



Education Learning Trust

Werneth School

Medical Conditions and First Aid Policy

Date Updated	Autumn 2026
Next review	Autumn 2027

Revision History

Date	Document Version	Document Revision History	Policy Owner / Reviser	Document Approver
Summer 2026	1.0	New School Policy	Amy Pullar	AGB Approved Autumn 2026

1. Policy Statement

At Werneth School, we are an inclusive community that welcomes and supports students with medical conditions.

We provide an environment to enable students with all medical conditions the same opportunities to participate as others at school as far as is reasonably practicable.

In order to achieve this, we:

- Ensure all staff understand the impact medical conditions can have on students and their duty of care to students and young people.
- Provide staff training on the common medical conditions that affect students at this school.
- Ensure all staff feel confident in knowing what to do in an emergency via relevant training.
- Understand that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood.
- Understand the importance of medication being taken as prescribed by healthcare professionals.
- Ensure that all staff receive additional training about any students they may be working with who have complex health needs supported by an Individual Health Plan (IHP). This includes other staff not directly in contact with a student to ensure continuity of care in the absence of staff.

2. Scope

This policy covers four elements of medical needs:

ELEMENT ONE:

Emergency first aid response = immediate first aid for injuries/acute incidents

ELEMENT TWO:

Planned provision for medical needs = long-term systems, IHPs, storage, communication, inclusion, record keeping

ELEMENT THREE:

Unplanned provision for medical needs = urgent intervention linked to known medical conditions (asthma attacks, seizures, allergic reactions, diabetic incidents etc).

ELEMENT FOUR:

Illness during the school day = students becoming generally unwell during the day

3. ELEMENT ONE: Emergency First Aid Response

First aid is the immediate care given to a student, member of staff, or visitor who is injured while at school. First aid is intended to provide temporary support until recovery, collection by a parent/carer, or further medical treatment is obtained.

First aid may include:

- cleaning and dressing minor wounds
- applying ice packs
- monitoring symptoms
- responding to emergencies within the scope of staff training

The First Aid Co-ordinator is responsible for organising and overseeing the school's first aid arrangements to ensure students, staff, and visitors can receive appropriate care when needed.

The First Aid Co-ordinator will:

- Manage first aid provision – they will work with the Principal to ensure there are enough trained staff for the school and will maintain a register of staff training ensuring training is refreshed as required.
- Manage the first aid availability plan – they will oversee the availability and coverage of first aid trained staff within the school so that they know who is available to call upon should a first aid incident occur.
- Oversee first aid supplies – they will ensure first aid kits are stocked, accessible and up to date, ensure there are supplies in the school medical

room and make sure expired supplies are disposed of appropriately and replenished as necessary

- Co-ordinate the response to an injury – they will act as the first point of contact for any first aid matters, making sure procedures are followed when anyone on site becomes ill, or is injured, and they will contact parents/carers when students require medical attention

School First Aiders provide immediate care within the scope of their training and are not expected to diagnose medical conditions or provide ongoing medical treatment.

The school ensures that appropriately trained first aid staff are available during the school day who understand, and are trained in, emergency procedures. Emergency equipment, including a defibrillator, is accessible and first aid incidents are recorded appropriately.

In an emergency:

Identified, available and appropriately trained staff will act in accordance with their training, the student's Individual Healthcare Plan (IHP) where applicable, and guidance from emergency services. Staff are expected to act *in loco parentis* and in accordance with their duty of care, contacting emergency services where necessary and in consultation with the school senior leaders.

If a student requires hospital treatment, parents/carers will be informed as soon as possible, and a member of staff will accompany the student and remain with them until a parent/carer arrives.

The school senior leaders will review medical emergencies and incidents with the First Aid Co-ordinator, and any other staff involved in providing first aid care to identify any lessons learned or additional control measures required as soon as possible following emergencies.

4. ELEMENT TWO: Planned Provision for Medical Needs

The school recognises that some students have ongoing or long-term medical conditions requiring planned support during the school day.

Conditions may include (but are not limited to):

- asthma
- diabetes
- epilepsy
- allergies and anaphylaxis

- mental health needs
- other chronic or complex conditions

Overall responsibility for the medical oversight of these students rests with the Assistant Principal for Inclusion (API) and the school SENCO. Where a student requires medical attention, they may seek support from the First Aid Co-ordinator as appropriate.

