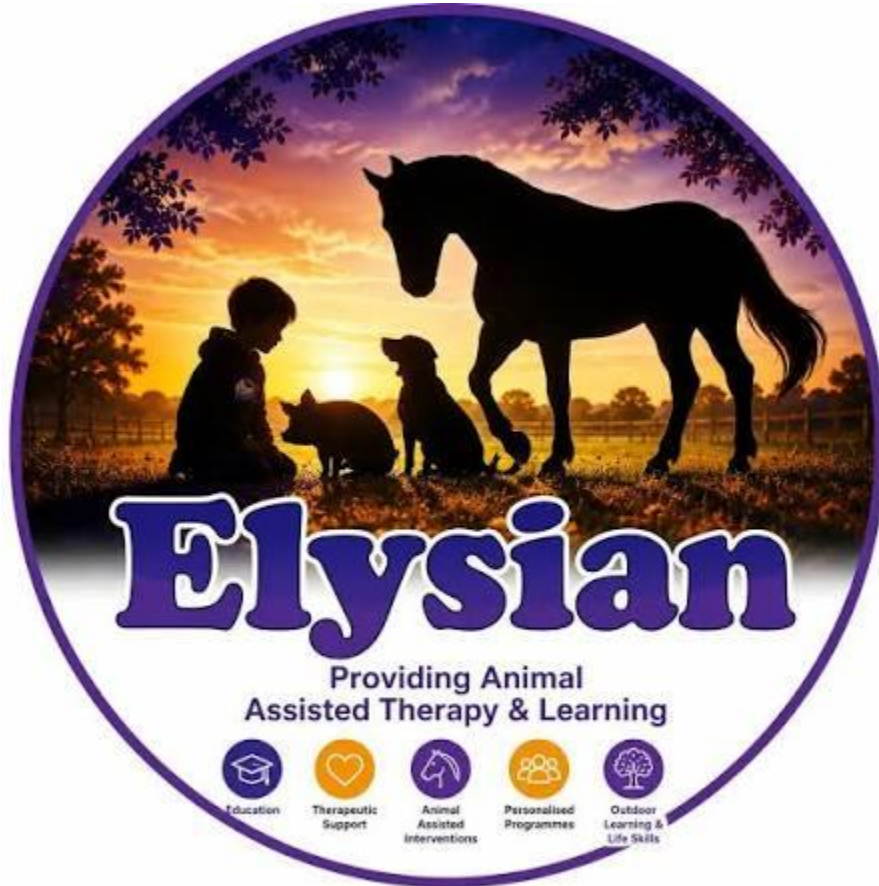


Elysian

Supporting Learners with Medical Conditions, Medication and First Aid Policy



Reviewed: September 2026

Date to review: August 2027

Review cycle: Annual, or sooner following statutory, safeguarding or operational change

Purpose and principles

Elysian is committed to safeguarding and promoting the welfare, health, inclusion and educational participation of children and young people. Learners with physical or mental health conditions will be supported so that they can access provision safely, participate as fully as possible and achieve good educational, social and emotional outcomes.

This policy sets out Elysian's arrangements for supporting medical conditions, receiving, storing and administering medicines, emergency medication, individual healthcare planning, first aid interfaces, allergy safety and the safeguarding response where a medical issue may indicate neglect, abuse or exploitation.

- Support will be child-centred, proportionate, inclusive and based on the learner's individual needs.
- Reasonable adjustments will be made where required under the Equality Act 2010.
- A learner will not be excluded from admission or normal provision simply because they have a medical condition, where safe and reasonable arrangements can be made.
- Medical information will be shared on a need-to-know basis, with appropriate confidentiality and information security.
- Staff will never force a learner to take medication. Refusal will be managed in accordance with the learner's IHP and emergency arrangements.
- Medical incidents, errors, serious incidents and near misses will be recorded, reviewed and used to improve practice.

