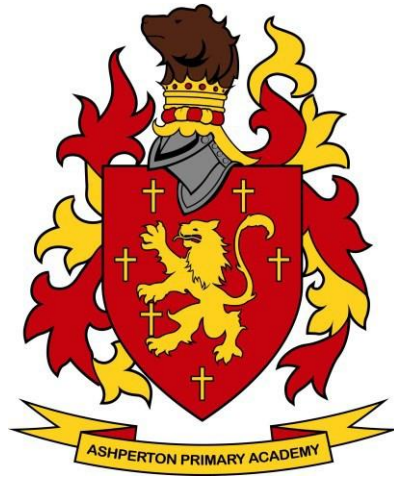




Ashperton Primary Academy Trust

Supporting Pupils with Medical Conditions Policy

SG4

Date policy last reviewed: August 2026

Date policy is due next review 31st August 2027

Signed by:

_____	Headteacher	Date: _____
_____	Chair of Trustees	Date: _____

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Statement of intent

The Trust Board of Ashperton Primary Academy Trust (APA) has a duty to ensure arrangements are in place to support pupils with medical conditions. The aim of this policy is to ensure that all pupils with medical conditions, in terms of both physical and mental health, receive appropriate support to allow them to play a full and active role in school life, remain healthy, have full access to education (including school trips and PE), and achieve their academic potential.

APA believes it is important that parents of pupils with medical conditions feel confident that the school provides effective support for their children's medical conditions, and that pupils feel safe in the school environment.

Some pupils with medical conditions may be classed as disabled under the definition set out in the Equality Act 2010. APA has a duty to comply with the Act in all such cases.

In addition, some pupils with medical conditions may also have SEND and have an EHC plan collating their health, social and SEND provision. For these pupils, APA's compliance with the DfE's 'Special educational needs and disability code of practice: 0 to 25 years' and the school's Special Educational Needs and Disabilities (SEND) Policy will ensure compliance with legal duties.

To ensure that the needs of our pupils with medical conditions are fully understood and effectively supported, we consult with health and social care professionals, pupils and their parents.

1. Legal framework

This policy has due regard to all relevant legislation and guidance including, but not limited to, the following:

- Children Act 1989
- Children and Families Act 2014
- Department of Health (2017) 'Guidance on the use of adrenaline auto-injectors in schools'
- DfE (2015) 'Special educational needs and disability code of practice: 0-25 years'
- DfE (2017) 'Supporting pupils at school with medical conditions'
- DfE (2022) 'School Admissions Code'
- DfE (2022) 'First aid in schools, early years and further education'
- Education Act 1996 (as amended)
- Education Act 2002
- Equality Act 2010
- Health and Safety at Work etc. Act 1974
- Medicines Act 1968
- Misuse of Drugs Act 1971
- National Health Service Act 2006 (as amended)
- The Food Information (Amendment) (England) Regulations 2019 (Natasha's Law)
- The Human Medicines (Amendment) Regulations 2017
- The School Premises (England) Regulations 2012 (as amended)
- The Special Educational Needs and Disability Regulations 2014 (as amended)

This policy operates in conjunction with the following APA policies:

- SG20 Administering Medication Policy
- SD3 Special Educational Needs and Disabilities (SEND) Policy
- SG49 Asthma Policy
- SG17 Allergen Management Safety Policy and Guidance
- GN9 Complaints Policy and Procedures
- GN19 Pupil Equality, Equity, Diversity and Inclusion Policy
- SG29 Attendance and Absence Policy
- SG22 Pupils with Additional Health Needs Attendance Policy
- GN1 Admissions Policy

2. Roles and responsibilities

The Trust Board will be responsible for:

- Fulfilling its statutory duties under legislation.
- Ensuring that arrangements are in place to support pupils with medical conditions.
- Ensuring that pupils with medical conditions can access and enjoy the same opportunities as any other pupil at the school.
- Working with the LA, health professionals, commissioners and support services to ensure that pupils with medical conditions receive a full education.
- Ensuring that, following long-term or frequent absence, pupils with medical conditions are reintegrated effectively.
- Ensuring that the focus is on the needs of each pupil and what support is required to support their individual needs.
- Instilling confidence in parents and pupils in APA's ability to provide effective support.
- Ensuring that all members of staff are properly trained to provide the necessary support and are able to access information and other teaching support materials as needed.
- Ensuring that no prospective pupils are denied admission to APA because arrangements for their medical conditions have not been made.
- Ensuring that pupils' health is not put at unnecessary risk. As a result, the Trust Board holds the right to not accept a pupil into school at times where it would be detrimental to the health of that pupil or others to do so, such as where the child has an infectious disease.
- Ensuring that policies, plans, procedures and systems are properly and effectively implemented.
- Ensuring that APA's policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support pupils and sets out the procedures to be followed whenever a school is notified that a pupil has a medical condition.
- Ensuring that APA's policy covers the role of individual healthcare plans, and who is responsible for their development, in supporting pupils at school with medical conditions.
- Ensuring that plans are reviewed at least annually, or earlier if evidence is presented that the child's needs have changed.

