SUPPORTING PUPILS WITH MEDICAL NEEDS, FIRST AID & ADMINISTRATION OF MEDICINES POLICY

Last Reviewed	June 2026
Approved by (Name)	Governors (Full Body) July 2026
Medical Lead	Alex Sutcliffe/ Leah Slack
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Contents

Introduction and Legal Framework

This document sets out the procedures for supporting pupils with medical conditions, including the administration of medicines and the provision of first aid, within Park Schools Federation. The school is committed to safeguarding and promoting the health, safety, and wellbeing of all pupils and ensuring that those with medical needs are able to access a full and inclusive education.

This policy is underpinned by a range of statutory legislation and guidance, including the **Health and Safety at Work Act 1974**, which places a duty on employers to ensure the health and safety of employees and others on the premises, and the **Children and Families Act 2014**, which requires schools to make arrangements to support pupils with medical conditions. It also reflects the principles of the **Equality Act 2010**, ensuring that pupils with disabilities or long-term medical conditions are not discriminated against and are able to participate fully in school life.

In addition, the school follows the Department for Education guidance *"Supporting Pupils at School with Medical Conditions" (2015)*, which outlines the responsibilities of schools in managing medical needs, including the requirement to have clear policies, appropriate training, and effective systems in place. The policy also takes account of relevant health and safety guidance, local authority procedures, and best practice in the safe administration of medicines and first aid.

By following this framework, the school aims to provide a safe, supportive, and inclusive environment in which all pupils, regardless of their medical needs, can thrive and achieve their full potential.

Types of Medical Needs

Pupils' medical needs within the school setting may be broadly categorised as short-term or long-term, although it is recognised that each child's circumstances are unique and may require an individualised approach. The school is committed to ensuring that all pupils with medical needs are supported appropriately so that they can access education fully, safely, and with minimal disruption.

Short-term medical needs usually arise from acute conditions such as infections, minor illnesses, or recovery from injury or medical procedures. These needs may require temporary administration of medication, short-term adjustments to participation in school activities, or increased monitoring by staff. Although these needs are often limited in duration, it remains essential that they are managed carefully to prevent deterioration in the pupil's health and to support their continued engagement in learning. In such cases, parents are required to provide clear information and appropriate medication, and staff will follow established procedures to ensure safe management during the school day.

Long-term medical needs are those that have an ongoing impact on a pupil's health and wellbeing and may require continuous or repeated support. These may include conditions such as asthma, diabetes, epilepsy, severe allergies, or other chronic or complex health conditions. Pupils with long-term medical needs often require structured planning, including the development of an Individual Healthcare Plan, to ensure consistency of care. These conditions may affect a pupil's ability to participate in certain activities, their attendance, or their learning, and therefore require careful coordination between school staff, parents, and healthcare professionals.

Some pupils may also have complex medical needs that require specialist interventions, ongoing monitoring, or a combination of medical and personal care. These needs may involve the use of specialised equipment, administration of emergency or invasive medication, or support with intimate care. In such cases, staff will receive appropriate training from qualified healthcare professionals, and

clear procedures will be outlined in the pupil's Individual Healthcare Plan. The school ensures that all relevant staff are aware of these needs and are confident in supporting the pupil safely.

Medical needs may also fluctuate over time, and some pupils may experience periods where their condition is more severe or requires additional support. The school recognises the importance of responding flexibly to changing needs and ensuring that appropriate adjustments are made promptly. This may include temporary changes to routines, additional supervision, or increased communication with parents and carers.

In addition to physical health conditions, the school acknowledges that some pupils may have medical needs linked to mental health or wellbeing, which may also require support and reasonable adjustments. While these needs may not always involve medication, they may still impact a pupil's ability to access learning and participate fully in school life. The school will work in partnership with parents and relevant professionals to ensure that appropriate support is in place.

The school is committed to ensuring that pupils with all types of medical needs are treated fairly and are not disadvantaged. No assumption is made that pupils with the same condition will require identical support; instead, the needs of each pupil are considered individually. Where necessary, reasonable adjustments are made to ensure that pupils can access the curriculum, participate in school activities, and feel safe and included.