Legal and statutory framework

Elysian has regard, as applicable to its status and provision, to:

- Keeping Children Safe in Education 2026 (KCSIE 2026).
- Children and Families Act 2014, section 100, and the DfE statutory guidance Supporting pupils at school with medical conditions (current 2017 guidance, pending revision).
- Equality Act 2010.
- Education (Independent School Standards) Regulations 2014 and current DfE Independent School Standards guidance.
- Health and Safety at Work etc. Act 1974 and Health and Safety (First-Aid) Regulations 1981.
- Early Years Foundation Stage statutory framework, where applicable.
- Children's Wellbeing and Schools Act 2026 and the DfE Allergy Safety in Schools guidance (July 2026), applied by Elysian as good practice while equivalent independent-school regulatory requirements are introduced.

- Human Medicines Regulations 2012, including provisions relating to emergency adrenaline auto-injectors and inhalers where applicable.

Where statutory guidance is updated, the most recent version takes precedence and this policy will be reviewed without waiting for the annual review date.

Safeguarding and medical conditions

KCSIE 2026 makes clear that a medical condition, including an allergy or a condition requiring delegated healthcare tasks, is not in itself evidence that a child is at greater safeguarding risk. However, staff must remain professionally curious and consider safeguarding where the management of a medical condition suggests that a child may be at increased risk of neglect, abuse or exploitation.

A safeguarding concern must be raised promptly with the Designated Safeguarding Lead (DSL) or deputy where, for example, essential information is repeatedly withheld, a learner is repeatedly sent to Elysian without essential medication or equipment, unexplained medication discrepancies arise, treatment is deliberately obstructed, fabricated or induced illness is suspected, or there are other indicators of harm.

Medical incidents are not automatically safeguarding referrals. The DSL will consider the full circumstances and decide whether safeguarding procedures, Family Help, children's social care or another multi-agency response is required. Medical and safeguarding records will be appropriately cross-referenced.

Staff must also recognise the additional safeguarding barriers that may affect children with SEND, disabilities or certain medical conditions, including communication barriers, dependency on adults for care, isolation, bullying, intimate care needs, and the risk of wrongly attributing indicators of abuse to the child's condition.

Roles and responsibilities

Advisory Board / Proprietor

- Ensure suitable arrangements, policies and resources are in place and effectively implemented.
- Receive assurance that staff training, competency, medication systems, emergency arrangements and record keeping are effective.
- Ensure this policy is readily accessible and reviewed at least annually and after significant incidents or regulatory change.
- Ensure allergy-safety arrangements are reviewed and that Elysian is ready to comply with any independent-school regulations when commenced.

Heads of Education and Learning / Director

- Hold overall operational responsibility for this policy and nominate site leads where appropriate.
- Ensure sufficient trained and competent staff are available, including contingency cover.
- Ensure IHPs and risk assessments are completed, implemented, reviewed and accessible to staff who need them.
- Ensure medication storage, records, stock checks, refrigeration monitoring and emergency arrangements are audited.
- Ensure relevant serious incidents, medication errors and near misses are reviewed and actions completed.
- Ensure the DSL is informed where a medical matter may also be a safeguarding concern.

Designated Safeguarding Lead

- Advise where a medical issue may indicate or contribute to a safeguarding concern.
- Ensure safeguarding and medical information are appropriately linked and shared when necessary to protect a child.
- Support appropriate information transfer where a learner moves setting or attends alternative provision.

Staff

- Know and follow this policy, relevant IHPs and emergency plans.
- Undertake training and competency assessment before carrying out healthcare procedures for which training is required.
- Administer medication only where authorised and within their competence.
- Record administration, refusal, omission, error, incident or near miss promptly and accurately.
- Report safeguarding concerns to the DSL without delay.

Parents and carers

- Provide accurate, current information about medical needs and emergency contacts.
- Provide medication and equipment in accordance with this policy and replace it before expiry.
- Complete written consent and participate in IHP development and review.
- Inform Elysian promptly of changes to medication, dosage, treatment or healthcare advice and provide updated written clinical instructions where required.

