



Supporting Pupils with Medical Conditions Policy

ALLEN EDWARDS PRIMARY SCHOOL

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Supporting Pupils with Medical Conditions Policy

At Allen Edwards Primary School, we are committed to the United Nations Convention on the Rights of the Child (UNCRC) and have achieved our Gold accreditation through the dedicated work that our community has committed to and will continue to do. We strive to ensure that we are fulfilling the rights of all children by providing them with an inclusive environment where they feel safe and confident enabling them to reach their full potential and prepare them for an ever-changing world.

The Articles that link to this policy are:

Article 2	Non-Discrimination	At Allen Edwards, children, staff, parents and governors guarantee that children are not discriminated against because of their abilities. All staff work closely together to ensure that strategies and interventions are in place to support children so that they can achieve their full potential and can access a curriculum that allows them to flourish.
Article 6	Life, Survival and Development	At Allen Edwards, children, staff, parents and governors ensure that we provide a tailored curriculum that meets the needs of all children so that all children develop to their full potential.
Article 23	Children with a Disability	At Allen Edwards, children, staff, parents and governors work tirelessly to increase our children's independence, promote skills that will allow all of our children to develop to their full potential and treat every child with the dignity that they deserve.
Article 28	Right to Education	Every child has the right to an education. Primary education must be free and different forms of secondary education must be available to every child. Discipline in schools must respect children's dignity and their rights. Richer countries must help poorer countries achieve this.
Article 29	Goals of Education	At Allen Edwards, children, staff, parents and governors recognise that every child has talents and abilities that need to be encouraged and developed.

1. Aims

This policy aims to ensure that:

- Pupils with medical conditions, including physical and mental health conditions, are properly supported so that they can access education, remain healthy and participate fully in school life.
- Pupils, parents and staff understand the arrangements Allen Edwards Primary School has in place to support medical needs safely and consistently.
- Reasonable adjustments are considered so that pupils with disabilities and medical conditions are not placed at a substantial disadvantage.
- Support is planned in partnership with pupils, parents, relevant healthcare professionals and other agencies where appropriate.

The Governing Board will implement this Policy by:

- Making sure that sufficient staff are suitably trained and competent to provide the support required by pupils with medical conditions.
- Making relevant staff aware of a pupil's medical condition and the support required, while respecting confidentiality.
- Making sure cover arrangements are in place so that trained support remains available during the school day and for school activities.
- Providing supply staff and other temporary staff with the information they need to keep pupils safe.
- Developing, implementing and reviewing Individual Healthcare Plans where these are required.
- Ensuring medicines and medical devices are stored, accessed, administered and recorded safely.
- Ensuring pupils with medical conditions are included in school trips, visits, sport and other activities unless there is a clear evidence-based reason why this cannot safely be achieved.
- Working with Lambeth services where a pupil's medical needs affect attendance or require support beyond the school's reasonable arrangements.

The named person with overall responsibility for implementing this policy is Louise Robertson.

2. Legislation and Statutory Responsibilities

This policy meets the requirements of section 100 of the Children and Families Act 2014, which places a duty on governing bodies to make arrangements to support pupils at school with medical conditions.

The school will have regard to the Department for Education statutory guidance Supporting pupils at school with medical conditions, which remains the national statutory guidance in force while the Department for Education completes its 2026 review.

The school will also have regard to the Equality Act 2010, the SEND Code of Practice, the Human Medicines Regulations 2012, relevant controlled drugs legislation, Keeping Children Safe in Education and the statutory framework for the Early Years Foundation Stage where applicable.

From September 2026, the school will comply with the additional allergy safety duties introduced by the Children's Wellbeing and Schools Act 2026 and the Department for Education statutory guidance Allergy safety in schools. The school will maintain a separate published Allergy Safety Policy, review it at least annually and ensure it operates alongside this policy.

Where a child cannot attend school because of health needs, the school will also follow section 19 of the Education Act 1996, the Department for Education statutory guidance Arranging education for children who cannot attend school because of health needs, and Lambeth Council's Education support for pupils who are too ill to attend policy.