The school is committed to creating an inclusive environment for students with medical conditions enabling students to participate fully in school life wherever practicable and making reasonable adjustments where required. The school believes in promoting independence in managing medical needs where appropriate.

Individual Healthcare Plans (IHPs)

Where appropriate, students with medical conditions will have an Individual Healthcare Plan (IHP) which includes details of the condition, symptoms and triggers, medication requirements, emergency procedures, staff responsibilities and healthcare professional advice.

IHPs are the responsibility of the Assistant Principal for Inclusion and the school SENCO and are:

- developed in partnership with parents/carers and relevant professionals
- reviewed regularly and updated following changes in medical need
- shared with the First Aid Co-ordinator who will manage any medicines in school for those students
- shared with relevant staff on a need-to-know basis
- securely stored in accordance with confidentiality requirements

Parents/carers are responsible for:

- providing accurate and up-to-date medical information
- informing the school of changes to medication or treatment
- ensuring medication supplied to school is in date and clearly labelled

Medical Conditions Information Pathway

Form sent out by school asking parents/carers to identify any medical conditions including:	API/ SENCO
• Transition discussions • At start of school year • New enrolment (during the school year) • Parents/carers inform school of any new diagnosis, school then to inform relevant medical professional	

School and relevant medical professional collate response and identify those needing individual health plans	API/SENCO
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Relevant medical professional contacts parents/carers to formulate new plan or review existing plan if necessary
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Relevant medical professional discusses new or reviewed IHP with VPI/SENCO in school. School staff training needs are identified at this point. IHP stored in school according to policy.	Relevant medical professional and API/SENCO
	
All parties to ensure IHP is in place and healthcare professionals have commissioned/delivered any relevant training. If there are any difficulties in getting this finalised, the School Nurse to discuss with the API/SENDSCO	Relevant medical professional and API/SENCO
	
All parties to ensure annual IHP review	Relevant medical professional and API/SENCO

There may be other students with unusual chronic conditions who need a care plan. The Assistant Principal for Inclusion and the SENCO should liaise with the School Nurse about them.

Please note that students with asthma no longer require an IHP but may have an asthma management plan from their doctor or specialist health care professional. This is a useful guide for parents on how to manage a student's asthma and could be useful to settings in some circumstances.

For students having an asthma attack, school should follow the 'Children's Asthma Plan'

Medication Administration for Known Medical Needs

The school maintains procedures for the safe administration of medication. Medication will only be administered with written parental consent and strictly in accordance with prescribed instructions by the First Aid Co-ordinator or any other appropriately informed,

available or trained staff. The school will make all reasonable efforts to administer medication at the required time during the school day and this will be recorded.

Designated and specifically trained staff take on the role of administering prescribed medication, but only with the written consent of the student's parent/carer.

The First Aid-Co-ordinator will ensure that medication is stored in line with parent/carer instructions and that medicine is given to students in line with the instructions on the form. They will also make sure medication is sent home with the student at the end of the day if is not a medicine normally kept on the premises.

Emergency medication must be readily accessible at all times, and some students may carry and self-administer medication where this has been agreed by the school and documented within an IHP.

Where required as part of an IHP, the school will follow its procedures relating to emergency medication and non-prescription medication, with the First Aid Co-ordinator supporting the implementation and oversight of these arrangements as appropriate.

The First Aid Co-ordinator will ensure the safe storage of medication which is kept in school as well as disposal of medication and sharps, and ensure medication records are kept up-to-date and stored securely.

5. ELEMENT THREE: Unplanned Provision for Medical Needs

The school recognises that students with known medical conditions may require urgent or unplanned intervention during the school day, even where planned support arrangements are in place.

The school ensures that:

- the API/SENCO/First Aid Co-ordinator and any other relevant staff are aware of students with medical conditions in their care
- relevant staff have access to emergency procedures and IHPs
- designated staff receive condition-specific training in addition to general first aid training
- emergency medication is readily available

Staff understand that some medical conditions may become serious or life-threatening if not managed promptly. Where a student experiences a medical difficulty relating to a known condition, trained medical needs staff may:

- administer emergency medication in accordance with training and consent arrangements
- assist students with medication
- monitor symptoms
- contact parents/carers

- seek advice from NHS services
- contact emergency services where necessary

The First Aid Co-ordinator maintains specific arrangements for responding to asthma attacks, allergic reactions/anaphylaxis, seizures, diabetic emergencies, mental health crises where immediate support is required. These are displayed in prominent areas around school and staff and students are made aware of where these are located.