The Headteacher will be responsible for:

- The overall implementation of this policy.
- Ensuring that this policy is effectively implemented with stakeholders.
- Ensuring that all staff are aware of this policy and understand their role in its implementation.
- Ensuring that a sufficient number of staff are trained and available to implement this policy and deliver against all IHPs, including in emergency situations.
- Considering recruitment needs for the specific purpose of ensuring pupils with medical conditions are properly supported.

- Having overall responsibility for the development of IHPs.
- Ensuring that staff are appropriately insured and aware of the insurance arrangements.
- Contacting the school nurse where a pupil with a medical condition requires support that has not yet been identified.

Parents will be responsible for:

- Notifying APA if their child has a medical condition.
- Providing APA with sufficient and up-to-date information about their child's medical needs.
- Being involved in the development and review of their child's IHP.
- Carrying out any agreed actions contained in the IHP.
- Ensuring that they, or another nominated adult, are contactable at all times.

Pupils will be responsible for:

- Being fully involved in discussions about their medical support needs, where applicable.
- Contributing to the development of their IHP, if they have one, where applicable.
- Being sensitive to the needs of pupils with medical conditions.

School staff will be responsible for:

- Providing support to pupils with medical conditions, where requested, including the administering of medicines, but are not required to do so.
- Considering the needs of pupils with medical conditions in their lessons when deciding whether or not to volunteer to administer medication.
- Receiving sufficient training and achieve the required level of competency before taking responsibility for supporting pupils with medical conditions.
- Knowing what to do and responding accordingly when they become aware that a pupil with a medical condition needs help.

The school nurse will be responsible for:

- Notifying APA at the earliest opportunity when a pupil has been identified as having a medical condition which requires support in school.
- Supporting staff to implement IHPs and providing advice and training.
- Liaising with lead clinicians locally on appropriate support for pupils with medical conditions.

Integrated Care Boards (ICBs) will be responsible for:

- Ensuring that commissioning is responsive to pupils' needs, and that health services are able to cooperate with schools supporting pupils with medical conditions.
- Making joint commissioning arrangements for EHC provision for pupils with SEND.
- Being responsive to LAs and schools looking to improve links between health services and schools.

- Providing clinical support for pupils who have long-term conditions and disabilities.
- Ensuring that commissioning arrangements provide the necessary ongoing support essential to ensuring the safety of vulnerable pupils.

Other healthcare professionals, including GPs and paediatricians, are responsible for:

- Notifying the school nurse when a child has been identified as having a medical condition that will require support at school.
- Providing advice on developing IHPs.
- Providing support in APA for children with particular conditions, e.g. asthma, diabetes and epilepsy, where required.

Providers of health services are responsible for cooperating with APA, including ensuring communication takes place, liaising with the school nurse and other healthcare professionals, and participating in local outreach training.

The LA will be responsible for:

- Commissioning school nurses for local schools.
- Promoting cooperation between relevant partners.
- Making joint commissioning arrangements for EHC provision for pupils with SEND.
- Providing support, advice, guidance, and suitable training for APA staff, ensuring that IHPs can be effectively delivered.
- Working with APA to ensure that pupils with medical conditions can attend school full-time.

Where a pupil is away from school for 15 days or more (whether consecutively or across a school year), the LA has a duty to make alternative arrangements, as the pupil is unlikely to receive a suitable education in a mainstream school.

3. Admissions

Admissions will be managed in line with APA's Admissions Policy.

No child will be denied admission to APA or prevented from taking up a school place because arrangements for their medical condition have not been made; a child may only be refused admission if it would be detrimental to the health of the child to admit them into the school setting.

APA will not ask, or use any supplementary forms that ask, for details about a child's medical condition during the admission process.

4. Notification procedure

When APA is notified that a pupil has a medical condition that requires support in school, the school nurse or parents will inform the SENDCo. Following this, APA will arrange a meeting with parents, healthcare professionals and the pupil, with a view to discussing the necessity of an IHP, outlined in detail in the [IHPs](#) section of this policy.

APA will not wait for a formal diagnosis before providing support to pupils. Where a pupil's medical condition is unclear, or where there is a difference of opinion concerning what support is required, a judgement will be

made by the Headteacher based on all available evidence, including medical evidence and consultation with parents.

For a pupil starting at APA in a September uptake, arrangements will be put in place prior to their introduction and informed by their previous institution. Where a pupil joins APA mid-term or a new diagnosis is received, arrangements will be put in place within two weeks.

5. Staff training and support

Any staff member providing support to a pupil with medical conditions will receive suitable training. Staff will not undertake healthcare procedures or administer medication without appropriate training. Training needs will be assessed by the school nurse through the development and review of IHPs, on a termly basis for all school staff, and when a new staff member arrives. The school nurse will confirm the proficiency of staff in performing medical procedures or providing medication.