3. Roles and Responsibilities

3.1 The Governing Board

The Governing Board has ultimate responsibility for ensuring that arrangements are in place to support pupils with medical conditions. It will:

- Ensure this policy is implemented effectively and reviewed regularly.
- Ensure sufficient staff have received suitable training and are competent before taking responsibility for supporting a pupil with a medical condition.
- Ensure arrangements are in place for pupils with medical conditions to access the same opportunities as other pupils, including educational visits and physical activity.
- Ensure appropriate insurance and indemnity arrangements are in place.
- Receive assurance that serious incidents and near misses relating to allergy are recorded, reviewed and used to improve practice.

3.2 The Headteacher

The Headteacher will:

- Make sure all staff are aware of this policy and understand their role in its implementation.
- Ensure there are enough trained staff available to implement this policy and all Individual Healthcare Plans, including during staff absence and emergency situations.
- Take overall responsibility for the development and implementation of Individual Healthcare Plans, with day-to-day coordination delegated to the Deputy Headteacher for Inclusion where appropriate.
- Make sure staff supporting pupils with medical conditions are appropriately insured and understand the extent of that cover.
- Ensure systems are in place to obtain and update information about pupils' medical needs.
- Contact or seek advice from the school nursing service where a pupil has a medical condition that may require support in school.
- Ensure appropriate arrangements are made for pupils who are absent or at risk of prolonged absence because of health needs, including contact with Lambeth where the local authority duty may be engaged.

3.3 Staff

Supporting pupils with medical conditions during school hours is a shared responsibility. Any member of staff may be asked to provide support, although staff will not be required to carry out medical procedures or administer medicines unless they have agreed to do so and have received suitable training where this is needed.

Staff who take on responsibility for supporting pupils with medical conditions will receive sufficient and suitable training and must achieve the level of competence required for the task before providing support.

Teachers will take account of the needs of pupils with medical conditions in their teaching and classroom planning. All staff will know how to obtain help and how to respond when a pupil with a medical condition needs assistance.

3.4 Parents

Parents and carers will:

- Provide the school with sufficient, accurate and up-to-date information about their child's medical needs.
- Provide medicines, devices and equipment in line with the arrangements agreed with the school.
- Be involved in the development and review of their child's Individual Healthcare Plan where one is required.
- Tell the school promptly about changes to their child's condition, treatment, medication or emergency arrangements.
- Carry out any actions agreed as part of the Individual Healthcare Plan.

3.5 Pupils

Pupils with medical conditions will be involved as fully as possible in discussions about their support. Their views, wishes, age, maturity and ability to manage aspects of their own condition will be taken into account.

Pupils who are competent to manage their own medicines or devices will be encouraged to do so where this is safe and appropriate.

3.6 School Nurses and other Healthcare Professionals

The school will work with the Lambeth school nursing service and other relevant healthcare professionals where advice or support is needed. Lambeth's school nursing service supports children and young people aged 5 to 19, including with the management of long-term health conditions.

Healthcare professionals may advise on the medical condition, treatment, emergency response, staff training and the level of support required. They may contribute to an Individual Healthcare Plan where appropriate and may confirm staff competence for clinical procedures when this is necessary.

The school will not delay reasonable support solely because specialist advice is not immediately available. Interim arrangements will be risk assessed and agreed with parents, taking account of the information available.

4. Equal Opportunities

Allen Edwards Primary School will actively support pupils with medical conditions to participate in the full life of the school, including school trips, residential visits, clubs, sport and physical activity. Pupils will not be excluded from activities simply because they have a medical condition.

The school will consider and make reasonable adjustments where required by the Equality Act 2010. Risk assessments will identify practical steps needed to enable safe participation, and the school will consult the pupil, parents and relevant healthcare professionals where appropriate.

Some pupils with medical conditions may also have special educational needs or disabilities. Where a pupil has an Education, Health and Care Plan, the Individual Healthcare Plan will be linked to or form part of the wider statutory planning. Where emerging needs may require an Education, Health and Care needs assessment, the school will work with the family and Lambeth at the earliest appropriate stage.

Medical absence will be managed supportively. Pupils will not be penalised for absence that is properly recorded as illness or for medical appointments. The school will maintain appropriate contact, support access to learning and plan reintegration when a pupil is able to return.

Where illness is expected to result in 15 school days of absence or more, whether consecutive or cumulative, or where the pupil is otherwise not receiving suitable education, the school will consider a referral to Lambeth's Inclusion Team under the council's Too Ill arrangements. The school will provide the evidence required by Lambeth, including medical evidence of the attendance barrier, attendance information, details of support already provided, relevant contacts and any known risks.