Where staff identify concerns that a student's medical condition may not be well controlled, this will be recorded and discussed with the Assistant Principal for Inclusion/SENCO, First Aid Co-ordinator, parents/carers and the school nurse. The school recognises that medical needs may change over time and will review support arrangements where necessary.

Allergy management (see Allergy Policy) arrangements include:

- staff allergy awareness training
- emergency response procedures
- access to spare adrenaline auto-injectors where permitted
- measures to reduce allergen exposure risks

6. ELEMENT FOUR: Student Sickness During the School Day

Students who become unwell during the school day will be supported by their Year Inclusion Manager (YIM). Students should inform their Year Inclusion Manager if they require medication or are feeling poorly.

If a student does require medication (eg. antibiotics) during the school day, parents/carers will need to complete a **'Parental Agreement for the School to Administer Medicine Form'** at the school office at the beginning of the day. Should they wish to, parents/carers are welcome to come into the school to give medication during the day.

To ensure the safe and appropriate administration of medication within our setting, we will only administer antibiotics that are prescribed to be given more than three times per day. Antibiotics prescribed three times daily or fewer should be administered outside of school hours by the parent/carer.

Where we agree to administer antibiotics, staff will make every reasonable effort to give the medication at the prescribed time. However, we cannot guarantee that medication will be administered at an exact time. Every effort will be made to ensure doses are given as close to the required time as is reasonably practicable, while maintaining the safety and wellbeing of all students.

Depending on the nature of the illness or symptoms, the Year Inclusion Manager may contact the First Aid Co-ordinator to mobilise basic first aid and monitor the student. A

decision should be taken whether to contact parents/carers and arrange collection from school.

Parents/carers will always be contacted:

- following a head injury
- where symptoms worsen
- where further medical assessment may be required
- where a student is unable to remain in school safely or comfortably

School staff do not routinely take temperatures as part of illness assessment but will respond appropriately to symptoms indicating possible fever or infection.

Where appropriate, and with parental consent, the Year Inclusion Manager may administer approved medication in accordance with procedures **(see Appendix 1 and 2)** All significant illness, injury and medication administration will be recorded and stored.

Students who are temporarily unwell may receive reasonable short-term adjustments during the school day, including:

- modified participation in activities
- temporary withdrawal from physical activity where appropriate

The school will work with parents/carers to support students returning following illness, injury or hospital admission, including through phased returns or temporary adjustments where appropriate. The API/SENCO will write a risk assessment and will always follow medical guidance sought from a healthcare professional.

Administering Paracetamol

The Year Inclusion Manager must be wary of routinely giving paracetamol to students. If a student complains of pain as soon as they arrive at school and asks for painkillers, it is not advisable to give paracetamol until the amount given over the past 24 hours has been established as the student may have been given a dose of paracetamol before coming to school.

Many non-prescription remedies such as Beecham's Powders, Lemsip, Night Nurse etc. contain paracetamol. If paracetamol tablets are taken soon after taking these remedies, it could cause an unintended overdose. Staff must always gain parental consent to give paracetamol, and the parental consent form **(Appendix 1 and 2)** must be completed to ensure allergies and last dosage are logged.

Paracetamol must be administered according to the instructions on the box or label. Parents are required to confirm the dosage that they wish to be administered to their child up to the limit specified for their age on the manufacturer's instructions. Whilst staff will never give more than the recommended dose, they may give less than this if the parent requests it.

Stronger doses or combination drugs, which contain other drugs besides paracetamol must not be administered. It is recommended that the school keep its own stock of paracetamol and antihistamine.

School paracetamol/antihistamine must be stored securely in a lockable First Aid cupboard in an area not accessible to students.

Safe Storage – Emergency Medication

Emergency medication is readily available at all times to students who require it during the school day.

