INSPIRING FUTURES PARTNERSHIP TRUST

POLICY FOR SUPPORTING PUPILS WITH MEDICAL CONDITIONS AT CHEPPING VIEW PRIMARY ACADEMY

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At Chepping View Primary Academy:

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1. INTRODUCTION 3
2. ROLES AND RESPONSIBILITIES 3
2.1 The Trustees for Inspiring Futures Partnership Trust will ensure that: 3
2.2 The Principal / Head of Academy will ensure that: 4
2.3 All Trust staff will not: 4
2.4 The SENDCo will: 5
2.5 Appointed Person 5
2.6 Transitional Arrangements 5
2.7 Staff Administration 5
2.8 Pupils: 6
2.9 Parents: 6
3. STAFF TRAINING AND SUPPORT 6
4. INDIVIDUAL HEALTHCARE and EMERGENCY CARE PLANS 7
5. MANAGING MEDICINES ON ACADEMY PREMISES 8
5.1 Prescribed medication 9
5.2 Short-Term Medical Needs- Prescription 9
5.3 Controlled Drugs 9
5.4 Non-Prescription Medication 10
5.5 Pain Relief 10
6. RECORD KEEPING 11
7. SAFE STORAGE OF MEDICINES 11
8. DISPOSAL OF MEDICINES 12
9. HYGIENE AND INFECTION CONTROL 12
10. INTIMATE CARE 12
11. DAY VISITS, RESIDENTIAL VISITS AND SPORTING ACTIVITIES 13
12. ACADEMY'S ARRANGEMENTS FOR COMMON CONDITIONS 13
12.1 Asthma 13
12.2 Allergies and Anaphylaxis 14
12.3 Epilepsy 15
12.4 Diabetes 15
13. LIABILITY AND INDEMNITY 16
14. COMPLAINTS 16
15. PROCEDURES UPON NOTIFICATION OF A MEDICAL CONDITION 16
16. ACADEMY PROCEDURES FOR MANAGING MEDICINES 16
16.1 Relevant forms 18
Appendix 1 19

1. INTRODUCTION

- The Trust has adopted the Department for Education policy on “Supporting Pupils at School with Medical Conditions’, which was issued under Section 100 of the Children and Families Act 2014. This guidance remains current and statutory as of 2026.
- The DfE guidance states that ‘medicines should only be administered at school when it would be detrimental to a child’s health or school attendance not to do so.’
- The aim of this policy is to ensure that the parents of children with medical conditions feel confident that the academy will provide effective support and that children feel safe and reach their full potential.
- Medical conditions may include both physical and mental health conditions where these impact a pupil's ability to access education.
- Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. The academy will comply with their duties under the Act to make reasonable adjustments to support pupils with disabilities.
- Some children with medical conditions may also have Special Educational Needs and Disabilities (SEND) and may have an Education, Health and Care Plan (EHCP) which brings together health and social care needs as well as the provision for their Special Educational Needs. Where the child has SEND identified within an EHCP, the individual Healthcare and/or Emergency Care Plan will be linked to, or become part of, the pupil's EHCP. The Healthcare and/or Emergency Care Plan will be developed with the child’s best interests in mind, to ensure that the risks to the child’s education, health and social wellbeing are managed, and that disruption is minimised, for children with medical conditions.
- Supporting a child with a medical condition during school hours is not the sole responsibility of one person. The Trust will work collaboratively with parents, pupils, healthcare professionals (and, where appropriate, social care professionals) and local authorities to ensure that the needs of pupils with medical conditions are met effectively.
- Medical information will be handled in accordance with the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018.
- This policy should be read alongside the Trust's Safeguarding and Child Protection Policy and Keeping Children Safe in Education (KCSIE).

2. ROLES AND RESPONSIBILITIES

2.1 The Trustees for Inspiring Futures Partnership Trust will ensure that:

- Arrangements are in place so that children with medical conditions;
    - are properly supported;
    - can play a full and active role in academy life;
    - can remain healthy and achieve their academic potential;
- Staff are properly trained to provide the support that pupils need;

- In line with their safeguarding duties, ensure that pupils' health is not put at unnecessary risk from, e.g. infectious diseases.
- In those circumstances, they do not have to accept a pupil at a time where it would be detrimental to the health of that child or others to do so.