Lambeth Inclusion Team can be contacted at inclusion@lambeth.gov.uk or 020 7926 6928. The school will keep the pupil on roll during illness and will work with Lambeth, the family and health professionals to secure suitable education and a phased return to school where required.

5. Being Notified that a Child has a Medical Condition

Parents, carers or a healthcare professional should notify the school when a pupil has a medical condition that may require support in school. The school will also act when it becomes aware of a possible medical need through attendance, safeguarding or pastoral information.

On notification, the Headteacher or delegated senior leader will coordinate an assessment of the support required. This may include discussion with the pupil and parents, review of medical information, contact with the school nursing service and consideration of whether an Individual Healthcare Plan is needed.

For pupils newly joining the school or receiving a new diagnosis, the school will make every reasonable effort to have appropriate arrangements in place before the pupil starts or, where this is not practicable, as soon as possible and normally within two weeks of notification.

Temporary or interim arrangements will be put in place where immediate support is required while a full plan is being developed.

6. Individual Healthcare Plans

The Headteacher has overall responsibility for the development of Individual Healthcare Plans. Day-to-day coordination is delegated to Nicola Harris, Deputy Headteacher for Inclusion.

An Individual Healthcare Plan will be used where a pupil's medical condition is long-term, complex, fluctuating, life-threatening, requires school staff to provide specific support or where a plan is otherwise necessary to manage risk and secure the pupil's inclusion. Not every pupil with a medical condition will need a plan.

Plans will be developed in partnership with the pupil, parents, relevant school staff and an appropriate healthcare professional where advice is available. If there is disagreement about whether a plan is required, the Headteacher will make the final school decision after considering the available evidence and the pupil's best interests.

Individual Healthcare Plans will be reviewed at least annually and sooner if the pupil's condition, treatment, medication, needs or circumstances change. A review may also be triggered by an incident, a near miss, concerns about the effectiveness of arrangements or a transition between settings or phases of education.

The level of detail will reflect the complexity of the pupil's condition and the support required. Plans will normally include:

- The medical condition, including triggers, signs, symptoms and treatment.
- The pupil's resulting needs, including medicines, doses, side effects, storage, equipment, testing, access to food and drink, dietary requirements, environmental adjustments and access to toilets or rest breaks.
- The support needed for the pupil's educational, social and emotional wellbeing, including arrangements for absence, catching up with learning and any examination access arrangements.
- The level of support required, including emergency arrangements and what constitutes an emergency for that pupil.
- Who will provide support, the training or competency required and the cover arrangements if a named person is unavailable.
- Who needs to know about the pupil's condition and how confidentiality will be respected.
- Arrangements for written parental consent for administration of medicines and any agreement for self-management.
- Arrangements for school trips, residential visits, clubs, sport and other activities outside the normal timetable.
- Emergency contacts and contingency arrangements.

Where a pupil has an Education, Health and Care Plan, the Individual Healthcare Plan will be linked to it or incorporated into it where appropriate.

From September 2026, any pupil whose allergy requires the school to put supportive arrangements in place will have those arrangements recorded in an Individual Healthcare Plan. A current Allergy Action Plan or Asthma Action Plan may be attached to and form part of the plan.

7. Managing Medicines

Medicines will be administered at school only when it is necessary to support a pupil's health or attendance and where the school has the required consent and information.

No pupil under 16 will be given prescription or non-prescription medicine without written parental consent, except where legislation or emergency arrangements provide otherwise. A pupil under 16 will not be given medicine containing aspirin unless it has been prescribed by a doctor.

Parents must complete the school's Administration of Medicine form when medication is to be given in school. Staff administering medicine will check the pupil's name, medicine, dose, method, time, expiry date and any special instructions before administration.

The school will normally accept prescribed medicines only when they are:

- In date.
- Clearly labelled for the individual pupil.
- Provided in the original container as dispensed by the pharmacist, with instructions for administration, dosage and storage.

Insulin may be provided in an insulin pen or pump rather than the original container, provided it is in date and clearly identifiable for the pupil.

Medicines will be stored safely and in accordance with their storage requirements. Emergency medicines and devices such as inhalers, adrenaline auto-injectors and blood glucose equipment will be readily accessible to the pupil and to staff who may need to use them. They will not be locked away in a way that prevents immediate access.