Through a clear understanding of the different types of medical needs and a flexible, pupil-centred approach, the school aims to ensure that all pupils receive the support they need to thrive both academically and socially.

Roles and Responsibilities

Clear roles and responsibilities are defined for governors, headteacher, staff, and parents to ensure safe and consistent implementation of this policy.

Governing Body

The governing body is responsible for ensuring that this policy is reviewed regularly, remains compliant with legislation, and that sufficient resources and facilities are available to support its implementation.

Headteacher

The headteacher is responsible for the day-to-day implementation of this policy, ensuring that staff are competent and trained, monitoring records, and resolving any issues arising from its application.

Staff

Staff who volunteer to administer medication and carry out first aid must ensure they are competent and confident, check medication carefully before administration, record all actions accurately, and report any errors immediately.

Parents/Carers

Parents must provide accurate information, complete consent forms, and ensure medication is correctly labelled and in date.

Parents must ensure that emergency contacts are up to date.

Individual Healthcare Plans (IHPs)

The school recognises that Individual Healthcare Plans (IHPs) are an essential tool in ensuring that pupils with medical conditions receive safe, consistent, and appropriate care. IHPs provide a clear and detailed framework for how a pupil's medical needs will be managed within the school setting and ensure that all staff understand their roles and responsibilities in supporting the pupil.

IHPs are developed for pupils with significant, long-term, or complex medical conditions, and for those whose medical needs may require ongoing support, monitoring, or intervention during the school day. The decision to create an IHP is made in consultation with parents or carers, relevant school staff, and healthcare professionals, taking into account the nature and severity of the pupil's condition and the level of support required.

Each IHP is created collaboratively to ensure that it reflects accurate, up-to-date medical advice and the individual needs of the pupil. The plan typically includes detailed information about the pupil's condition, signs and symptoms to be aware of, medication and dosage requirements, daily care needs, and any specific triggers that may affect the condition. It also outlines clear procedures to follow in the event of a medical emergency, including step-by-step instructions and contact details for parents, carers, and healthcare professionals.

The IHP clearly defines the roles and responsibilities of staff involved in the pupil's care, ensuring that there is no ambiguity about who is responsible for providing support at different times of the day. It also identifies any training that staff may require in order to support the pupil safely and effectively, and how this training will be delivered and maintained.

Where appropriate, pupils are actively involved in the development and review of their IHP, ensuring that their views, preferences, and level of independence are taken into account. The school encourages pupils to take increasing responsibility for managing their own condition where this is safe and appropriate, helping to build confidence and independence over time.

IHPs are shared with all relevant staff members to ensure that they are aware of the pupil's needs and understand how to respond appropriately. This information is handled sensitively and in accordance with data protection requirements, ensuring confidentiality while maintaining pupil safety. Key information may also be made readily accessible in staff areas to support a rapid response in an emergency.

Plans are reviewed regularly, at least annually, or more frequently where there are changes to the pupil's condition, treatment, or circumstances. Any updates must be communicated promptly to all relevant staff, and documentation must be amended accordingly. Regular review ensures that the plan remains effective, relevant, and aligned with current medical advice.

IHPs also play a critical role in supporting transitions, including movement between classes, key stages, or schools. The school ensures that all relevant medical information is transferred securely and in a timely manner so that receiving staff or settings are fully prepared to meet the pupil's needs. This proactive approach supports continuity of care and minimises disruption to the pupil's education.

In addition, IHPs are used to inform risk assessments for activities such as physical education, educational visits, and extracurricular provision. This ensures that pupils with medical conditions are able to participate fully wherever possible, with appropriate adjustments and safeguards in place.

Through the effective use of Individual Healthcare Plans, the school ensures a coordinated, informed, and consistent approach to managing medical needs, promoting inclusion, safeguarding pupil wellbeing, and enabling all pupils to participate safely in school life.