- Pupils are not prevented from accessing prescribed medication where it is clinically appropriate for them to carry and administer it themselves

2.2 The Principal / Head of Academy will ensure that:

- A person is appointed to have overall responsibility for the implementation of this policy;
- All staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation;
- All staff including supply staff who support children with medical needs receive sufficient information to provide appropriate support;
- Individual Healthcare and/or Emergency Care Plans are developed, monitored and reviewed annually or earlier if evidence is presented that the child's needs have changed. Where appropriate Healthcare and/or Emergency Care Plans will be reviewed at the child's Annual Review.
- Sufficient staff are suitably trained and achieve the necessary level of competency before they take on responsibility to support children with medical conditions;
- Sufficient numbers of trained staff are available to support all individual healthcare plans to cover staff absence, contingency and emergency situations;
- A register of children in the academy is kept who have been diagnosed with asthma and/or prescribed a reliever inhaler;
- All staff are trained to recognise the symptoms of an asthma attack (and are able to distinguish them from other conditions with similar symptoms);
- At least one emergency inhaler kit is maintained and readily available in an emergency situation.
- Risk assessments (Event Specifics) for academy visits, holidays, and other academy activities outside of the normal timetable are undertaken for children with medical conditions;
- All staff are aware that medical information must be treated confidentially;
- Academy staff are appropriately insured and are aware that they are insured to support pupils in this way.

2.3 All Trust staff will not:

- Prevent pupils from accessing medication.
- Assume every pupil with the same condition requires identical support.
- Ignore medical evidence or healthcare advice.
- Exclude pupils from educational activities without a justified risk assessment.
- Send pupils home frequently or prevent attendance unnecessarily.

2.4 The SENDCo will:

- work with staff, parents, and healthcare professionals where a pupil has both medical needs and SEND, ensuring alignment with EHCPs where applicable.

2.5 Appointed Person

The Principal has been appointed to have overall responsibility for implementing the Trust's policy for supporting pupils with medical conditions within Chepping View Primary Academy. They will ensure that children with medical conditions are appropriately supported and that due consideration is given to their individual needs, especially where the medical condition affects their quality of life or has potential to be life-threatening.

2.6 Transitional Arrangements

- For children being admitted to Chepping View Primary Academy for the first time, where sufficient notice has been provided, the medical arrangements will be in place for the start of the relevant term. Academy staff will liaise with parents, health professionals and the child's current educational setting prior to their start date to access relevant information and training as appropriate. If a new member of staff needs to be employed, there may be a delay in being able to provide the correct support, due to employment checks and appropriate training. However, the academy will endeavour to minimise this as much as possible. No child can be denied a place because arrangements for their condition have not been made. However, in line with the academy's safeguarding duty, the child cannot be put in a situation that would be detrimental to their health. Where this is a concern, a risk assessment will be completed and discussed with parents to identify the right approach for the child in the interim.
- If a child is moving to the academy, mid-term, every effort will be made to ensure that arrangements are in place as soon as possible, ideally within 2 weeks.
- Where a new medical condition has been identified for a pupil already on roll, the academy will request as much information as possible from the parents, in order to have a full understanding of the support that will be required. A formal diagnosis is not required before support is put into place for a medical need. However, where there is a difference of opinion, the senior person responsible for managing medicines will make a judgment based on consultation with the parents and the medical evidence available.

2.7 Staff Administration

- Although administering medicine is not specifically listed as part of teachers' contracts, any teachers on the academy staff may be asked to provide support to pupils with medical conditions, including administering medicines, after appropriate training. Teaching Assistants with this responsibility listed in their job description, will also be expected to administer medicines, after appropriate training.
- All members of staff should know what to do and respond accordingly if they become aware that a pupil with a medical condition needs help.
- Staff must not give prescription medication or undertake healthcare procedures without appropriate training.

2.8 Pupils:

Where appropriate pupils with medical conditions;

- Will be consulted to provide information about how their condition affects them.
- Will be involved in discussions, as appropriate, about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare and/or emergency care plan.
- Pupils will be supported and encouraged to develop independence and manage their own care under the supervision of an adult wherever possible, as appropriate to their age and individual situation.

2.9 Parents:

Parents have the prime responsibility for their child's health. Parents include any person who is not a parent of a child but has parental responsibility for or care of a child.