Learners

Learners will be involved in decisions about their healthcare in a way that reflects their age, development, communication needs and understanding. Where competent and agreed through the IHP, learners will be supported to carry and/or self-administer medication safely.

Notification and Individual Healthcare Plans (IHPs)

Medical information is obtained on admission and parents/carers must notify Elysian of changes. Support will not be delayed solely because a formal diagnosis is pending where needs are already evident.

An IHP will be considered where a learner has a long-term, complex, fluctuating or potentially life-threatening condition; requires emergency medication; needs delegated healthcare tasks; has an allergy requiring an individual plan; or where coordinated arrangements are needed to enable safe participation.

IHPs will be developed with the learner, parents/carers, relevant Elysian staff and healthcare professionals as appropriate. They will be reviewed at least annually, and sooner after a significant incident, hospital admission, medication change, change in condition, change of placement or where the plan is no longer effective.

An IHP should include, as relevant:

- condition, triggers, signs, symptoms and treatment;
- medication name, dose, route, timing, side effects, storage and expiry arrangements;
- emergency signs, action thresholds, emergency medication and when to call 999;
- allergy management and avoidance measures where applicable;
- diet, food/drink access, testing, equipment, environmental adjustments and access to toilets/rest;
- educational, communication, emotional and social support;
- self-management arrangements and supervision;
- staff training and competency requirements and contingency cover;
- who needs to know the information and how it will be shared;
- arrangements for off-site visits, transport and alternative provision;
- parent/carer consent and key contacts; and
- review date and named person responsible for coordinating the plan.

Staff training and competency

No member of staff will undertake a healthcare procedure or administer medication requiring specific clinical training unless they have received suitable instruction and, where appropriate,

competency confirmation. Training needs will be identified from IHPs and risk assessments and refreshed when required.

All staff will receive awareness appropriate to the cohort. Elysian will include allergy and anaphylaxis awareness, recognition of symptoms and emergency response in its annual training programme as good practice. Staff expected to use adrenaline auto-injectors will receive practical instruction appropriate to the devices in use.

Training records will show the subject, date, trainer/provider, staff attending, competency or sign-off where applicable, and renewal date. Leaders will monitor expiry and arrange cover so that trained staff are available during normal provision and off-site activities.

Managing medicines on Elysian premises

- Medicines will be administered when necessary to support a learner's health, wellbeing or access to education.
- Prescription medicine will not be administered without written parent/carers consent, except where lawful emergency action is required.
- Aspirin or medicine containing aspirin will only be given when prescribed by a doctor.
- Pain relief will only be administered in accordance with written consent/protocols after checking the previous dose and maximum permitted dosage.
- Where clinically possible, families may be encouraged to arrange dose frequencies outside provision hours, but this will not be used to create a barrier to attendance.
- Prescription medication must normally be in date, in the original pharmacy-dispensed container, clearly labelled with the learner's name, medicine, dose, route, instructions and storage requirements. Insulin may be supplied in an in-date pen or pump.
- Medication will never be shared between learners.
- Staff will not alter doses, crush tablets, mix medication into food/drink or otherwise change the method of administration unless this is supported by written clinical/pharmacy instructions.
- Emergency medicines and devices must be readily accessible to the staff supporting the learner and, where agreed, to the learner. They must not be locked away in a way that delays emergency access.

Non-prescription medicines

Elysian may administer non-prescription medicines only under a documented arrangement approved by senior leadership, with written parent/carers consent and clear dosage instructions. Before administration, staff must check the product, dose, timing, contraindications and whether a dose has already been given. Where the learner's circumstances or the medicine require clinical advice, this must be obtained before administration.