A first-aid certificate will not constitute appropriate training for supporting pupils with medical conditions.

Through training, staff will have the requisite competency and confidence to support pupils with medical conditions and fulfil the requirements set out in IHPs. Staff will understand the medical conditions they are asked to support, their implications, and any preventative measures that must be taken.

Whole-school awareness training will be carried out on a regular basis for all staff and included in the induction of new staff members.

The school nurse will identify suitable training opportunities that ensure all medical conditions affecting pupils in APA are fully understood, and that staff can recognise difficulties and act quickly in emergency situations.

Training will be commissioned by the School Business Administrator and provided by the following bodies:

- Commercial training provider
- The school nurse
- GP consultant

The parents of pupils with medical conditions will be consulted for specific advice and their views are sought where necessary, but they will not be used as a sole trainer.

The Trust Board will provide details of further CPD opportunities for staff regarding supporting pupils with medical conditions.

Supply teachers will be:

- Provided with access to this policy.
- Informed of all relevant medical conditions of pupils in the class they are providing cover for.
- Covered under the school's insurance arrangements.

6. Self-management

Following discussion with parents, pupils who are competent to manage their own health needs and medicines will be encouraged to take responsibility for self-managing their procedures. Medicine administration will always be overseen by a trained staff member. This will be reflected in their IHP.

Pupils will not be allowed to carry their own medicines and relevant devices. They will be held in suitable locations that can be accessed quickly and easily and if off site carried by their group leader. If a pupil refuses

to take medicine or carry out a necessary procedure, staff will not force them to do so. Instead, the procedure agreed in the pupil's IHP will be followed. Following such an event, parents will be informed so that alternative options can be considered.

If a pupil with a controlled drug passes it to another child for use, this is an offence and appropriate disciplinary action will be taken.

7. IHPs

APA, healthcare professionals and parents agree, based on evidence, whether an IHP will be required for a pupil, or whether it would be inappropriate or disproportionate to their level of need. If no consensus can be reached, the Headteacher will make the final decision.

APA, parents and a relevant healthcare professional will work in partnership to create and review IHPs. Where appropriate, the pupil will also be involved in the process.

IHPs will include the following information:

- The medical condition, along with its triggers, symptoms, signs and treatments
- The pupil's needs, including medication (dosages, side effects and storage), other treatments, facilities, equipment, access to food and drink (where this is used to manage a condition), dietary requirements, and environmental issues
- The support needed for the pupil's educational, social and emotional needs
- The level of support needed, including in emergencies
- Whether a child can self-manage their medication
- Who will provide the necessary support, including details of the expectations of the role and the training needs required, as well as who will confirm the supporting staff member's proficiency to carry out the role effectively
- Cover arrangements for when the named supporting staff member is unavailable
- Who needs to be made aware of the pupil's condition and the support required
- Arrangements for obtaining written permission from parents and the Headteacher for medicine to be administered by school staff or self-administered by the pupil
- Separate arrangements or procedures required during school trips and activities
- Where confidentiality issues are raised by the parents or pupil, the designated individual to be entrusted with information about the pupil's medical condition
- What to do in an emergency, including contact details and contingency arrangements

Where a pupil has an emergency healthcare plan prepared by their lead clinician, this will be used to inform the IHP. Where school writes the IHP APPENDIX B will be used.

IHPs will be easily accessible to those who need to refer to them, but confidentiality will be preserved. IHPs will be reviewed on at least an annual basis, or when a child's medical circumstances change, whichever is sooner.

Where a pupil has an EHC plan, the IHP will be linked to it or become part of it. Where a child has SEND but does not have a statement or EHC plan, their SEND will be mentioned in their IHP.

Where a child is returning from a period of hospital education, alternative provision or home tuition, APA will work with the LA and education provider to ensure that their IHP identifies the support the child will need to reintegrate.

All IHPs will be reviewed at least annually, or earlier if evidence is presented that the child's needs have changed.

8. Managing medicines

In accordance with the APA's Administering Medication Policy, medicines will only be administered at school when it would be detrimental to a pupil's health or school attendance not to do so.

Pupils will not be given prescription or non-prescription medicines without their parents' written consent. Except in the case of a suspected anaphylactic reaction,

Non-prescription medicines may be administered in the following situations:

- When it would be detrimental to the pupil's health not to do so
- When instructed by a medical professional

No pupil will be given medicine containing aspirin unless prescribed by a doctor. Pain relief medicines will not be administered without first checking when the previous dose was taken, and the maximum dosage allowed.

Parents will be informed any time medication is administered that is not agreed in an IHP.

APA will only accept medicines that are in-date, labelled, in their original container, and contain instructions for administration, dosage and storage. The only exception to this is insulin, which must still be in-date, but is available in an insulin pen or pump, rather than its original container.