- It only requires one parent to request that medicines are administered. As a matter of practicality, this will usually be the parent with whom the academy has day-to-day contact.
- Parents should provide the academy with sufficient and up to date information about their child's medical needs. Parents should tell the academy of any change in prescription which should be supported by either new directions on the packaging of medication or by a supporting letter from a medical professional.
- Parents are key partners and will be involved in the development and review of the Healthcare and/or Emergency Care Plan for their child.
- Parents should provide medicines and equipment as required by the Healthcare Plan and or Emergency Care Plan.

Parents should:

- bring their child's medication and any equipment into academy at the beginning of the academy year or as required;
- replace the medication before the expiry date;
- as good practice, take into academy the new asthma reliever inhaler when prescribed;
- dispose of expired items to a pharmacy for safe disposal;
- during periods of high pollen count, encourage their children, who have been prescribed anti-histamines, to take their medication before academy so that their condition can be better controlled during the academy day;
- keep their children at home when they are acutely unwell;
- Parents should ensure that they or another nominated adult are contactable at all times.

3. STAFF TRAINING AND SUPPORT

- The appointed Principal / Head of Academy will ensure that all staff are aware of the academy's policy for supporting pupils with medical conditions and their role in implementing the policy.

- Any member of staff who is given responsibility for administering prescribed medicines to a child will have appropriate training and guidance. This may be as simple as reading instructions and guidance on prescribed medication.
- Training needs will be identified during the development or review of individual Healthcare Plans and will be reviewed annually. The family of a child will be key in providing relevant information to academy staff about how their child's needs can be met, and parents will be asked for their views but will not be the sole trainer.
- Training will be provided for staff to ensure that they are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual Healthcare and Emergency Care Plans.
- An appropriate healthcare professional will provide training so that staff have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative and emergency measures so that they can recognise and act quickly if a problem occurs.
- Where a child has a specific condition which requires training in particular procedures, there will be more than one staff member trained, ideally three, in order to minimise the chance that the child will not be able to have their medical needs met due to staff absence.
- Annual training on administering inhalers and EpiPens will be provided by the academy. Training will be as recommended by the Trust or IFPT'.
- The academy maintains an automated external defibrillator (AED). Staff receive awareness training and emergency services will provide support during any cardiac emergency.
- One of the TAs with lead responsibility for the medical rooms and record keeping will attend managing medicines training annually and disseminate this to other First Aid trained staff.

4. INDIVIDUAL HEALTHCARE and EMERGENCY CARE PLANS

An Individual Healthcare Plan clarifies for staff, parents and the pupil the support that can be provided. Individual Healthcare and Emergency Care Plans for pupils with long-term and/or complex medical conditions, (e.g. anaphylaxis, diabetes, epilepsy) will be drafted with parents/pupils and other healthcare professionals where appropriate. Not all pupils with a medical condition will require one.

The plan will include:

- The medical condition, its triggers, signs, symptoms and treatments;
- The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons;

- Specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions;
- The level of support needed including in emergencies.
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional; and cover arrangements for when they are unavailable;
- Who in the academy needs to be aware of the pupil's condition and the support required;
- Any separate arrangements or procedures required for academy trips or other academy activities outside of the normal academy timetable that will ensure the pupil can participate.
- Where confidentiality issues are raised by the parent/child, the designated individuals are to be entrusted with information about the child's condition;
- What to do in an emergency, including whom to contact, and contingency arrangements.
- Where a child with a medical condition also has SEND, this should be noted on their care plan. E.g. speech and language, autism

Some pupils may have an Emergency Care Plan prepared by their lead clinician which can be used to inform the development of their Individual Healthcare Plan. Individual Healthcare Plans will be developed collaboratively with parents, pupils (where appropriate) and relevant healthcare professionals. The academy will coordinate the process and maintain the final plan.

Healthcare Plans and Emergency Care Plans will be reviewed at least annually and signed by parents; however, some plans may require more frequent review where a pupil's needs change. Where appropriate, the Healthcare Plan and/or Emergency Care Plan will also be reviewed as part of the pupil's Annual Review. Any updated information will be shared promptly by the SENDCo with the senior member of staff responsible for managing medicines.