Receipt of Medication

No medicines (prescribed or non-prescription) will be allowed into school unless accompanied by a fully completed consent form completed by a parent or guardian, a copy of which is located at Appendix 1.

The form and the medicines should be brought to the school office and handed over to a member of the admin team; these are then logged on Evolve.

Medicines will only be accepted in their original container with the dispensing label clearly stating, as a minimum, the name of the young person, the name of the dispensing pharmacy, date of dispensing, name of medicine, amount of medicine dispensed and strength, the dose and how often to take it, and if necessary any cautions or warning messages. Non-prescription medicines should be in their original bottle/containers, clearly labelled with the young person's name and accompanied by a Health Care Plan or Asthma Plan.

Ideally, only enough medicines for the day are to be supplied, as this will avoid confusion or the chance of too much medicine being given. However, where a pupil is on a long-term course of medication, the school will, by arrangement with parent/guardian, agree to store sufficient medicine to avoid unnecessary toing and froing of medicines, on the understanding that these will be in date for the duration agreed, supplied as per the previous statement, and parent/guardian accept they are responsible for collecting and disposing of any excess medicines or medicines which are out of date.

Class teachers will not accept medication unless part of a HCP or Asthma Plan.

Any medicines not provided in the original containers, appropriately labelled, and with a fully completed parental consent form will not be administered. In the event that the school decides not to administer the medicine, the parent/carer will be informed immediately so they can make alternative arrangements for the medicine to be administered.

Staff and parents/guardians should check and agree the quantity of medicine provided, and this should be recorded on the Medicines Administration Record (MAR) sheet (Appendix 2) and signed by both the staff member and parent/guardian.

The school will ensure parents are made aware of the above requirements at the start of each year and are reminded of them periodically via the school website and messaging system.

The school, on receipt of the medication and completed parental consent form, will ensure a suitable Medication Administration Record (MAR) form (Appendix 2) is completed for the pupil and medication.

Administration of Medicines

The school recognises that, in order to support pupils effectively, it may be necessary to administer prescribed medicines during the school day. The administration of medicines within the school setting is carried out in a safe, controlled, and consistent manner to minimise risk and ensure pupils' wellbeing at all times. The school will only administer medicines that are regulated by the MHRA (Medicines and Healthcare products Regulatory Agency) and are essential for a pupil's health and

wellbeing and where it would be detrimental to the pupil's health if the medicine were not administered during the school day.

All medicines administered in school must be prescribed by a medical professional. Medicines must be provided by parents or carers in their original packaging, clearly labelled with the pupil's name, the name of the medicine, dosage instructions, frequency of administration, and any relevant warnings or precautions. Medicines that do not meet these requirements will not be accepted or administered by the school, and parents will be informed so that alternative arrangements can be made.

The administration of medicines is a voluntary role for staff unless explicitly included within their job description. Staff who undertake this role must be competent, and confident in administering the medication safely. Where pupils have complex medical needs or require specialised procedures, staff will receive specific training from healthcare professionals, and this training will be reviewed and refreshed regularly. Staff must only administer medication for which they have received appropriate instruction and must follow all guidance outlined in the pupil's Individual Healthcare Plan where applicable. Where possible, medicines will only be administered by a paediatric first aider or the office staff.

The school follows strict procedures to ensure that medicines are administered safely. Before administering any medication, staff must carry out a series of checks commonly referred to as the "six rights" of medication administration: ensuring it is the right pupil, the right medicine, the right dose, at the right time, via the right route, and that the medicine is within its expiry date. Staff must also confirm that the medication has not already been administered and that all instructions match the information provided on the consent form and packaging. Wherever possible, two members of staff should be involved in the administration process, particularly for higher-risk medications, to reduce the likelihood of error.

Medicines will only be administered to one pupil at a time, and all relevant documentation must be completed immediately following administration (on the Evolve system). This includes recording the date, time, dosage, and the name and signature of the staff member administering the medication. Where a second member of staff is present, they should also sign to confirm the administration. Accurate record keeping is essential to ensure transparency and accountability and to maintain a clear audit trail. The Evolve Accident Slip system is used for this purpose.

