to summon a first aider, where kits and medical equipment are located, who the medical needs lead is, how to access relevant IHPs and how to record and report an incident. Staff must not undertake specialist medication tasks unless trained and authorised under school arrangements. Cover must be planned so trained staff are available throughout the day and for relevant off-site activities.

All staff must receive allergy awareness training in accordance with current DfE statutory guidance. Additional training is required for staff who may need to administer emergency medication or support specific medical conditions.

14. Monitoring, review and linked documents

The Headteacher and medical needs lead will monitor this policy using first aid records, incident and near-miss reviews, medication checks, staff training records, feedback from families and pupils, and the first aid needs assessment. Review annually and sooner after a serious incident, changes to the school's medical profile or updated guidance.

Related policies and documents

- Health and Safety Policy and First Aid Needs Assessment;
- Supporting Pupils with Medical Conditions arrangements and IHP template;
- Separate Allergy Safety Policy and anaphylaxis emergency procedures;
- Educational Visits Policy and Educational Visits Risk Assessment Master Template;
- SEND Policy and SEND Information Report;
- Safeguarding and Child Protection Policy;
- Intimate Care Policy;
- Medication consent, administration and recording forms;
- Accident reporting, data protection and records-retention arrangements.

Key guidance and references

DfE, First aid in schools, early years and further education (updated 14 February 2022):

<https://www.gov.uk/government/publications/first-aid-in-schools/first-aid-in-schools-early-years-and-further-education>

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

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

DfE, Supporting pupils at school with medical conditions:

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

DHSC, Using emergency adrenaline auto-injectors in schools:

<https://www.gov.uk/government/publications/using-emergency-adrenaline-auto-injectors-in-schools>