5. MANAGING MEDICINES ON ACADEMY PREMISES

- Pupils will only be given prescription or non-prescription medicines after parents have completed a consent form.
- When no longer required, medicines will be returned to the parent to arrange for safe disposal. Parents will be asked to sign upon receipt of the medicine.
- Medicine brought into the academy must be given to the appointed teaching assistant in the appropriate year group.
- Emergency salbutamol inhalers are held in line with the Human Medicines (Amendment) Regulations 2014 and Department for Education guidance.
- Spare adrenaline auto-injectors are held in line with the Human Medicines (Amendment) Regulations 2017.

5.1 Prescribed medication

- The academy will only accept prescribed medicines that are in date, labelled, supplied in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception is insulin, which must still be in date but may be provided in an insulin pen or insulin pump rather than its original dispensing container.
- Parents should note the expiry date so that they can provide a new prescription as and when required. The academy will keep records of expiry dates and will endeavour to support parents by notifying them. However, responsibility for this lies with the parent.
- Medicines will only be administered at academy when it would be detrimental to a child's health or academy attendance not to do so.

5.2 Short-Term Medical Needs- Prescription

- Many children will need to take medicines during the day at some time during their time in the academy. This will usually be for a short period only, perhaps to finish a course of antibiotics, which will minimise the time that they need to be absent.
- **Antibiotics** prescribed three times a day can be taken outside of the academy day. The academy will support children who have been prescribed antibiotics that need to be taken **four times a day**. It is the parent's responsibility to bring and collect the antibiotic each day and to complete the necessary forms prior to medicine being administered. All medicines must be signed in and out by a parent via the appointed teaching assistant in the appropriate year group.

5.3 Controlled Drugs

- Some medicines prescribed for pupils (e.g. methylphenidate, known as Ritalin) are controlled by the Misuse of Drugs Act, 1971.
- The academy will keep controlled drugs in a locked non-portable container, to which only named staff have access but will ensure they are easily accessible in an emergency.
- Academy staff may administer a controlled drug to the child for whom it has been prescribed in accordance with the prescriber's instructions.
- A record will be kept of any doses used and the amount of the controlled drug held in academy, i.e. total number of doses (tablets) provided to the academy, the dose given and the number of doses remaining.
- Where the dose is half a tablet then this will be cut using a tablet cutter at the time that the medication is required;
    - Half tablets will be retained but not issued at the time of the next dose; a fresh tablet will be cut;
    - Half tablets will be returned to the parent for disposal.

- A controlled drug, as with all medicines, will be returned to the parent when no longer required, to arrange for safe disposal. If this is not possible, it will be returned to the dispensing pharmacist.
- Some pupils with epilepsy are prescribed rectal diazepam or buccal midazolam.

5.4 Non-Prescription Medication

- The academy acknowledges the NHS no longer prescribes some basic medications such as Piriton Syrup and Cetroben. As a result, some non-prescription medications may need to be kept with the academy.
- The academy will not keep Calpol or hayfever remedies to administer on an ad-hoc basis during the academy day. If pupils require medication to control hayfever symptoms, then parents will be asked to take their children to their GP for a formal diagnosis and advice on appropriate medication.
- Pupils will only be given non-prescription medicines after parents have completed a consent form.
- The academy will only accept non-prescription medicines that are in-date, labelled, provided in the original container and include instructions for administration, dosage and storage. Exceptions to this are for some skin creams which may not have expiry dates.
- Parents should note the expiry date so that they can provide a new medication as and when required.
- Medicines will only be administered at academy when it would be detrimental to a child's health or academy attendance not to do so.
- Where possible, medicines should be prescribed in dose frequencies which enable them to be taken outside academy hours.
- Parents will be asked to sign a consent form confirming that the medicine has been administered without adverse effect to the child in the past and that they will inform the academy immediately if this changes.

5.5 Pain Relief

- Pain relief will only be given with the consent of the Senior member of staff responsible for managing medicines, or, in their absence, the Principal / Head of Academy. For example, this may be necessary for pupils returning to the academy after sustaining a fracture, dental treatment or older girls with dysmenorrhoea (painful periods).
- Parents will be asked to sign a consent form when they bring the pain relief medicine to academy, which confirms that they have given the medicine to their child without adverse effect in the past and that they will inform the academy immediately if this changes. They will also be asked to confirm what time the medication will be administered at home.
- The academy will only administer paracetamol to those parents requesting pain relief is administered at school; generally non-prescription ibuprofen will not be given.