If there is any uncertainty or concern regarding the administration of a medicine, staff must not administer it and must seek advice from a senior member of staff, the pupil's parents or carers, or an appropriate healthcare professional. Any errors, near misses, or incidents relating to the administration of medication must be reported immediately to the headteacher or designated senior leader and recorded in accordance with school procedures. Appropriate action will be taken to review procedures and prevent recurrence.

If a pupil refuses to take their medication, staff will not force them to do so. The refusal will be recorded, and parents or carers will be informed as soon as possible. Staff will also seek further advice if necessary to ensure the pupil's safety. Under no circumstances should an additional dose be given if there is uncertainty about whether a pupil has taken their medication, as this may lead to overdose and significant risk.

The school may, under specific circumstances, administer non-prescription medicines, but only where these are clearly identified within a pupil's healthcare plan or where prior consent has been obtained from parents. Non-prescription medicines must be supplied in their original packaging, clearly labelled, and in date. The school will not administer any medicine containing aspirin unless it has

been prescribed by a doctor. Where non-prescription medication is administered, the same procedures and recording requirements apply as for prescribed medicines.

The school keeps both paracetamol and antihistamine for emergency use. These will only be administered with parental or medical (e.g. 999 instruction) consent. A log of the amount administered will be sent to parents via Evolve.

Controlled drugs are subject to additional legal requirements and must be managed in accordance with specific guidance. These medicines will be stored securely in a locked cabinet, with access restricted to authorised staff, and detailed records will be kept of all quantities received, administered, and returned. The administration of controlled drugs should, wherever possible, be witnessed by a second member of staff, and both must sign the relevant records. The school will ensure that all procedures relating to controlled drugs comply with current legislation and best practice guidance.

The storage of medicines is carefully managed to ensure safety and accessibility. Routine medicines are stored in a locked cabinet in the school office, while medicines requiring refrigeration are stored in a secure fridge with temperature monitoring in place. Emergency medicines, such as inhalers and EpiPens, are stored in locations that are both secure and readily accessible to ensure they can be accessed quickly in an emergency. All medicines must remain in their original containers at all times.

Arrangements are also made to ensure the safe administration of medicines during off-site activities and educational visits. A named member of staff is responsible for carrying, storing, and administering medication during the visit, and appropriate risk assessments are completed in advance. Only the required amount of medication is taken, and the same procedures for checking, administering, and recording medication are followed as within the school setting.

Through these procedures, the school aims to ensure that the administration of medicines is carried out safely, consistently, and in a way that supports pupils' health, wellbeing, and access to education, while maintaining the highest standards of care and accountability.

Storage of Medication

The school ensures that all medication brought onto the premises is stored safely, securely, and in a manner that allows it to be accessed promptly when required. All medicines must be clearly labelled with the pupil's name and remain in their original containers at all times. The safe storage of medication is essential to minimise risk, prevent misuse, and ensure that medicines are readily available in an emergency whilst maintaining appropriate levels of security.

All medication must be handed in at the school office by a parent or carer alongside a completed parental consent form. Upon receipt, medicines are checked, logged, and stored according to their type and purpose. Medication is only accepted if it meets the required standards for labelling, packaging, and documentation.

General Storage Arrangements

Routine medicines that are not required immediately in an emergency, such as antibiotics or pain relief, are stored in a sealed, clearly labelled container within a locked cupboard located in the school office. Access to this storage is restricted to authorised staff to ensure safe handling and to prevent unauthorised access.

Medicines that require refrigeration are stored in a designated, secure medical fridge located in the school office. The temperature of the fridge is monitored regularly, and appropriate checks are carried out to ensure that medicines are stored within recommended temperature ranges.