A written record will be made whenever medicine is administered on Cpoms. Parents will be informed where appropriate and always where an emergency medicine has been used or where there has been an error, incident or concern.

When medicines are no longer required, are out of date or the pupil leaves the school, they will be returned to parents for safe disposal. Sharps will be disposed of in an appropriate sharps container.

Non-prescription medicines will only be administered where this has been agreed by the Headteacher, is consistent with this policy and written parental consent has been obtained. Staff will check the maximum dosage and when any previous dose was taken before giving pain relief or other non-prescription medicine.

7.1 Controlled Drugs

Controlled drugs will be managed in accordance with the Misuse of Drugs Regulations 2001 and subsequent amendments.

A pupil who has been prescribed a controlled drug may carry it if they are competent to do so and this is agreed as part of their arrangements. They must not pass it to another pupil.

Controlled drugs held by the school will be stored securely with access limited to authorised staff. They will remain readily accessible in an emergency. A record will be kept of doses administered and, where appropriate, the amount held.

7.2 Pupils Managing their own Needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. The arrangements will be discussed with the pupil and parents and recorded in the Individual Healthcare Plan where one is in place.

Pupils will be allowed to carry their own medicines and relevant devices wherever possible. Where this is not appropriate, medicines and devices must still be accessible without delay.

Staff will not force a pupil to take medicine or undergo a procedure if they refuse. Staff will follow the agreed plan, assess any immediate risk, seek appropriate help and inform parents so that an alternative can be considered.

7.3 Unacceptable Practice

Staff will use professional judgement and consider each pupil's needs individually. It is generally unacceptable to:

- Prevent pupils from easily accessing their inhalers, medicines or medical devices when they need them.
- Assume that every pupil with the same medical condition requires the same treatment.
- Ignore the views of the pupil or their parents.
- Ignore medical evidence or clinical advice without a clear, recorded and evidence-based reason.
- Send pupils home frequently for reasons associated with their medical condition or prevent them from taking part in normal school activities unless this is necessary under their agreed plan.
- Send an unwell pupil to the school office or medical room unaccompanied or with someone unsuitable.
- Penalise a pupil because of absence related to their medical condition or necessary medical appointments.
- Prevent a pupil from drinking, eating, using the toilet or taking other necessary breaks to manage their condition.
- Require parents to attend school to administer medicine or provide routine medical support that the school should reasonably arrange.
- Create unnecessary barriers to participation in school trips, sport, clubs or other aspects of school life, including routinely requiring a parent to accompany their child.
- Administer medicine, or ask a pupil to administer medicine, in a school toilet.

8. Emergency Procedures

Staff will follow the school's emergency procedures and the pupil's Individual Healthcare Plan where one is in place. The plan will identify what constitutes an emergency for that pupil and the action to be taken.

If emergency medical assistance is required, staff will call 999 without delay. Parents will be contacted as soon as practicable after emergency action has started. If a pupil is taken to hospital, a member of staff will remain with the pupil until a parent or carer arrives, or accompany the pupil by ambulance where this is necessary.

Emergency medicines and devices must be immediately available. Staff will know the location of individual medicines and any school-held emergency inhaler or spare adrenaline devices that the school is authorised to hold.

From September 2026, the school's separate Allergy Safety Policy will set out arrangements for allergy awareness, reducing exposure to known allergens, responding to allergic reactions and anaphylaxis, access to prescribed and spare adrenaline devices, school trips, Individual Healthcare Plans and staff training.

Serious allergy incidents and near misses will be recorded and reported to the pupil's parents and the Governing Board, alongside any statutory reporting that is required. The school will review what happened, identify learning and update relevant policies, risk assessments, training or Individual Healthcare Plans.

9. Training

Staff who are responsible for supporting pupils with medical conditions will receive suitable and sufficient training before providing that support.

Training requirements will be identified through the development or review of Individual Healthcare Plans, risk assessments and the school's wider medical arrangements. Relevant healthcare professionals will advise on the type and level of training needed where specialist clinical input is required.

Training will:

- Be sufficient to ensure that staff are competent and confident in the support they are expected to provide.
- Meet the requirements set out in the pupil's Individual Healthcare Plan.
- Enable staff to understand the medical condition, likely triggers, signs, symptoms, treatments and emergency response relevant to their role.
- Be refreshed when required and when a pupil's needs or the relevant guidance changes.