All medicines will be stored safely. Pupils will be informed where their medicines are at all times and will be able to access them immediately, whether in school or attending a school trip or residential visit. When medicines are no longer required, they will be returned to parents for safe disposal.

Sharps boxes will be used for the disposal of needles and other sharps.

Controlled drugs will be stored in a non-portable container and only named staff members will have access; however, these drugs can be easily accessed in an emergency. A record will be kept of the amount of controlled drugs held and any doses administered. Staff may administer a controlled drug to a pupil for whom it has been prescribed, in accordance with the prescriber's instructions.

APA will hold asthma inhalers for emergency use. The inhalers will be stored in the office and held in first aid bags to be taken off site and their use will be recorded. Inhalers will be used in line with APA's Asthma Policy.

APA will also hold a supply of AAI's for emergency use. For more information see SG17 Allergen Management Safety Policy and Guidance

Records will be kept of all medicines administered to individual pupils, stating what, how and how much medicine was administered, when, and by whom. A record of side effects presented will also be held.

Non-prescription medicines

APA is aware that pupils may, at some point, suffer from minor illnesses and ailments of a short-term nature, and that in these circumstances, health professionals are likely to advise parents to purchase over the counter medicines, for example, paracetamol and antihistamines.

APA works on the premise that parents have the prime responsibility for their child's health and should provide APA with detailed information about their child's medical condition as and when any illness or ailment arises.

To support full attendance APA will consider making arrangements to facilitate the administration of non-prescription medicines following parental request and consent.

Pupils and parents will not be expected to obtain a prescription for over-the-counter medicines as this could impact on their attendance and adversely affect the availability of appointments with local health services due to the imposition of non-urgent appointments being made.

If a pupil is deemed too unwell to be in school, they will be advised to stay at home or parents will be contacted and asked to take them home.

When making arrangements for the administration of non-prescription medicines APA will exercise the same level of care and caution, following the same processes, protocols and procedures as those in place for the administration of prescription medicines.

APA will also ensure that the following requirements are met when agreeing to administer non-prescription medicines.

- Non-prescription medicines will not be administered for longer than is recommended. For example, most pain relief medicines, such as ibuprofen and paracetamol, will be recommended for three days use before medical advice should be sought. Aspirin will not be administered unless prescribed.
- Parents will be asked to bring the medicine in, on at least the first occasion, to enable the appropriate paperwork to be signed by the parent and for a check to be made of the medication details.
- Non-prescription medicines must be supplied in their original container, have instructions for administration, dosage and storage, and be in date. The name of the child can be written on the container by an adult if this helps with identification.
- Only authorised staff who are sufficiently trained will be able to administer non-prescription medicines.

Paracetamol

APA is aware that paracetamol is a common painkiller that is often used by adults and children to treat headaches, stomach ache, earache, cold symptoms, and to bring down a high temperature; however, it also understands that it can be dangerous if appropriate guidelines are not followed and recommended dosages are exceeded.

APA is aware that paracetamol for children is available as a syrup from the age of 2 months; and tablets (including soluble tablets) from the age of 6 years, both of which come in a range of strengths.

APA understands that children need to take a lower dose than adults, depending on their age and sometimes, weight. APA will ensure that authorised staff are fully trained and aware of the [NHS advice](#) on how and when to give paracetamol to children, as well as the recommended dosages and strength.

Staff will always check instructions carefully every time they administer any medicine, whether prescribed or not, including paracetamol.

APA will ensure that they have sufficient members of staff who are appropriately trained to manage medicines and health needs as part of their duties.

The written consent of parents will be required in order to administer paracetamol to pupils (APPENDIX C).

For pupils' health and safety APA will only administer liquid paracetamol, regardless of age, within the school day and will ensure staff adhere to the following protocols:

- APA will hold a supply of **liquid** paracetamol securely in a locked medicine cabinet.
- Before giving liquid paracetamol, affected pupils will be encouraged to get some fresh air, and have a drink or something to eat. Paracetamol will only be considered if these actions do not work.
- Parents and carers will be contacted by phone before any liquid paracetamol is given to obtain verbal consent and to confirm whether any medicines have been taken before attending school.
- Following consent, liquid paracetamol may be administered by authorised members of staff in the event of a headache, toothache, period pain or any type of mild to moderate pain.
- Liquid paracetamol will not be issued without prior written consent, **and** verbal consent from the parent **on the day**. If verbal consent cannot be obtained, then liquid paracetamol **will not** be given.
- When a pupil is given medicine, the authorised member of staff will witness the pupil taking the paracetamol and make a record of it. This record will include:
 - Pupil's name.
 - The name of the medicine.
 - Dose given.
 - Date and time of administration.
 - Signature of the person administering.
- Only liquid paracetamol will be given, not combination medicines which may contain other drugs.
- Pupils will only be given **one dose** of liquid paracetamol during the school day
- If liquid paracetamol does not alleviate symptoms, the pupil's parents will be contacted again.
- Liquid paracetamol will not be given following a head injury, or where a pupil has taken liquid paracetamol containing medicine within the last four hours.
- Pupils who frequently require liquid paracetamol will be asked to provide their own bottle of liquid paracetamol, which will be kept securely labelled in the school office; parents will be contacted by the office staff in these circumstances.
- If a pupil has a minor injury, whilst at school, their condition will be triaged by a First Aider; whereupon appropriate pain relief may be given by an authorised member of staff following consultation and consent from parents.