Emergency Medication (Rescue Medication)

Emergency or “rescue” medication, such as asthma inhalers and adrenaline auto-injectors (EpiPens), must be readily accessible at all times. These medications are stored in clearly labelled and identifiable locations that balance accessibility with security to ensure they can be accessed quickly in an emergency.

Where pupils are assessed as competent to carry and administer their own emergency medication, the school will support and encourage them to do so. Where this is not appropriate, the school will ensure that the medication is stored in a way that allows staff immediate access when required while ensuring it is only used for the named pupil.

In this school:

- Asthma inhalers are kept in clearly labelled boxes within classrooms, with signage next to the class electronic board indicating their location.
- Inhalers are taken with pupils during all activities outside the classroom, including physical education and off-site visits.
- EpiPens are stored securely but are readily accessible, and in some cases may be carried by the pupil in a named bag to ensure immediate availability.

Controlled Drugs

Medicines classified as controlled drugs are subject to additional legal requirements and are stored in a locked container within a locked cupboard in the school office. Access is limited to nominated, authorised members of staff. Detailed records are kept of all controlled drugs, including quantities received, administered, and returned. These medicines are handled in accordance with the Misuse of Drugs Act and relevant guidance to ensure full compliance and safety.

Storage During Activities and Off-Site Visits

Appropriate arrangements are made for the storage and transport of medication during breaks, lunchtime, and all off-site activities, including educational visits. Medication must remain accessible at all times, and a named member of staff is responsible for its safe storage, handling, and administration. Only the necessary quantity of medication is taken, and it remains securely stored when not in use.

Specific Medical Needs

The school is committed to ensuring that pupils with specific medical needs are supported effectively so that they can participate fully, safely, and confidently in all aspects of school life. A wide range of medical conditions may be present within the school community, including but not limited to asthma, allergies, anaphylaxis, diabetes, epilepsy, and other chronic or complex health conditions. Each condition may present differently in individual pupils, and therefore support must always be tailored to the child’s specific needs, as outlined in their Individual Healthcare Plan (IHP), where applicable.

Pupils with asthma must have immediate access to their prescribed inhalers at all times, and inhalers are stored in clearly identified, accessible locations within classrooms. Pupils are encouraged, where

appropriate, to take responsibility for their inhaler use and to inform a member of staff when medication is taken. All staff are made aware of pupils with asthma and are familiar with the signs and symptoms of an asthma attack, as well as the steps to take in an emergency. Inhalers must accompany pupils on all school activities, including physical education lessons and off-site visits, to ensure continuous access.

For pupils with severe allergies and at risk of anaphylaxis, EpiPens or equivalent auto-injectors are stored in clearly labelled, secure but accessible locations, and all relevant staff are aware of their location. Where possible (due to the size of the site), pupils will carry their own epi pens In the event of an allergic reaction, staff must follow the procedures outlined in the pupil's Individual Healthcare Plan. For mild symptoms, antihistamines such as cetirizine may be administered if specified; however, for more severe symptoms, an EpiPen must be administered immediately, followed by calling emergency services without delay. Staff are trained in recognising the early signs of anaphylaxis and in the safe use of auto-injectors to ensure a rapid and effective response.

Where pupils have complex or long-term medical conditions, such as diabetes, epilepsy, or conditions requiring specialist interventions, the school works closely with healthcare professionals to ensure that staff receive appropriate training. This training is specific to the pupil's needs and is refreshed regularly to maintain competence and confidence. In such cases, detailed Individual Healthcare Plans provide step-by-step guidance for routine care and emergency situations. These plans are shared with all relevant staff and reviewed regularly in partnership with parents and medical professionals.

The school recognises the importance of promoting independence in pupils with medical conditions wherever possible. Pupils are encouraged and supported to take an active role in managing their own condition, in line with their age, maturity, and capability. This may include self-administration of medication, recognising symptoms, and seeking help when needed. Staff will support pupils in developing these skills in a safe and structured manner.