All staff will receive information about this policy as part of induction and regular updates. Staff will know the school's arrangements for emergencies and how to obtain immediate assistance.

The school will ensure that allergy awareness and emergency response training meet the requirements of the separate Allergy Safety Policy and the national statutory allergy guidance from September 2026.

10. Record Keeping

The Governing Board will ensure that accurate written records are kept of medicines administered to pupils. Records will include the date, time, medicine, dose, person administering the medicine and any relevant outcome or concern.

Individual Healthcare Plans, medical information and consent records will be stored securely in individual folders on the system and on our Medical Tracker platform but will remain accessible to staff who need the information to keep the pupil safe. Information will be shared on a need-to-know basis in line with data protection requirements and safeguarding duties.

Training and competency records will be retained for staff who provide medical support.

Medical incidents, medication errors, serious allergy incidents and near misses will be recorded and reviewed. Where necessary, parents, healthcare professionals, the Governing Board, the local authority, the Health and Safety Executive or other relevant agencies will be notified in accordance with legal and local requirements.

11. Liability and Indemnity

The Governing Board will ensure that the school has an appropriate level of insurance and indemnity in place for staff who support pupils with medical conditions and that the cover reflects the level of risk.

Staff will only undertake medical procedures for which they have been appropriately trained and, where required, assessed as competent. The school will check with its insurer if a proposed arrangement falls outside normal cover.

12. Complaints

Parents and carers who have concerns about the support provided for their child's medical condition should raise them with the Headteacher in the first instance. The school will seek to resolve concerns promptly and in the best interests of the pupil.

If the matter is not resolved, parents and carers may use the school's Complaints Policy. Concerns about local authority provision for a child who cannot attend school because of health needs may also be raised with Lambeth through the appropriate council complaints route.

13. Links to Other Policies

This policy should be read alongside the following policies and guidance:

- Accessibility Plan
- Allergy Safety Policy
- Children with Health Needs who Cannot Attend School Policy
- Complaints Policy
- Equality Information and Objectives
- First Aid Policy
- Health and Safety Policy
- Safeguarding and Child Protection Policy
- SEND Information Report and SEND Policy
- Educational Visits Policy
- Lambeth Education support for pupils who are too ill to attend policy

Appendix 1: Individual Health Care Plan

The school will use an Individual Healthcare Plan format appropriate to the pupil's needs and informed by the Department for Education templates. For a pupil with allergy, a current clinical Allergy Action Plan may be attached to and form part of the Individual Healthcare Plan. The example below is the BSACI Allergy Action Plan used for pupils at risk of allergic reactions.

bsaci ALLERGY ACTION PLAN

improving allergy care through education, training and research

RCPCH AllergyUK

This child has the following allergies:

Name:

DOB:

Photo

Mild/moderate reaction:

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour

Action to take:

- Stay with the child, call for help if necessary
- Locate adrenaline autoinjector(s)
- Give antihistamine:

(If vomited, can repeat dose)

- Phone parent/emergency contact

Watch for signs of ANAPHYLAXIS

(life-threatening allergic reaction)

Anaphylaxis may occur without skin symptoms: ALWAYS consider anaphylaxis in someone with known food allergy who has **SUDDEN BREATHING DIFFICULTY**

A AIRWAY

- Persistent cough
- Hoarse voice
- Difficulty swallowing
- Swollen tongue

B BREATHING

- Difficult or noisy breathing
- Wheeze or persistent cough

C CONSCIOUSNESS

- Persistent dizziness
- Pale or floppy
- Suddenly sleepy
- Collapse/unconscious

IF ANY ONE (OR MORE) OF THESE SIGNS ABOVE ARE PRESENT:

- 1 Lie child flat with legs raised (if breathing is difficult, allow child to sit)



- 2 Use Adrenaline autoinjector **without delay** (eg. EpiPen®) (Dose: . . . mg)

- 3 Dial 999 for ambulance and say ANAPHYLAXIS ("ANA-FIL-AX-IS")

*** IF IN DOUBT, GIVE ADRENALINE ***

AFTER GIVING ADRENALINE:

1. Stay with child until ambulance arrives, do **NOT** stand child up
2. Commence CPR if there are no signs of life
3. Phone parent/emergency contact
4. If no improvement **after 5 minutes**, give a further adrenaline dose using a second autoinjectable device, if available.

You can dial 999 from any phone, even if there is no credit left on a mobile. Medical observation in hospital is recommended after anaphylaxis.