- If ibuprofen is the analgesic of choice then parents will be advised that a dose could be given before school (ibuprofen is effective for six hours); if required the academy will 'top up' the pain relief with paracetamol.
- A child under 16 will never be given aspirin-containing medicine unless prescribed by a doctor.
- A record will be made of all doses given in the medical log.

6. RECORD KEEPING

- The academy will keep a record of all medicines administered to individual pupils, stating what was administered, how much was administered, when it was administered and by whom in the medical log. Any side effects of the medication to be administered at academy will be noted.
- A second person will witness the administration of all controlled drugs. The member of staff administering the prescription or non-prescription medication can request a witness should they wish to.

7. SAFE STORAGE OF MEDICINES

- Medicines will be stored strictly in accordance with product instructions - paying particular note to temperature and in the original container in which dispensed.
- Pupils will know where their medication is stored and know who to advise if they require their medication. In some circumstances medication such as an EpiPen will follow the child and be kept in a medical wearable bag in the classroom and be worn by staff on duty in order to provide swift access.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens are always readily available.
- A few medicines require refrigeration. They will be kept in a clean storage container, clearly labelled, and stored in the designated medical fridge in the medical room.
- Some pupils with significant, complex and wide-ranging medical conditions may have their medicines stored in a separate, private medical room which contains a fridge, to be administered by an appropriately trained person. This ensures the time out of class is limited and that the pupil has the appropriate privacy in order to maintain dignity.
- Medication will not usually be prepared ahead of time and left ready for staff to administer although they may be some exceptions. In these instances, it must be agreed with the Senior member of staff responsible for managing medicines.
- An audit of pupils' medication will be undertaken at least every term disposing of any medication that is no longer required.
- It is the parent's responsibility to ensure their child's medication remains in date. The academy will remind parents when their child's medication is due to expire.

8. DISPOSAL OF MEDICINES

- Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. The return of such medicines to parents will be recorded;
- Controlled drugs should be collected at the end of the summer term by the parents. If parents do not collect controlled drugs, they will be taken to a local pharmacy for safe disposal.

9. HYGIENE AND INFECTION CONTROL

All staff should be familiar with normal precautions for avoiding infection and follow basic hygiene procedures.

Recommended hand washing techniques

10. INTIMATE CARE

- All children have the right to safety, privacy and dignity when contact of an intimate nature is required (for example assisting with toileting or removing wet/soiled clothing).
- The academy will take into account the religious views, beliefs and cultural values of the learner and their family as far as possible.
- In our academies, children are encouraged to act as independently as possible and to undertake as much of their own personal care as is practical.
- Wherever possible, intimate care should be undertaken by a member of staff known to the child and another appropriate adult should be aware that intimate care is taking place.
- For children who have a specific medical or SEND need relating to toileting, the SENDCo will ensure that a Health Care Plan is put into place. In instances where soiling or wetting occurs, safeguarding procedures must be adhered to. For pupils who have intimate care as a routine part of a healthcare plan a daily record of the intimate care should be kept and shared each day with parents.

- Students and volunteers should not assist with intimate care.

Staff should:

- Be given the appropriate training and adhere to these guidelines.
- When possible, contact the parents, negotiate, agree and record.
- Make other staff aware of the task being undertaken.
- Explain to the child what is happening.
- Consider the child's views and/or emotional responses.

11. DAY VISITS, RESIDENTIAL VISITS AND SPORTING ACTIVITIES

- The academy will actively support pupils with medical conditions to participate in academy trips and visits or in sporting activities;
- The academy will make reasonable adjustments for the inclusion of pupils in such activities;
- Some children may need to take precautionary measures before or during exercise, and may need access to asthma inhalers, for example. Staff supervising sporting activities will be made aware of relevant medical conditions and will consider the need for a risk assessment to be carried out.
- The academy will consider the reasonable adjustments that can be made to enable pupils with medical needs to participate fully and safely in visits. These arrangements will be included in the risk assessment for the event.
- One member of staff accompanying the visit will be asked to take on the lead role for administering medicines or healthcare procedures. The appropriate Individual Healthcare Plans, Emergency Care Plans, medicines, equipment and consent forms will be taken on academy visits.
- Medicines are administered and witnessed and recorded on a medical log sheet. This sheet is added to the appropriate medical log on return from the visit.