Appropriate arrangements are also made to ensure that medical needs are met during less structured parts of the school day, including break times, lunchtime, physical education, and extracurricular activities. Staff supervising these activities are informed of relevant medical needs and have access to required medication. On educational visits, detailed risk assessments are carried out in advance, and arrangements are made to ensure that medication is transported safely, stored correctly, and administered in line with school procedures. A named member of staff is always responsible for overseeing medical provision during visits.

The school ensures that information about pupils with significant medical needs is clearly communicated to relevant staff, while maintaining confidentiality. Emergency information is made readily available to staff in appropriate locations, such as staffrooms or secure systems, to support a rapid and informed response. The school maintains a proactive approach to risk management by ensuring that all staff are aware of their responsibilities and are prepared to respond appropriately to medical situations.

Through these measures, the school aims to create a safe, inclusive, and supportive environment in which all pupils with medical needs can thrive and participate fully in school life, with minimal disruption to their education and wellbeing.

First Aid Procedures

The school ensures that appropriate first aid provision is available at all times through a sufficient number of trained first aiders who hold current paediatric first aid qualifications. First aid kits are located in clearly identified and accessible areas throughout the school, including classrooms, the school office, and outdoor learning spaces, and are checked regularly to ensure they are fully stocked and in date. Staff are aware of the location of first aid equipment and how to access additional support where required.

In the event of illness or injury, staff will assess the situation promptly and provide appropriate first aid in line with their level of training. Minor injuries will be treated on site, and records will be made in the accident log on the Evolve system. For more serious incidents, including concerning head injuries, suspected fractures, or significant illness, pupils will be monitored closely, and parents or carers will be informed without delay. Where necessary, further medical advice will be sought.

All first aid incidents are recorded accurately on the Evolve system and appropriate follow-up and monitoring is completed by the Medical Lead. The school also ensures that first aid provision extends to off-site visits and activities, with a trained first aider and appropriate equipment always available. Regular training updates ensure that staff maintain confidence and competence in delivering first aid safely and effectively.

Emergency Procedures

In the event of a medical emergency, all staff are expected to act quickly and calmly to ensure the safety and wellbeing of the pupil. A trained first aider should be called immediately, and where necessary, emergency services should be contacted without delay. Staff must provide clear and accurate information to emergency services, including the nature of the incident, the pupil's condition, their date of birth, address, and any known medical conditions.

Parents or carers must be contacted as soon as possible following the emergency call. Where required, a member of staff will accompany the pupil to hospital to ensure continuity of care and provide reassurance.

For pupils with known medical conditions, emergency procedures outlined in Individual Healthcare Plans must be followed precisely. Emergency medication, such as EpiPens or inhalers, must be administered immediately where required, and staff must be familiar with how to access and use such equipment. Emergency procedures are reviewed regularly and rehearsed where appropriate to ensure staff are confident in responding effectively.

Record Keeping

Accurate, detailed, and secure record keeping is essential to the safe and effective management of pupils' medical needs within the school. The school maintains comprehensive records relating to all aspects of medical provision, including Individual Healthcare Plans (IHPs), parental consent forms, medication administration records (MAR), first aid and accident reports, and any correspondence with parents or healthcare professionals. These records provide a clear and auditable trail of decisions

and actions taken and are critical in ensuring continuity of care. The Evolve system is used for all record keeping relating to Medical needs.

All records are maintained in accordance with data protection legislation and the school's confidentiality policies. Access to medical information is strictly limited to authorised staff who require it to carry out their duties. Information is shared on a need-to-know basis to ensure pupil safety while respecting privacy and dignity. Paper records are stored securely in locked cabinets, and electronic records are password-protected and backed up in line with school data security procedures.

Medication administration records must be completed immediately after each dose is given and must include the pupil's name, the name of the medication, dosage, method of administration, date, time, and the name and signature of the staff member administering the medication. Where possible, a second member of staff may witness administration, particularly for controlled drugs or higher-risk medications, and their details should also be recorded. Any deviations from prescribed instructions, such as missed doses, late administration, or refusal by the pupil, must be clearly documented and reported to parents or carers without delay, along with any advice sought from healthcare professionals.