9. Allergens, anaphylaxis and adrenaline auto-injectors (AAIs)

- APA's Allergen Management Safety Policy and Guidance

is implemented consistently to ensure the safety of those with allergies.

Parents are required to provide APA with up-to-date information relating to their children's allergies, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication required.

The Headteacher will work with the external catering providers to ensure all requirements are met and that PPDS is labelled in line with Natasha's Law. Further information relating to how the school operates in line with Natasha's Law can be found in the Whole-School Food Policy.

Staff members receive appropriate training and support relevant to their level of responsibility, in order to assist pupils with managing their allergies.

- The administration of adrenaline auto-injectors (AAIs) and the treatment of anaphylaxis will be carried out in accordance with APA's Allergen Management Safety Policy and Guidance

. Where a pupil has been prescribed an AAI, this will be written into their IHP.

A Register of Adrenaline Auto-Injectors (AAIs) will be kept of all the pupils who have been prescribed an AAI to use in the event of anaphylaxis. A copy of this will be held in each classroom for easy access in the event of an allergic reaction and will be checked as part of initiating the emergency response.

For pupils, who have prescribed AAI devices, these will be stored in a suitably safe location in the classroom and a spare in the school office

All staff members will be trained on how to administer an AAI, and the sequence of events to follow when doing so..

In the event of anaphylaxis, the nearest staff member will administer the AAI. If necessary, other staff members may assist the staff members with administering AAIs, e.g. if the pupil needs restraining.

APA will keep spare AAI for use in the event of an emergency, which will be checked frequently to ensure that they remain in date, and which will be replaced before the expiry date. The spare AAIs will be stored in the office, ensuring that it is protected from direct sunlight and extreme temperatures. The spare AAIs will only be administered to pupils at risk of anaphylaxis and where written parental consent has been gained (except in emergency situations) (APPENDIX C). Where a pupil's prescribed AAI cannot be administered correctly and without delay, the spare will be used. Where a pupil who does not have a prescribed AAI appears to be having a severe allergic reaction, the emergency services will be contacted and advice sought as to whether administration of the spare AAI is appropriate. However, staff will not delay the administration of the AAI whilst emergency services are contacted. If in doubt the AAI should be administered as outlined in APA's Allergen Management Safety Policy and Guidance

Where a pupil is, or appears to be, having a severe allergic reaction, the emergency services will be contacted even if an AAI device has already been administered.

In the event that an AAI is used, the pupil's parents will be notified that an AAI has been administered and informed whether this was the pupil's or the school's device. Where any AAIs are used, the following information will be recorded on the Adrenaline Auto-Injector (AAI) Record:

- Where and when the reaction took place
- How much medication was given and by whom

For children under the age of 6, a dose of 150 micrograms of adrenaline will be used.

For children aged 6-12 years, a dose of 300 micrograms of adrenaline will be used.

AAIs will not be reused and will be disposed of according to manufacturer's guidelines following use.

In the event of a school trip, pupils at risk of anaphylaxis will have their own AAI with them and APA will take spare AAIs in case of an emergency.

- Further information relating to the APA's policies and procedures addressing allergens and anaphylaxis can be found in the Allergen . Management Safety Policy and Guidance

10. Record keeping

Written records will be kept of all medicines administered to pupils. Proper record keeping will protect both staff and pupils and provide evidence that agreed procedures have been followed. Appropriate forms for record keeping can be found in Appendix D and Appendix E.

11. Emergency procedures

Medical emergencies will be dealt with under APA's emergency procedures.

Where an IHP is in place, it should detail:

- What constitutes an emergency.
- What to do in an emergency.

Pupils will be informed in general terms of what to do in an emergency, e.g. telling a teacher.

If a pupil needs to be taken to hospital, a member of staff will remain with the pupil until their parents arrive. When transporting pupils with medical conditions to medical facilities, staff members will be informed of the correct postcode and address for use in navigation systems.

12. Day trips, residential visits and sporting activities

Pupils with medical conditions will be supported to participate in school trips, sporting activities and residential visits.

Prior to an activity taking place, APA will conduct a risk assessment to identify what reasonable adjustments should be taken to enable pupils with medical conditions to participate. In addition to a risk assessment, advice will be sought from pupils, parents and relevant medical professionals. APA will arrange for adjustments to be made for all pupils to participate, except where evidence from a clinician, e.g. a GP, indicates that this is not possible.