12. ACADEMY'S ARRANGEMENTS FOR COMMON CONDITIONS

12.1 Asthma

- An inventory of all pupils with asthma will be compiled and updated as required;
- All staff will be trained annually to recognise the symptoms of an asthma attack and know how to respond in an emergency.
- Inhalers are stored in the medical room in an easily accessible, cupboard.
- Inhalers should be taken to lessons held outside and to all off-site visits.
- When an inhaler is administered it will be recorded in the Medication log.
- Academy staff will endeavour to inform parents when their child's inhaler is due to expire. However, the responsibility for keeping up-to-date with expiry dates also lies with the parent.

- Parents are responsible for disposing of inhalers that have run out or have expired.
- Emergency salbutamol inhalers and spacers are kept in the medical room.
- Emergency salbutamol inhalers will only be given to pupils previously diagnosed with asthma whose reliever inhaler is not in the academy or whose inhaler has run out, who are on the register and whose parents have signed the consent form;
- All staff will know how and when to use the emergency salbutamol inhaler.
- Parents will be asked to sign a form giving permission to administer an emergency dose(s);
- Parents will be informed of any emergency dosages given in person or via telephone. This will also be recorded in the Medication log.
- The emergency inhaler itself can usually be reused, provided it is cleaned after use. The inhaler canister should be removed, and the plastic inhaler housing and cap should be washed in warm running water, and left to dry in air in a clean, safe place The canister should be returned to the housing when it is dry, and the cap replaced, and the inhaler returned to the designated storage place. It must not be reused if there is any risk of contamination with blood.
- A disposable spacer will be available for each emergency inhaler kit. This should be sent home with the child after use and should not be used with another child.

12.2 Allergies and Anaphylaxis

The academy recognises that some pupils may have allergies which range from mild reactions to severe life-threatening anaphylaxis. Appropriate risk assessments, healthcare plans and emergency procedures will be implemented where required.

- All staff will attend annual training on the symptoms of anaphylaxis, which includes information and practice on when and how to use the adrenaline auto-injector (EpiPen).
- An Individual Healthcare Plan and/or Emergency Care Plan will be developed which includes the arrangements the academy will make to control exposure to allergens. Plans will be developed with parents (and the pupil as appropriate)
- EpiPens are stored in the FS/KS1 and KS2 medical rooms stored in an easily accessible location known to staff, but not accessible to pupils. However, for pupils with a wide variety of food allergies, they may be stored in class and taken to the lunch hall in a wearable zipped bag by a staff member on duty.
- Prescribed EpiPens, and spare EpiPens where possible, should be taken on all off-site visits.
- When an EpiPen is administered it will be recorded in the Medication log.
- Academy staff will endeavour to inform parents when their child's EpiPen is due to expire. However, the responsibility for keeping up-to-date with expiry dates also lies with the parent.
- The academy may maintain spare adrenaline auto-injectors for emergency use in accordance with Department for Education and Department of Health guidance.

- Parents are responsible for disposing of EpiPens that have run out or have expired.
- Where there is a national shortage of EpiPens, the academy will follow any NHS advice issued regarding the use of EpiPens after expiry.
- The academy will work closely with parents and caterers to ensure that food options are inclusive.
- The academy will support students who may experience anxiety regarding their allergies, including access to appropriate pastoral care.
- IFPT ensures that the statutory relationship and health curriculum is taught including the lessons on allergy awareness.

12.3 Epilepsy

- An Individual Healthcare Plan and/or Emergency Care Plan will be developed.
- An appropriate number of staff will be trained in identifying the symptoms and triggers for epilepsy, including administering medication. Training will be as recommended by the Trust..
- There will be a trained member of staff available at all times to deliver emergency medication. Details will be recorded on the pupils Healthcare Plan.
- A medical room with a bed will be kept available so that if needed the pupil will be able to rest following a seizure, in a safe supervised place.
- The academy will enable pupils to take a full part in all outings and activities,
- The academy will liaise fully with parents and health professionals;
- Some pupils with epilepsy are prescribed rectal diazepam or buccal midazolam. This will be administered by staff who are specifically trained to undertake this task and have agreed to this responsibility.
- Two adults will be present for the administration of rectal diazepam, at least one being of the same gender as the child. The dignity of the pupil will be protected as far as possible, even in an emergency;

12.4 Diabetes

- An Individual Healthcare Plan will be developed;
- Pupils diagnosed with Type 1 diabetes who have been prescribed insulin will be supported by staff who have specifically agreed to this responsibility and have received training and support from the Diabetic Nurses Team.
- A suitable private place will be provided for blood tests to be carried out and administer doses, e.g. Medical Room;
- Pupils will not be prevented from eating drinking or taking toilet breaks whenever they need to in order to manage their medical condition effectively.
- If a pupil has a hypo, they will not be left alone; a fast-acting sugar, such as glucose tablets, a glucose rich gel, or a sugary drink or other snack provided by the parent will be given immediately.