Non-prescription medication will be recorded to the same standard as prescription medication. Staff will not routinely administer medication merely for convenience, and repeated or unusual requests will be reviewed with parents/carers and, where appropriate, healthcare professionals or the DSL.

Receiving, checking and storing medication

Receipt

Medication must be handed directly to an authorised member of staff by a parent/carer, responsible adult or agreed transport provider. A learner must not be used as the routine means of transferring medication unless an IHP expressly permits them to carry it.

On receipt, authorised staff will check the learner's identity, medication name, quantity, label, dosage, instructions, expiry date, storage requirements and consent. The amount received will be recorded; tablets may be counted and liquid quantity recorded using a proportionate, reliable method.

Storage

- Routine medicines will be stored securely with access limited to authorised staff.
- Controlled drugs will be stored securely with access monitored and records maintained.
- Medicines requiring refrigeration will be kept securely at the required temperature, normally 2°C to 8°C unless the manufacturer states otherwise; temperatures will be monitored and action taken if outside range.
- Emergency medication will be stored so it is immediately accessible and travels with the learner where required.
- Keys/access arrangements must not create avoidable delay in an emergency.
- Medication stock and expiry dates will be checked routinely and before trips.

Administration procedure

Before administering medication, the authorised staff member must check:

- the learner's identity using appropriate identifiers;
- written consent and, where applicable, the IHP or emergency plan;
- the medication against the pharmacy/manufacture label;
- medicine, dose, route, time and any special instructions;
- expiry date and, where relevant, date opened;
- the medication administration record to ensure a dose has not already been given;

- whether any previous dose was given before arrival where this affects safe timing;
- necessary equipment and infection-control measures; and
- any known allergy, contraindication or caution relevant to administration.

Where there is any discrepancy, uncertainty, damaged packaging, unclear label or concern that administration may be unsafe, staff will not administer the medicine until advice has been obtained from senior leadership, the parent/carer, pharmacist, prescriber or emergency service as appropriate.

Administration should protect the learner's dignity and privacy while maintaining safeguarding. Where a healthcare procedure is intimate, the learner's IHP/intimate care plan will specify staffing, consent, privacy and safeguarding arrangements; a blanket requirement for two adults will not replace an individual risk assessment unless clinically or operationally required.

Recording medication

Immediately after administration, staff will record the date, time, medicine, dose, route, staff member and any relevant observation. A second checker/countersignature will be used where required by the learner's plan, medication type, local procedure or risk assessment.

Refused, omitted, delayed, vomited or partially taken doses, medication errors and near misses must also be recorded, with action taken and parent/carer notification. Serious incidents will be escalated to senior leadership and reviewed for learning.

Records will be clear, contemporaneous, confidential and retained in accordance with Elysian's retention schedule and data protection arrangements.

Refusal, omission and medication errors

A learner will not be forced to take medication. Staff will use agreed communication and support strategies, and will follow the IHP if the learner refuses. Parents/carers will be informed where appropriate. If refusal or omission creates an immediate or potentially serious risk, staff will follow the emergency plan and seek urgent clinical assistance.

If a medication error is suspected, staff must stop, assess the learner, obtain urgent clinical advice where needed, inform senior leadership and parents/carers, and call 999 if there is any immediate risk. The error and response will be recorded and reviewed. Where circumstances raise a safeguarding concern, the DSL will be informed.

Emergency medication and emergency response

Emergency arrangements will be clearly set out in the IHP or emergency healthcare plan. Staff supporting the learner must know the signs that require emergency action and where medication/equipment is located.

- Call 999 without delay where the learner has a life-threatening reaction, breathing difficulty, prolonged seizure, loss of consciousness or other emergency specified in the plan.
- Give emergency medication in accordance with the learner's plan, training and product instructions.
- Contact parents/carers as soon as practicable after emergency action has begun; contacting a parent must not delay calling 999.
- A suitable member of staff will remain with the learner and provide emergency services with relevant medical information and details of medication/treatment given.
- Used adrenaline auto-injectors should be handed to ambulance staff where possible and the time of administration communicated.