13. Unacceptable practice

APA will not:

- Assume that pupils with the same condition require the same treatment.
- Prevent pupils from easily accessing their inhalers and medication.
- Ignore the views of the pupil or their parents.
- Ignore medical evidence or opinion.
- Send pupils home frequently for reasons associated with their medical condition or prevent them from taking part in activities at school, including lunch times, unless this is specified in their IHP.
- Send an unwell pupil to the medical room or school office alone or with an unsuitable escort.
- Penalise pupils with medical conditions for their attendance record, where the absences relate to their condition.

- Make parents feel obliged or forced to visit the school to administer medication or provide medical support, including for toilet issues. APA will ensure that no parent is made to feel that they have to give up working because APA is unable to support their child's needs.
- Create barriers to pupils participating in school life, including school trips.
- Refuse to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

14. Liability and indemnity

The Trust Board will ensure that appropriate insurance is in place to cover staff providing support to pupils with medical conditions.

APA holds an insurance policy with [RPA \(Risk Protection Arrangement\)](#) covering liability relating to the administration of medication. The policy has the following requirements:

- Medical expenses covered for up to £10,000,000
- Employer's liability unlimited
- Third Party unlimited
- Professional indemnity unlimited
- Personal liability £5,000,000

All staff providing such support will be provided with access to the insurance policies.

In the event of a claim alleging negligence by a member of staff, civil actions are most likely to be brought against APA, not the individual.

15. Complaints

Parents or pupils wishing to make a complaint concerning the support provided to pupils with medical conditions are required to speak to APA in the first instance. If they are not satisfied with APA's response, they may make a formal complaint via APA's complaints procedures, as outlined in the Complaints Policy and Procedures. If the issue remains unresolved, the complainant has the right to make a formal complaint to the DfE.

Parents and pupils are free to take independent legal advice and bring formal proceedings if they consider they have legitimate grounds to do so.

16. Home-to-school transport

Arranging home-to-school transport for pupils with medical conditions is the responsibility of the LA. Where appropriate, APA will share relevant information to allow the LA to develop appropriate transport plans for pupils with life-threatening conditions.

17. Defibrillators

APA has a **Mediana HeartOn A15** automated external defibrillator (AED). The AED will be stored by the First Aid station in an unlocked, alarmed cabinet.

All staff members and pupils will be made aware of the AED's location and what to do in an emergency. A risk assessment regarding the storage and use of AEDs at APA will be carried out and reviewed regularly.

No training will be needed to use the AED, as voice and/or visual prompts guide the rescuer through the entire process from when the device is first switched on or opened; however, staff members will be trained in cardiopulmonary resuscitation (CPR), as this is an essential part of first aid and AED use.

The emergency services will always be called where an AED is used or requires using.

Where possible, AEDs will be used in paediatric mode or with paediatric pads for pupils under the age of eight.