If the emergency medication is a controlled drug and needs to be locked away, it is kept in the first aid room where the keys are only available to the appropriate staff. The first aid room is kept locked at all times. Where medication is brought in from home, it is essential that it is safely and securely handed to the school office and the appropriate form is completed (**see Appendix 3**). Medications brought into school without the school's awareness would constitute a safeguarding concern.

Emergency medication for asthma is readily available in the First Aid room in a clearly identifiable box. Spare inhalers for trips may also be kept in the locked cupboard in the first aid room.

Emergency medication and copies of IHPs are incorporated into school visit risk assessments and taken with the student.

If the student concerned is involved in extended school services, then specific arrangements and risk assessments should be agreed with the parent/carers and appropriate staff involved.

Where medication needs to be stored in the fridge, medicine must be clearly labelled with the student's name and form and kept in a location that is not accessible to students.

Safe Storage – Non-Emergency Medication

All non-emergency medication is kept in a dedicated cupboard or fridge in a staff access only room. Students with medical conditions know where their medication is stored and how to access it.

Staff ensure that prescribed medication is only administered to those for whom it is prescribed.

Safe Storage – General

All medication stored at school is reviewed at the end of the school year with any expired (or due to expire) medicines disposed of/sent home as arranged by with parents. This includes blue inhalers and equipment such as spacers or blood sugar monitoring kits.

All emergency and non-emergency medication brought into school is clearly labelled with the student's name, the name of the medication, route of administration, dose and frequency, an expiry date of the medication. All medication is kept in its original container.

Medication is stored in accordance with the manufacturer's instructions, paying particular note to temperature. If appropriate, medication is stored in a dedicated fridge.

It is the parent's/carers' responsibility to ensure adequate supplies of new and in date medication comes into school at the start of each term with the appropriate instructions and they should ensure that the school receives this.

Safe Disposal

The First Aid Co-ordinator is responsible for checking the dates of medication and arranging for the disposal of any that have expired.

Parents/carers at this school are asked to collect out-of-date medication. If parents/carers do not pick up out-of-date medication, medication is taken to a local pharmacy for safe disposal.

Sharps boxes are used for the disposal of needles. Parents/carers obtain sharps boxes from the student's GP or paediatrician on prescription. All sharps boxes in this school are stored safely and securely.

If a sharps box is needed for an off-site or residential visit, the First Aid Co-ordinator is responsible for organising this with parents/carers. They will consult with the visit lead to ensure its safe storage and return to a local pharmacy, to school or to the student's parent/carer.

Disposal of sharps boxes - the sharps bin should be closed securely and returned to parents/carers who then need to take the sharps bin to the GP or pharmacy for disposal.

Hazardous waste is disposed of in a dedicated hazardous waste bin and collected and disposed of by an external contractor.

Training and Communication

The school ensures that:

- staff receive appropriate medical awareness updates
- designated staff receive condition-specific training where required
- relevant staff are informed of students' medical needs and emergency procedures
- The policy is communicated to staff, parents/carers, governors and relevant healthcare professionals where appropriate

Educational Visits and Risk Assessments

The school carries out risk assessments for educational/offsite visits ensuring that medication and IHPs accompany students on visits with appropriately trained staff in accompaniment. The school must ensure that it receives relevant medical information before visits take place.

Risk assessments are put in place when a student returns to school following significant illness or hospital admission.

Roles and Responsibilities in the School Community

Each member of the school and health community must ensure they know and understand their roles and responsibilities in maintaining an effective First Aid and Medical Conditions Policy.

We work in partnership with all stakeholders including the school's governing body, school staff, and community healthcare professionals and any relevant emergency practitioners to ensure the policy is planned, implemented and maintained successfully.

The following roles and responsibilities are used for the Medical Conditions Policy at this school.

These roles are understood and communicated regularly.