Allergy and anaphylaxis safety

Elysian will maintain a separate Allergy Safety Policy and will apply the DfE's July 2026 allergy-safety principles as good practice across its provision. This section provides the interface with medication management.

- Allergy information will be obtained on admission and updated when circumstances change.
- Learners with diagnosed allergies requiring individual arrangements will have an IHP and/or recognised allergy action plan, developed with parents/carers and healthcare professionals as appropriate.
- Staff will receive allergy awareness and emergency-response training appropriate to their role.
- Food, catering, animal-assisted activities, outdoor learning and visits will be risk assessed for relevant allergen exposure.
- Learner-prescribed adrenaline auto-injectors will be immediately accessible and accompanied by the learner's plan.
- Elysian will consider holding spare adrenaline auto-injectors in accordance with current law and DfE guidance, with a documented stock, expiry, storage, authorisation and replacement system.
- Allergic reactions, use of emergency adrenaline, serious incidents and near misses will be recorded and reviewed, with lessons and actions documented.

Because Elysian is an independent provision, leaders will monitor commencement of any regulations extending statutory allergy-safety requirements to independent schools and will update the separate Allergy Safety Policy and this policy promptly when those requirements take effect.

Self-management

Where a learner is competent and it is safe to do so, Elysian will support them to manage their own medication and devices. The IHP will specify what the learner may carry, access or administer, what supervision is required, how stock is monitored and what happens if the learner's ability to self-manage changes.

Off-site visits, transport and alternative provision

Learners with medical conditions will be supported to participate in educational visits and off-site activities wherever reasonably possible. Risk assessments will address medication, emergency access, trained staff, storage, transport, food/allergens, communication and contingency arrangements.

Medication taken off site must remain secure but immediately accessible when needed. The trip leader will ensure the relevant IHP/emergency information and administration record are available. Medication must not be decanted merely for convenience if this would conflict with labelling or safe administration requirements.

Where Elysian commissions or uses alternative provision, it will quality assure arrangements for the learner's medical needs and safeguarding, clarify responsibilities in writing, and ensure necessary information is shared securely. Repeated absence, part-time attendance or disrupted education linked to health needs will be considered in the wider safeguarding and support picture.

First aid and hospital treatment

First aid will be provided in accordance with Elysian's First Aid arrangements. First aid equipment will be maintained and checked routinely. Where emergency hospital treatment is required, staff will call 999 and provide the learner's relevant medical information and details of treatment or medication already given.

Parents/carers will be contacted as soon as practicable. Staff will not delay emergency treatment while awaiting a parent. Consent and treatment decisions will be managed by healthcare professionals in accordance with law and clinical practice.

Controlled drugs, sharps and disposal

- Controlled drugs prescribed for a learner will be stored securely with access restricted and monitored, while remaining accessible for administration when required.
- Administration and stock records will be maintained to a level proportionate to the medicine and risk.
- Sharps will be disposed of immediately into an appropriate sharps container.
- Expired, discontinued or surplus medication will normally be returned to the parent/carer for return to a pharmacy, with the return recorded. Elysian will not dispose of medicines in general waste or wastewater.
- Used emergency devices may be handed to ambulance staff where appropriate.

Infection prevention, hygiene and dignity

Staff will follow appropriate hand hygiene, personal protective equipment and infection-prevention procedures for medication and healthcare tasks. Healthcare support will be delivered respectfully, protecting privacy and dignity while maintaining safe safeguarding practice.

Unacceptable practice

It is unacceptable to:

- prevent a learner from readily accessing emergency medication where safe arrangements require immediate access;
- assume that all learners with the same condition need the same support;
- ignore the learner's views, parent/carer information or clinical advice without a documented and defensible reason;
- send a learner home routinely or prevent participation solely because of a medical condition where reasonable support can be provided;
- penalise attendance where absence is properly related to a medical condition and recorded in accordance with attendance requirements;
- prevent necessary access to food, drink, toilets, rest, testing or treatment;
- require a parent/carer to attend routinely to provide medical support because Elysian has failed to make appropriate arrangements; or
- create unnecessary barriers to trips, activities or animal-assisted learning.