Emergency contact details:

1) Name:



2) Name:



Parental consent: I hereby authorise school staff to administer the medicines listed on this plan, including a 'spare' back-up adrenaline autoinjector (AAI) if available, in accordance with Department of Health Guidance on the use of AAIs in schools.

Signed:

Print name:

Date:

For more information about managing anaphylaxis in schools and 'spare' back-up adrenaline autoinjectors, visit: sparepensinschools.uk

© The British Society for Allergy & Clinical Immunology 5/2018

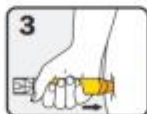
How to give EpiPen®



PULL OFF BLUE SAFETY CAP and grasp EpiPen. Remember: 'blue to sky, orange to the thigh'



Hold leg still and PLACE ORANGE END against mid-outer thigh 'with or without clothing'



PUSH DOWN HARD until a click is heard or felt and hold in place for **3 seconds**. Remove EpiPen.

Additional instructions:

If wheezy, GIVE ADRENALINE FIRST, then asthma reliever (blue puffer) via spacer

This is a medical document that can only be completed by the child's healthcare professional. It must not be altered without their permission. This document provides medical authorisation for schools to administer a 'spare' back-up adrenaline autoinjector if needed, as permitted by the Human Medicines (Amendment) Regulations 2017. During travel, adrenaline auto-injector devices must be carried in hand luggage or on the person, and NOT in the luggage hold. This action plan and authorisation to travel with emergency medications has been prepared by:

Sign & print name:

Hospital/Clinic:



Date:

Appendix 2: Asthma Card

School Asthma Card

To be filled in by the parent/carer

Child's name:

Date of birth:

Address:

Parent/carer's name:

Telephone - home:

Telephone - mobile:

Email:

Doctor/nurse's name:

Doctor/nurse's telephone:

This card is for your child's school. **Review the card at least once a year and remember to update or exchange it for a new one if your child's treatment changes during the year.** Medicines and spacers should be clearly labelled with your child's name and kept in agreement with the school's policy.

Reliever treatment when needed
For shortness of breath, sudden tightness in the chest, wheeze or cough, help or allow my child to take the medicines below. After treatment and as soon as they feel better they can return to normal activity.

Medicine	Parent/carer's signature

If the school holds a central reliever inhaler and spacer for use in emergencies, I give permission for my child to use this.

Parent/carer's signature: Date:

Expiry dates of medicines

Medicine	Expiry	Date checked	Parent/carer's signature

Parent/carer's signature: Date:

What signs can indicate that your child is having an asthma attack?

Does your child tell you when he/she needs medicine?
☐ Yes ☐ No

Does your child need help taking his/her asthma medicines?
☐ Yes ☐ No

What are your child's triggers (things that make their asthma worse)?

☐ Pollen ☐ Stress
☐ Exercise ☐ Weather
☐ Cold/flu ☐ Air pollution

If other please list

Does your child need to take any other asthma medicines while in the school's care?
☐ Yes ☐ No

If yes please describe below

Medicine	How much and when taken

Dates card checked

Date	Name	Job title	Signature / Stamp

To be completed by the GP practice

What to do if a child is having an asthma attack

- Help them sit up straight and keep calm.
- Help them take one puff of their reliever inhaler (usually blue) every 30-60 seconds, up to a maximum of 10 puffs.
- Call 999 for an ambulance if:
 - their symptoms get worse while they're using their inhaler – this could be a cough, breathlessness, wheeze, tight chest or sometimes a child will say they have a 'bummy ache'
 - they don't feel better after 10 puffs
 - you're worried at any time.
- You can repeat step 2 if the ambulance is taking longer than 15 minutes.

Any asthma questions?
Call our friendly helpline nurses
0300 222 5800
(9am – 5pm; Mon – Fri)
www.asthma.org.uk

© 2015 Asthma UK. Registered charity number in England and Wales 905541 and in Scotland SC099325

Appendix 3: Administration of Medicine

Administration of Medicine Agreement From

MEDICATION IN SCHOOL

Dear Parents and carers,

This form supports the school's policy on the safe administration of prescribed and non-prescribed medicines. Where possible, medicines should be prescribed in dose frequencies that allow them to be taken outside school hours. Where medicine is required during the school day, parents or carers must provide clear written instructions and the medicine must be supplied in accordance with the school policy.