Parent / Carer's Responsibility

Parents/carers have a responsibility to:

- Inform the school if their child has a medical condition or complex health need
- ensure the school has a complete and up-to-date Individual Health Plan if their child has a complex health need
- inform the school about the medication their child requires during school hours
- inform the school/trip provider of any medication their child requires while taking part in visits, outings or field trips and other out-of-school activities
- tell the school about any changes to their child's medication, what they take, when, and how much
- inform the school of any changes to their child's condition
- ensure their child's medication and medical devices are labelled with their child's full name and form
- ensure that the school has full emergency contact details for their child
- provide the school with appropriate spare medication labelled with their child's name
- ensure that their child's medication is within expiry dates
- if there is an outbreak, or specific risk of an outbreak, as communicated by the school or other healthcare professional/organisation, then

parents/carers must follow the guidance issued by the school/relevant professional bodies e.g. DfE or Public Health England

- ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional
- if their child has complex health needs, ensure information from medical professionals is communicated to the school
- have completed/signed all relevant documentation and the Individual Health Plan if appropriate
- support the school in adhering to the plan
- support the school by engaging with any necessary Medical Action Plan/liaison with the external health professionals and other agencies if medical conditions/illness is causing attendance concerns
- understand that staff are not medical practitioners and not make unreasonable requests
- attend appointments at the school when requested

Students' Responsibility

Students have a responsibility to:

- treat other students with, and without, a medical condition equally
- tell the nearest staff member when they are not feeling well
- let a member of staff know if another student is feeling unwell
- treat all medication with respect
- know how to gain access to their medication in an emergency
- ensure a member of staff is called in an emergency situation

All School Staff Responsibility

All staff have a responsibility to:

- be aware of the potential triggers, signs and symptoms of common medical conditions and know who to contact in an emergency
- understand the school's First Aid and Medical Conditions Policy
- know which students have a complex health need and be familiar with the relevant content of the student's Individual Health Plan
- know who the school's first aiders are and where assistance can be sought in the event of a medical emergency
- know the members of the schools Senior Incident Management Team, as identified in the Critical Incident Policy, if there is a need to seek assistance in the event of an emergency
- be aware of the social integration of students with medical conditions and promote positive interactions
- understand the common medical conditions and the impact these can have on students

- ensure that any students with medical conditions are not excluded unnecessarily from activities they wish to take part in
- ensure that students have the appropriate medication or food during any exercise and that they are permitted to take it when needed
- follow universal hygiene procedures if handling body fluids
- ensure that students who present as unwell are directed to the Student Sickness Co-ordinator

Teaching Staff Responsibility

Teachers have an additional responsibility to also:

- be aware that medical conditions can affect a student's learning and provide extra help when students need it, in liaison with the API/SENCO and other relevant staff
- liaise with parents/carers and welfare officers if a child is falling behind with their work because of their condition
- use opportunities such as PSHE and other areas of the curriculum to raise awareness of medical conditions

Year Inclusion Managers' Responsibilities

The Year Inclusion Managers will:

- receive/assess reports of student illness
- question about the nature of their illness, if anything in their medical history has contributed to their current feeling of being unwell, if they have felt unwell at any other point in the day, if they have an Individual Health Plan and if they have any medication
- determine appropriate response and liaise with appropriate member of staff if they are unsure
- maintain effective communication with parents/carers including informing them if their child has been unwell at school
- administer medicines only with parent/carer agreement
- maintain appropriate records

First Aid Co-ordinator's Responsibilities

The First Aid Co-ordinator will:

- manage the school's first aid availability schedule
- ensure all staff and students know where to go for first aid
- oversee first aid supplies
- coordinate the response to injury
- ensure that parents/carers are contacted by telephone or text, prior to their child leaving school, when there is a clearly visible mark following an accident or injury

- ensure that parents/carers are contacted by telephone, as well as by accident form if their child has sustained any head injury or bump to the head. A text message can be sent when school have been unable to contact parent by phone.
- call an ambulance in an emergency and liaise with emergency services
- work with the Principal/VPI/SENCO/Medical Co-ordinator to ensure that this policy is being followed

First Aiders' Responsibility

First Aid trained staff have an additional responsibility to:

- give immediate, appropriate help to casualties with injuries
- when necessary, ensure that an ambulance is called
- ensure they are fully trained in their role as first aider

SENCO/Assistant Principal for Inclusion

The SENCO and Assistant Principal for Inclusion have the additional responsibility to:

- ensure the necessary arrangements are made to keep students with medical conditions safe in school
- ensure IHPs are created, kept up to date and reviewed regularly
- ensure medical conditions and relevant information is shared with the appropriate staff, including what to do in an emergency
- ensure students who need medication have it when they go on a school visit or out of the classroom
- work with the First Aid Co-ordinator to organise specialist training for staff where necessary
- ensure that students with medical conditions are able to appropriately access learning, with any barriers to learning minimised as far as possible
- ensure all students with medical conditions are not excluded unnecessarily from activities they wish to take part in by making reasonable adjustments
- ensure teachers make the necessary arrangements if a student needs special consideration or access arrangements in tests, exams or coursework
- ensure all records are stored securely to maintain confidentiality

Principal Responsibility

The Principal has a responsibility to:

- ensure the school is inclusive and welcoming and that the Medical Conditions and First Aid Policy is in line with local and national guidance and policy frameworks

- ensure the policy is put into action, with good communication of the policy to all staff, parents/carers and governors
- ensure every aspect of the policy is maintained
- ensure that if the oversight of the policy is delegated to another senior member of staff that the reporting process forms part of SLT meetings
- monitor and review the policy at regular intervals, with input from governors, parents/carers, staff and external stakeholders
- ensure that an evaluation of the policy takes place with governors about implementation of the Medical Conditions and First Aid Policy
- ensure through consultation with the governors that the policy is adopted and put into action
- liaise with the First Aid Co-ordinator to ensure adequate numbers of staff are trained first aiders with up-to-date certification

Governor Responsibility

The Governors have responsibility to:

- ensure the health and safety of their staff and anyone else on the premises or taking part in school activities (this includes all students). This responsibility extends to those staff and others leading activities taking place off-site, such as visits, outings or field trips.
- ensure the schools health and safety policies and risk assessments are inclusive of the needs of students with medical conditions and are reviewed annually
- make sure the Medical Conditions and First Aid Policy is effectively implemented, monitored and evaluated and regularly updated
- ensure that the school has robust systems for dealing with medical emergencies and critical incidents (see Critical Incidents Guidelines), at any time when students are on site or on out of school activities

Healthcare Professional Responsibility

The healthcare professionals have a responsibility to:

- help provide regular updates for school staff in managing the most common medical conditions at school at the school's request
- provide information about where the school can access other specialist training
- update the Individual Health Plans in liaison with API/SENCO and parents/carers
- deliver training as requested by the school where appropriate

7. Appendix 1

Verbal Consent from Parent/Guardian for School to Administer Paracetamol - Please complete fully and store securely

Name of Student		
Form:	Age:	
Name of Parent / Carer:	Relationship to young person:	
Telephone number contacted on:	Date & Time of phone conversation:	
State illness / medical reason for call:		
Questions to be read out and answered by parent/carer: All must be read out and response recorded	YES	NO
<i>Has the student ever had problems with PARACETAMOL / CALPOL?</i> If yes, refer to GP		
<i>Has the student had any doses of PARACETAMOL / CALPOL in the last 24 hours, if so at what time & what dose given?</i> Leave 4 hours between doses	YES	NO
<i>Has the student had any other medication that contains Paracetamol in the last 4 hours such as COLD OR FLU REMEDIES? (E.g. Lemsip, Beechams).</i> If yes - do not give any Calpol	YES	NO
Please state what dose Parent / Carer specifies (please refer to bottle or label as guidance and before administering) paracetamol		ML/MG
Parent/Carer is fully aware why you wish to give Paracetamol and what dose will be administered - please tick:		

<u>Declaration by the person contacting the Parent / Carer:</u> I have completed the above assessment questionnaire and assessed that there are no contradictions / reason why medicine cannot be administered. Signature Declaration by the person administering the medicine: I have checked that dose specified against information on the bottle and confirm it is age appropriate.