- Once the pupil has recovered, slower acting starchy food, such as a sandwich or two biscuits and a glass of milk, will be given, some 10-15 minutes later.
- Insulin is stored in the classroom of the child with diabetes in an unlocked location which is not accessible to children.
- Any prescribed Insulin should be taken on all off-site visits.
- When insulin is administered it will be recorded in the FS/KS1 or KS2 Medication log.
- Parents will be informed when their child's insulin is due to expire.
- Parents are responsible for disposing of insulin that has run out or has expired.
- Close communication will be kept with parents regarding persistent hypos or other blood sugar issues.

13. LIABILITY AND INDEMNITY

- The Trustees will ensure that the appropriate level of insurance is in place for staff providing support to pupils with medical conditions and appropriately reflects the level of risk.
- The academy will contact their insurers to extend their cover should a medical intervention fall outside the conditions covered by this policy.

14. COMPLAINTS

- Parents/pupils should discuss any concerns directly with the academy if they become dissatisfied with the support provided. If for whatever reason this does not resolve the issue, they may make a formal complaint via the academy's complaints procedure.

15. PROCEDURES UPON NOTIFICATION OF A MEDICAL CONDITION

- The academy will get as much information as possible from the parent and/or healthcare professional, in order to understand the support required.
- The senior member of staff responsible for managing medicines will discuss with the parent and/or healthcare professional, whether a Care Plan is appropriate.
- If appropriate the senior member of staff, will work with the parent and/or healthcare professional to put a plan in place. (See appendix 1 for procedure).
- The lead TA for medical and any other staff members who will be supporting the child will attend the meeting where possible or will be briefed on the finalised Care Plan.
- The Care Plan will be shared with all other relevant staff.

16. ACADEMY PROCEDURES FOR MANAGING MEDICINES

- Medicines should be brought to the appointed teaching assistant in the appropriate year group. The appointed teaching assistant will ask the parent to sign the relevant consent form.
- The appointed teaching assistant will check that any **prescribed** medicine:
    - is in its original container, as dispensed by a chemist, and that details match those

on the form;