Please complete the information below for any medicine that needs to be administered during the school day. The school may seek further information where instructions are unclear or where staff training is required. A copy of this form will be retained with the medication administration records.

The name of the medication: _____

The name of the student _____

What time is the medicine taken?	What is the dosage of the medication?

How long will your child require the medication?

Storage (in the fridge etc.):

Precautions relating to the medication ("caution, may cause drowsiness"):

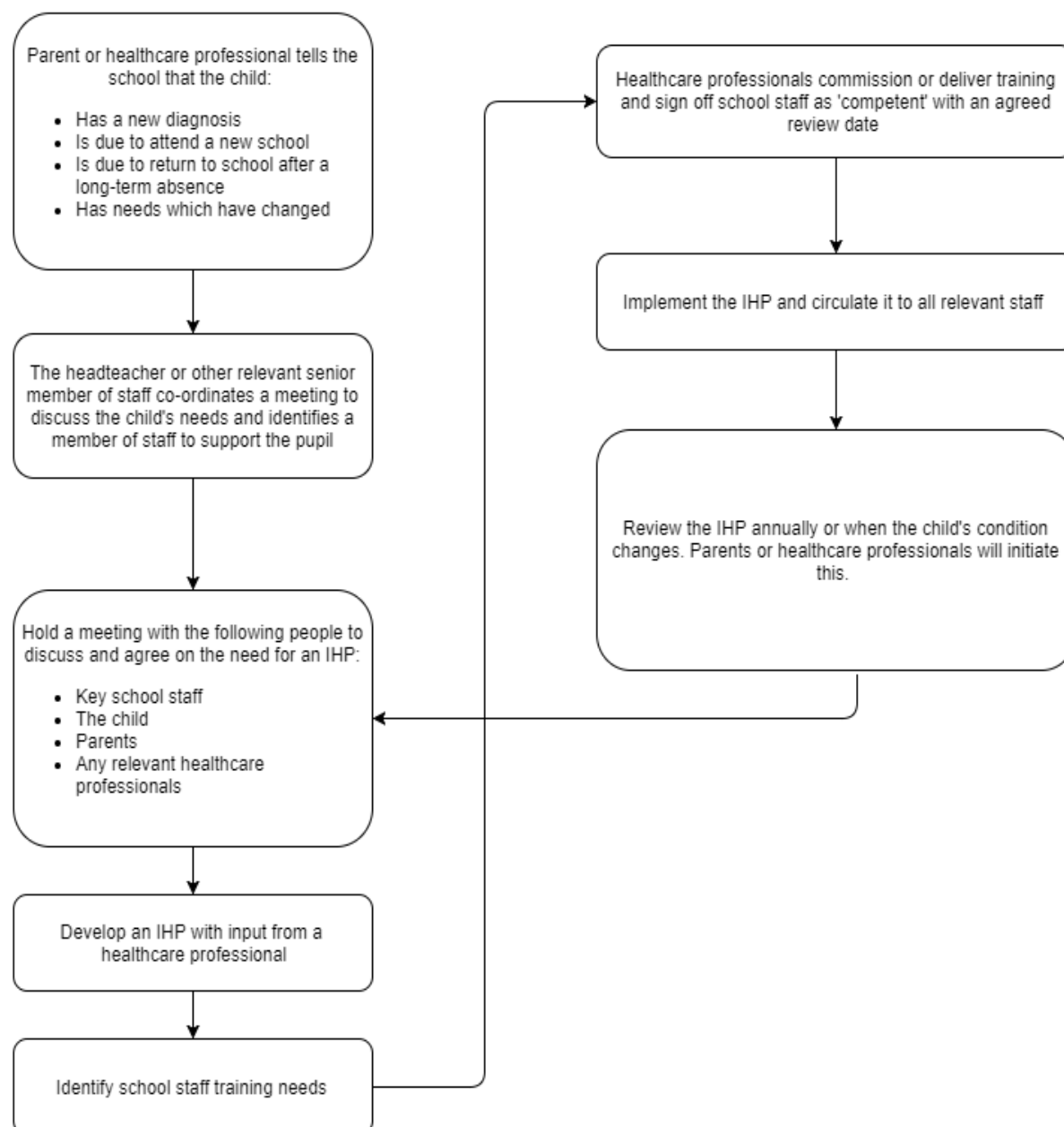
The name of the dispensing pharmacist/doctor:

The expiry date and the date of issue:

Many thanks.