I have administered the medicine as follows:

Dose Date Time

Signature

Follow up message sent – office only ☐

8. Appendix 2

Verbal Consent from Parent/Carer for school to administer PIRITON / ANTIHISTAMINE—complete fully and store securely

Name of Student			
Form:		Age:	
Name of Parent / Carer:		Relationship to young person:	
Telephone number contacted on:		Date & Time of phone conversation:	
State illness / medical reason for call:			
Questions to be read out and answered by parent/carers: All must be read out and response recorded		YES	NO
Has the young person ever had problems with PIRITON / ANTIHISTAMINE? If yes, refer to GP			
Has the young person had any doses of PIRITON / ANTIHISTAMINE in the last 24 hours, if so at what time & what dose given? Leave 4 hours between doses		YES	NO
Has the student had any OTHER MEDICATION in the last 4 hours that might react with Piriton / Antihistamine? If yes or in doubt - do not give any Piriton/Antihistamine		YES	NO
Please state what dose Parent / Carer specifies (please refer to bottle or label as guidance and before administering) PIRITON / ANTIHISTAMINE		ML/MG	
Parent/Carer is fully aware why you wish to give Piriton / Antihistamine and what dose will be administered - please tick:			

Declaration by the person contacting the Parent / Carer:

I have completed the above assessment questionnaire and assessed that there are no contradictions / reason why medicine cannot be administered.

Signature

Declaration by the person administering the medicine:

I have checked that dose specified against information on the bottle and confirm it is age appropriate.

I have administered the medicine as follows:

Dose Date Time

Signature

Follow up message sent – office only



9. Appendix 3

Parental Agreement for School to Administer Medicine

The school has a policy that staff can administer medicine. However, the school is unable to give your child medicine unless you complete and sign this form.

Name of student

Date of birth

Form

Medical condition/illness

Medicine

Name/type of medicine (as described on the container)

Date dispensed Expiry date

Dosage and method

How many doses per day has been prescribed by the doctor for this medicine? _____

We do ask that wherever possible, medicines are administered outside of the school setting and therefore, in instances such as prescribed antibiotics, the school will only administer a dose in cases where more than 3 doses per day are required.

No. of Days /Times for medicine to be administered by school staff

(Please note that the school cannot guarantee that medicines are administered at a specific time although all efforts will be made to do so)

Special precautions _____

Are there any side effects that the school needs to know about?

Can your child self-administer? **Yes/No** (delete as appropriate)

Procedures to take in an emergency _____

Contact details

Name _____

Daytime telephone number _____

Your relationship to the child _____

I understand that I must deliver the medicine personally to the school office.

I understand that I must notify the school/setting in writing of any changes.

Signed _____ Date _____

If more than one medicine is to be given, a separate form should be completed for each one.

Legislation and Guidance

Trusts are responsible for the health and safety of students in their care.

Areas of legislation that directly affect a medical conditions policy are described in more detail in *Managing Medicines in Schools and Early Years Settings* (2005) and *Supporting Students at School with Medical Conditions* (2015). The main pieces of legislation are the Equality Act (2010) and the Children & Families Act (2014). These acts make it unlawful for service providers, including schools, to discriminate against disabled people. Other relevant legislation includes the Education Act 1996, the Care Standards Act 2000, the Health and Safety at Work Act etc.

1974, the Management of Health and Safety at Work Regulations 1999 and the Medicines Act 1968.

This section outlines the main points from the relevant legislation and guidance that schools should consider when writing a medical conditions and first aid policy.

The following policies need to be considered:

- Department for Education and Department of Health Special Educational Needs and Disability Code of Practice 0-25 years.
- Health and Safety Policy
- Critical Incidents Guidance
- Visits and Journeys Guidelines
- Records Management & Retention Policy
- Reporting of Injuries, Diseases & Dangerous Occurrences Regulations. (R.I.D.D.O.R)

Supporting Students at School with Medical Conditions (2015)

This provides guidance for schools and academies from the DfE on how to support children with medical conditions so they have full access to education, including school trips and physical education.

Equality Act (2010) (EA) and The Children and Families Act 2014 (CFA).

Many students with medical conditions are protected by the EA and CFA, even if they don't think of themselves as 'disabled'.

The Equality and Human Rights Commission (EHRC) (previously the Disability Rights Commission) publishes a code of practice for schools, which sets out the duties under the EA and gives practical guidance on reasonable adjustments and accessibility. The EHRC offers information about who is protected by the EA, schools' responsibilities and other specific issues.

School Responsibilities Include:

- Not to treat any student less favourably in any school activities without material and sustainable justification.
- To make reasonable adjustments that cover all activities – this must take into consideration factors such as financial constraints, health and safety requirements and the interests of other students. Examples of reasonable adjustments can be found in the Department for Education & Department of Health Special Educational Needs and Disability Code of Practice 2015 and is dealt with here on page 19. *
- To eliminate discrimination and promote equality of opportunity in accordance with the provisions of Section 149 of the Equality Act 2010, which came in to force on 5 April 2011 relating to the public sector equality duty.