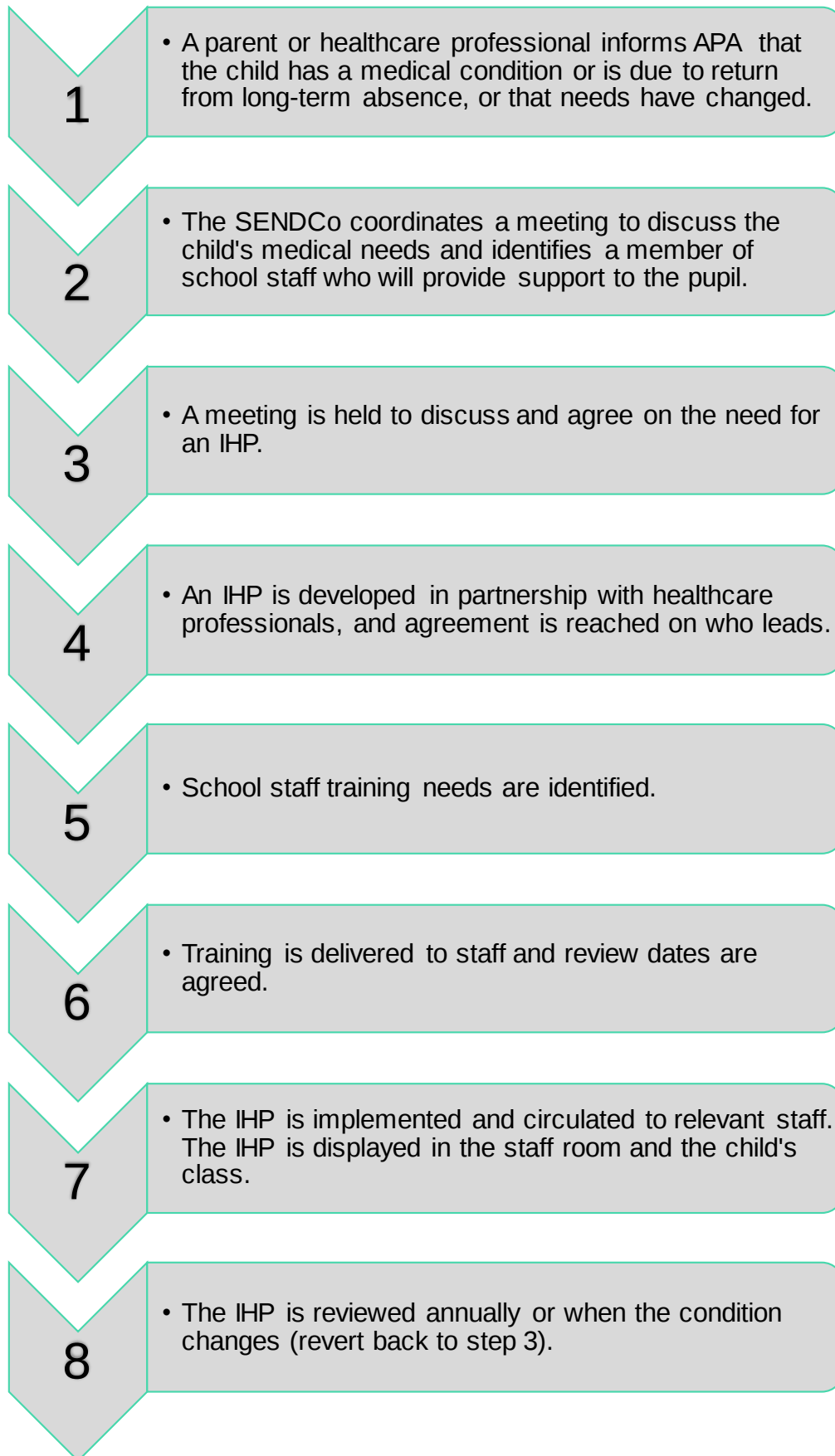
Maintenance checks will be undertaken on AEDs on a regular basis by the School Business Manager, who will also keep an up-to-date record of all checks and maintenance work.

18. Monitoring and review

This policy is reviewed on a regular basis by the Trust Board, school nurse and Headteacher. Any changes to this policy will be communicated to all staff, parents and relevant stakeholders.

The next scheduled review date for this policy is 31st August 2027

Individual Healthcare Plan Implementation Procedure





Individual Healthcare Plan

Pupil's details

Pupil's name	
Group/class/form	
Date of birth	
Pupil's address	
Medical diagnosis or condition	
Date	
Review date	

Family contact information

Name	
Relationship to pupil	
Phone number	
Name	
Relationship to pupil	
Phone number	
Relationship to pupil	

Hospital contact

Name	
Phone number	

Pupil's GP

Name	
Phone number	

Who is responsible for providing support in school?

--

Pupil’s medical needs and details of symptoms, signs, triggers, treatments, facilities, equipment or devices and environmental issues

--

Name of medication, dose and method of administration

--

Daily care requirements

--

Arrangements for school visits and trips

--

Other information

--

Describe what constitutes an emergency, and the action to take if this occurs

--

Responsible person in an emergency, state if different for off-site activities

Plan developed with

Staff training needed or undertaken – who, what, when:

Parental Agreement for the school to administer medication

MEDICAL INFORMATION

You must inform the school if your child has a medical condition, dietary needs or allergies. It is vitally important that the school are aware of any conditions that the child may have, or medications that the child will need.

Please list any Medications/ Medical conditions/ Allergies for the above child:

Has your child been diagnosed with Asthma? Please ask the office for an Asthma Plan to complete	Yes	No
Does your child use an inhaler? If yes, please ask the office for an Asthma Plan to complete	Yes	No
Does your child carry an epi-pen? Please ask the office for an Allergy action plan to complete	Yes	No
Does your child suffer from Hay fever?	Yes	No
If you have answered Yes to any of the above, please detail here:		
Is your child allergic or sensitive to any:		
Medications	Yes	No
Plasters	Yes	No
Insect bites	Yes	No
Latex	Yes	No
Bee stings	Yes	No
Nuts	Yes	No
Other (please detail below)		
If you have answered Yes to any of the above, please detail here:		
Please detail any dietary requirements your child may have here:		

Signature of Parent or Carer:

Name (Please Print):

Date:

I WILL NOTIFY SCHOOL IF THERE ARE ANY CHANGES

FIRST AID, MEDICAL EMERGENCY AND MEDICATION CONSENT

In the event of a pupil requiring First Aid, a qualified First Aider/Paediatric First Aider will give assistance and give appropriate First Aid treatment. If the injury/condition is considered serious, an Ambulance will be requested to attend.

The Parent/Carer will be contacted and asked to meet at either the Hospital or the School. It is essential that up to date telephone numbers are given to the School for this type of situation. It is your responsibility to ensure that you provide the school office with any changes in telephone number and or address. At least **TWO** emergency numbers are required.