Nicola Harris
Deputy Headteacher

Appendix 4: Being Notified a Child has a Medical Condition



Appendix 5: Individual Health Care Plan

Individual Healthcare Plan

For pupils with medical conditions, including allergy

This plan records the arrangements the school will put in place to support the pupil. It is not a clinical document. Relevant clinical care plans, Allergy Action Plans and other advice issued by healthcare professionals should be attached to this plan and followed.

1. Pupil details

Pupil name	
Date of birth	
Year group / Class	
Home address	
Parent / carer name	
Parent / carer contact number	
Alternative emergency contact	
Alternative contact number	

2. Plan details

Date plan started	
Date of most recent review	
Next planned review date	
School lead for this plan	
Healthcare professional involved	
Healthcare professional contact details	

3. Medical condition and information received

Medical condition or conditions

--

How the condition affects the pupil in school

--

Information and advice received from the pupil, parent or carer and healthcare professionals

--

Clinical care or action plan attached	Yes / No
Name of attached plan	
Healthcare provider that issued the plan	
Healthcare professional who prepared it	
Clinical plan review date	

4. Support and adjustments in school**Arrangements needed during the school day**

--

Reasonable adjustments required to support full participation in education and school life

--

Arrangements for food, drink, toileting, rest, movement or environmental needs

--

Arrangements to support learning, attendance, emotional wellbeing or catch-up following absence

--

5. Medicines, devices and equipment

Medicine / device / equipment	
Dose or use instructions	See attached clinical plan where applicable
Where it is stored	
Can the pupil carry it	Yes / No
Can the pupil self-manage	Yes / No / With supervision
Named staff or roles supporting use	
Expiry check responsibility	

Additional medicine, device or equipment arrangements

--

6. Allergy-specific arrangements, where applicable

Known allergen or allergens	
Allergy Action Plan attached	Yes / No
Prescribed adrenaline auto-injector	Yes / No
Number of prescribed devices held in school	
Location of prescribed device or devices	
Access to school spare AAI where legally permitted	Yes / No

School arrangements to reduce the risk of exposure to identified allergens

--

Food, catering, classroom, celebration and activity arrangements

--

7. Emergency arrangements

What staff should recognise as an emergency

--

Immediate action staff must take

--

When 999 must be called and what information should be given

--

Emergency medicine / equipment location	
Parent / carer contact arrangements	
Staff member to accompany pupil to hospital if required	
Other contingency arrangements	

8. Staff awareness and training

Staff who need to know about this plan and how information will be shared

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Training or competency required

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Training provider	
Staff trained	
Date completed	
Refresher due	

9. Educational visits, PE and activities outside the normal timetable

Arrangements needed so the pupil can participate safely and fully

Additional risk assessment required	Yes / No
Medication / equipment to accompany pupil	
Named responsible staff member or role	
Additional training required	Yes / No

10. Pupil involvement and independence

Pupil views and what the pupil says helps them manage their condition

Steps to support age-appropriate independence and self-management

11. Communication, confidentiality and information sharing

How relevant information will be shared with staff, including temporary and supply staff

Any agreed confidentiality arrangements

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12. Contingency arrangements

Arrangements if the usual trained member of staff is absent

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Arrangements if medication or equipment is unavailable, expired or unusable

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Arrangements for unexpected changes to the school day

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13. Linked plans and provision

SEND identified	Yes / No
Education, Health and Care Plan	Yes / No
Relevant SEND / EHCP links	
Other school plans or risk assessments linked to this IHP	

14. Review triggers

This plan should be reviewed at least annually and sooner when:

- the pupil's medical condition or support needs change
- medication, treatment, equipment or clinical advice changes
- the pupil moves class or there is a significant change in school arrangements
- a serious incident or near miss occurs
- the pupil, parent or carer, school or healthcare professional requests a review
- the existing arrangements are no longer effective

15. Agreement

Those involved confirm that this plan accurately records the school arrangements agreed at the date of signing. Clinical advice remains the responsibility of the relevant healthcare professional and should be attached where applicable.

Name	Role	Signature	Date

16. Review record

Review date	Reason for review	Changes made	Reviewed by

Attach relevant clinical care plans, Allergy Action Plans, risk assessments and other supporting documents to this IHP.