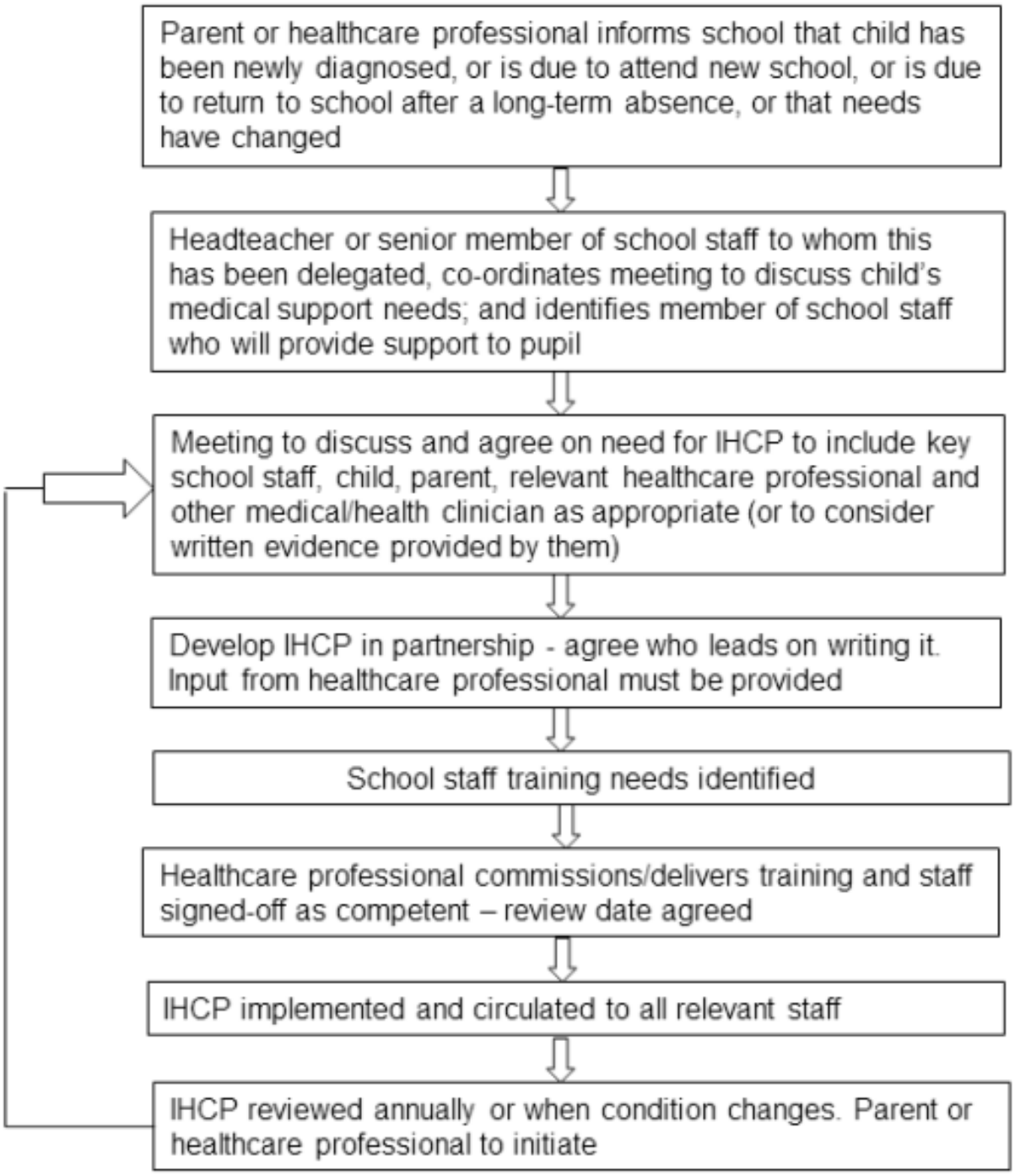
    - The label clearly states the child's, first and last name, name of medicine, dose required, method of administration, time/frequency of administration.
    - The patient information leaflet is present to identify any side effects;
    - The medication is in date.
- The appointed teaching assistant will check that any **non-prescribed** medicine:
    - The patient information leaflet is present to identify any side effects;
    - The medication is in date.
- The Senior staff member for managing medicines will counter check the above before signing the consent form.
- The designated person will file the consent form and store the medicine appropriately.
- Medicines requiring refrigeration will be kept in the fridge in a clean storage container.
- The temperature of the fridge will be taken weekly and recorded.
- A trained member of staff will administer medication at the appropriate time.
- The following procedure will be followed:
    - The pupil will be asked to state their name – this is checked against the label on the bottle, consent form and record sheet.
    - The name of the medicine will be checked against the consent form.
    - The time, dosage and method of administration will be checked against the consent form.
    - The expiry date will be checked and read out.
    - The medicine is administered.
    - The record sheet is signed by the member of staff who has administered the medication. A second member of staff will witness controlled medication.
    - Any possible side effects will be noted.
    - The medicine should be returned to appropriate storage.
- If a child refuses to take their medicine, staff will not force them to do so. Staff will record the incident and follow agreed procedures and contact parents to inform them. If a refusal results in an emergency, the emergency procedures detailed in the Emergency Care Plan will be followed.
- If the designated person has concerns about a procedure or a medication that they are being asked to administer they will not administer the medicine but check with the parents or a health professional before taking further action.
- At the end of the day parents of pupil's prescribed antibiotic medication (four doses a day) should collect their child's medicine from the appropriate teaching assistant in the appropriate year group.

16.1 Relevant forms

- Individual Healthcare Plan
- Emergency Healthcare Plan
- Parental agreement for academy to administer prescription medicine.
- Medicine signing in and out sheet.
- Parental agreement for academy to administer non-prescription medicine.

Relevant forms are available from the Trust's shared drive or academy administration team.

Appendix 1

Model process for developing individual healthcare plans – DfE Guidance

Annex A: Model process for developing individual healthcare plans