Information sharing, confidentiality and transfer

Medical information will be shared with staff who need it to keep the learner safe and support participation. Information will be handled in accordance with data protection law and Elysian's privacy and safeguarding arrangements.

When a learner transfers setting, attends alternative provision or where significant safeguarding or safety issues exist, relevant medical and safeguarding information will be transferred securely and promptly. The DSL will be involved where information indicates a risk to the learner or others.

Monitoring, audit and learning

Senior leaders will monitor implementation through periodic audits of IHPs, consent forms, medication records, stock and expiry dates, fridge temperatures, training/competency, emergency medication access, incidents and near misses. Themes and actions will be reported through Elysian's governance arrangements.

Following a serious medical incident, use of emergency medication, medication error or significant near miss, Elysian will review what happened, whether the IHP/risk assessment was followed, whether information and training were adequate, and what changes are required.

Complaints

Concerns about the support provided for a learner's medical condition should be raised promptly with the relevant Head of Education and Learning. Formal complaints will be managed under Elysian's Complaints Policy and Procedure. Safeguarding concerns will be handled through safeguarding procedures and will not be delayed by the complaints process.

Staff medication

Staff are responsible for managing their own medication safely. Personal medication must be stored so that learners cannot access it, while remaining reasonably accessible to the staff member if required. Staff should inform their manager where a condition or emergency medication may require workplace adjustments or an emergency response plan.

Appendix: Medication administration checklist

1. Correct learner identified
2. Written consent/IHP checked
3. Correct medicine and pharmacy/manufacture label
4. Correct dose, route and time
5. Expiry/date opened checked
6. Previous dose/medication administration record checked
7. Allergy/cautions checked
8. Equipment and hygiene ready
9. Medicine administered, or refusal/omission managed
10. Record completed immediately
11. Parent/carer informed where required
12. Any incident or near miss escalated and recorded

Appendix: Minimum IHP content

- Learner details and photo where proportionate and agreed.
- Condition, allergies, triggers, signs and symptoms.

- Medication/treatment: name, dose, route, timing, storage, side effects and expiry.
- Emergency thresholds, emergency medication and 999 instructions.
- Daily support, reasonable adjustments and communication needs.
- Food, hydration, toileting, testing, equipment and environmental requirements.
- Self-management and supervision arrangements.
- Named trained staff and contingency cover.
- Trips, transport and alternative provision arrangements.
- Information-sharing permissions and contacts.
- Parent/carers consent, clinical input where appropriate, signatures and review date.

Appendix: Incident and near-miss review

For medication errors, allergic reactions, emergency medication use, serious medical incidents and significant near misses, record:

- date, time, location and people involved;
- what was expected to happen and what actually happened;
- immediate clinical response and advice obtained;
- medication/device used, dose and time;
- parent/carers and senior-leader notifications;
- whether the DSL was consulted and why;
- contributing factors, including communication, staffing, training, environment or equipment;
- learning, actions, owner and completion date; and
- whether the IHP, risk assessment, policy, training or stock system requires amendment.

Appendix: Key references used for the September 2026 rewrite

- Department for Education, Keeping Children Safe in Education 2026 (in force 1 September 2026).
- Department for Education, Supporting pupils at school with medical conditions (current statutory guidance, last updated 2017; DfE stated in July 2026 that it remains in force pending revision).

- Department for Education, Allergy Safety in Schools (published July 2026).
- Children’s Wellbeing and Schools Act 2026.
- ISA, Annual Compliance Toolkit: an overview of recent regulatory change and upcoming changes for September 2026 (document supplied by Elysian).