The pupil, if taken to Hospital by Ambulance, will either be accompanied by a staff member or Parent/Carer.

First Aid treatments often include Antibacterial wipes, plasters, dressings and tape, Savlon Dry Antiseptic Spray and Wasp-Eze.

If the child sustains a head injury, appropriate first aid will take place at that time, and the child will receive a letter to take home with a reminder of potential symptoms. If necessary, Parents/Carers will be contacted to collect their child, if deemed necessary after a head injury.

I consent for the child named above to be treated by First Aiders at the above School, using first aid equipment as they deem necessary at that time.

Parent/carer signature:..... Date:.....

Medical/Emergency Consent: Please indicate whether or not you give consent.

In the event of an emergency I agree to my child being given, medical, surgical, optical and/or dental treatment, including the administration of a general anesthetic, surgical operation and blood transfusion in accordance with the recommendation of a qualified medical practitioner. Note: Vital interests may override your consent. However, this will be a decision made by a medical practitioner.

Yes

No

Asthma sufferers will be treated as per instructions on their Asthma plan. If your child has been diagnosed with Asthma or has been prescribed an inhaler, it is your responsibility to inform the school and complete an Asthma plan and to ensure that school are provided with medication and inhalers that are within their use-by date.

During his/her time at the school your child may require simple "over the counter" medication or may need medication in an emergency.

The following medications include:

- Paracetamol (syrup i.e. Calpol)
- Piriton/anti-histamine
- Bite/sting cream/spray
- Reliever inhaler
- EpiPen – in an anaphylaxis emergency

If your child requires any of the above medication, trained staff can administer to your child if consent is given below. Staff will inform parents/carers that medication has been administered that day by either, telephone, email or Seesaw message.

I authorise a member of staff who is trained to administer the above medications to my child if required.

Signed parent/guardian :..... Date:

If you DO NOT wish for staff to administer these medications, sign and date here:

Signed..... Date:

NB This form does not cover staff administering prescribed medication ie. Antibiotics. If your child is prescribed medication, please speak to the office staff.

Record of Medicine Administered to an individual



Ashperton Primary Academy- Individual Pupil Medications record

Medication permission and record: individual pupil

Pupil's Information,

Name of School: Ashperton Primary Academy

Date medication provided by parent:

Name of pupil:

Name of medication:

Class/form:

Dose and method (how much and when taken)

Any other information:

When is it taken (time of day):

Quantity received:

Expiry date:

Date and quantity of medication returned to parent:

Staff
signature:

Parent signature:

Print name:

Print name:

Parent contact number:

Ashperton Primary Academy- Individual Pupil Medications record

Date:		Date:		Date:	
Time Given:		Time Given:		Time Given:	
Dose Given:		Dose Given:		Dose Given:	
Member of Staff:		Member of Staff:		Member of Staff:	
Staff Initials:		Staff Initials:		Staff Initials:	
Date:		Date:		Date:	
Time Given:		Time Given:		Time Given:	
Dose Given:		Dose Given:		Dose Given:	
Member of Staff:		Member of Staff:		Member of Staff:	
Staff Initials:		Staff Initials:		Staff Initials:	
Date:		Date:		Date:	
Time Given:		Time Given:		Time Given:	
Dose Given:		Dose Given:		Dose Given:	
Member of Staff:		Member of Staff:		Member of Staff:	
Staff Initials:		Staff Initials:		Staff Initials:	
Date:		Date:		Date:	
Time Given:		Time Given:		Time Given:	
Dose Given:		Dose Given:		Dose Given:	
Member of Staff:		Member of Staff:		Member of Staff:	
Staff Initials:		Staff Initials:		Staff Initials:	
Date:		Date:		Date:	
Time Given:		Time Given:		Time Given:	
Dose Given:		Dose Given:		Dose Given:	
Member of Staff:		Member of Staff:		Member of Staff:	
Staff Initials:		Staff Initials:		Staff Initials:	

Record of All Medicine Administered to Pupils

[illegible]

Contacting Emergency Services

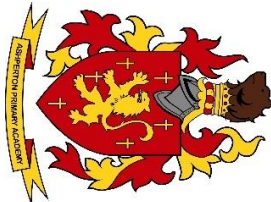
To be stored by the phone in the school office

Request an ambulance – dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

- The telephone number: 01531 670385
- Your name.
- Your location as follows: Ashperton Primary Academy Trust , Ashperton, Ledbury, Herefordshire
- The postcode: HR8 2SE
- The exact location of the individual within the school.
- The name of the individual and a brief description of their symptoms.
- The best entrance to use and where the crew will be met and taken to the individual.

Incident Reporting Form

					
					Date
					Time
					Injured Person's name
					Where did it happen?
					Injury description
					Treatment
					First Aider Name
					Notification of minor injury form completed?
					Accident form submitted?