- To promote disability equality in line with the guidance provided by the DFE and EHRC through the Disability Equality Scheme. *DfES publications are available through the DFE.

The Education Act 1996

Section 312 of the Education Act covers children with special educational needs, the provisions that need to be made and the requirements local health services need to make to help a local authority carry out its duties.

The Care Standards Act 2000

This act covers residential special schools and responsibilities for schools in handling medicines.

Health and Safety at Work Act etc. 1974

This act places duties on employers for the health safety and welfare of their employees and anyone not in their employment who may be affected by the activity. This covers the head teacher and teachers, non-teaching staff, students, visitors and contractors.

Management of Health and Safety at Work Regulations 1999

These regulations require employers to carry out risk assessments, manage the risks identified and to communicate these risks and measures taken to employees.

Medicines Act 1968

This act specifies the way that medicines are prescribed, supplied and administered.

Additional Guidance

Other guidance resources that link to a medical conditions policy include:

- Department for Education & Department of Health Special Educational Needs and Disability Code of Practice 2015
- Equality Act 2010: Advice for Schools
- Reasonable Adjustments for disabled students (2012)
- Supporting students at school with medical conditions (2014)
- The Mental Capacity Act Code of Practice: Protecting the vulnerable (2005)
- Every Child Matters: Change for Children (2004). The 2006 Education Act ensures that all schools adhere to the five aims of the Every Child Matters agenda
- National Service Framework for Children and Young People and Maternity Services (2004) – provides standards for healthcare professionals working with children and young people including school health teams

- Health and Safety of Students on Educational Visits: A Good Practice Guide (2001) – provides guidance to schools when planning educational and residential visits
- Misuse of Drugs Act 1971 – legislation on the storage and administration of controlled medication and drugs
- Home to School Travel for Students Requiring Special Arrangements (2004) – provides guidance on the safety for students when travelling on local authority provided transport
- Including Me: Managing Complex Medical Needs in School and Early Years Settings (2005)
- Medical Conditions at School Website - <http://medicalconditionsatschool.org.uk/>
- Managing Medicines and Providing Medical Support in Schools and Early Years Settings UNISON - <http://www.unison.org.uk/file/A14176.pdf>

Further Advice and Resources

The Anaphylaxis Campaign

PO Box 275
Farnborough
Hampshire
GU14 6SX
Phone 01252 546100
info@anaphylaxis.org.uk
www.anaphylaxis.org.uk

Asthma UK

Summit House
70 Wilson Street
London
EC2A 2DB
Phone 020 7786
info@asthma.org.uk
www.asthma.org.uk

Diabetes UK

Macleod House
10 Parkway
London
NW1 7AA
Phone 020 7424 1000
info@diabetes.org.uk
www.diabetes.org.uk

Epilepsy Action

New Anstey House

Gate Way Drive
Yeadon
Leeds
LS19 7XY
Phone 0113 210 8800
epilepsy@epilepsy.org.uk
www.epilepsy.org.uk

Long-Term Conditions Alliance

202 Hatton Square
16 Baldwins Gardens
London
EC1N 7RJ
Phone 020 7813 3637
info@ltca.org.uk
www.ltca.org.uk

Department for Education

Sanctuary Buildings
Great Smith Street
London
SW1P 3BT
Phone 0870 000 2288
Textphone/Minicom 01928 794274
info@dcfs.gov.uk
www.dcsf.gov.uk

Council for Disabled Children

National Children's Bureau
8 Wakley Street
London
EC1V 7QE
Phone 020 7843 1900
cdc@ncb.org.uk
www.ncb.org.uk/cdc

National Children's Bureau

8 Wakley Street
London
EC1V 7QE
Phone 020 7843 6000
www.ncb.org.uk

Health Protection Team Stockport

Public Health
Upper Ground Floor

Stopford House
Stockport
SK13XE
Phone 0161 474 2440
Healthprotection@stockport.gov.uk

Public Health England

Health Protection Team
0344 225 0562 Option 1
www.gov.uk/government/organisations/public-health-england