First aid and accident records must be completed as soon as practicable after an incident and should include sufficient detail to support monitoring and future prevention. These records allow the school to identify patterns or recurring risks, enabling appropriate preventative actions to be taken. Serious incidents may also be recorded separately in line with reporting requirements and may involve additional documentation for safeguarding or health and safety purposes.

Individual Healthcare Plans are retained and reviewed regularly to ensure they accurately reflect the current needs of the pupil. Any changes to a pupil's medical condition, treatment, or medication must be updated promptly, and all relevant staff must be informed of these changes. Records must support effective transition between classes, key stages, or schools, ensuring that essential medical information is transferred securely and in a timely manner.

The school uses record keeping not only for compliance but also as part of its wider safeguarding and risk management processes. Regular audits of medical records and procedures are carried out by senior leadership to ensure consistency, accuracy, and adherence to this policy. Any discrepancies, errors, or concerns identified through monitoring will be addressed promptly, and further training or procedural changes will be implemented where necessary.

Evolve is used, and is maintained in line with school protocols, and parents will be notified of administration events through these systems. All documentation contributes to a culture of accountability, transparency, and continuous improvement, ensuring that pupils receive safe, consistent, and effective care at all times.

First Aid for Staff

The school provides first aid support for staff in the same way as for pupils, through trained first aiders who are available on site. First aid kits are accessible in designated locations, and staff should report any injuries or incidents requiring first aid to a qualified first aider and the School Business Manager as soon as possible.

All staff injuries, regardless of how minor they may appear, must be recorded in the accident or incident reporting system in accordance with health and safety procedures. This ensures that appropriate follow-up can be carried out and that any risks within the school environment can be identified and addressed.

In the event of a more serious incident or sudden illness, first aiders will assess the situation and determine whether further medical assistance is required. Where necessary, emergency services will be contacted, and a member of staff will be supported until help arrives. The school will also ensure that appropriate internal procedures are followed, including notifying senior leadership and completing any required reporting under health and safety regulations.

Health, Safety and Duty of Care

The school's approach to staff medication and first aid provision is underpinned by its broader commitment to health and safety. Staff are expected to act responsibly in managing their own health needs while also considering the safety of pupils and colleagues. The school will provide a safe working environment, access to first aid, and appropriate support where required, but individual responsibility remains an important aspect of maintaining overall safety.

Where a staff member has an ongoing medical condition that may impact their work, the school will work with them to put reasonable adjustments in place where appropriate, in line with the Equality Act 2010. This may include adjustments to duties, access to facilities, or support arrangements to ensure that the staff member is able to carry out their role safely and effectively.

Training and Communication

The school recognises the importance of ensuring that all staff are appropriately trained and informed in order to support pupils with medical needs effectively. Training is provided regularly and is updated whenever there are changes to procedures, new medical conditions within the school, or new staff members joining. Training may be delivered by healthcare professionals where specialist knowledge is required.

Information about pupils with medical conditions is shared with relevant staff in a timely and confidential manner. This may include staff meetings, briefings, and written records, ensuring that staff are aware of any risks and the procedures required to manage them. Emergency information for pupils with significant medical needs is clearly accessible in staff areas to support a quick response when needed.

Ongoing communication between the school, parents, and healthcare professionals ensures that information remains accurate and up to date. The school also supports pupils in understanding and managing their own conditions where appropriate, promoting independence and confidence.

Complaints

The school aims to work in partnership with parents and carers to ensure that pupils' medical needs are met effectively. If concerns arise regarding the support provided, parents or carers are encouraged to raise these as soon as possible. In the first instance, concerns should be discussed with the class teacher, who will seek to resolve the issue promptly and appropriately.

If the matter is not resolved, it should be escalated to a member of the senior leadership team, who will review the concern and take appropriate action. Where necessary, the issue may be referred to the Headteacher for further investigation. The school will respond to all concerns in a timely and transparent manner.

In the unlikely event that the issue remains unresolved, parents or carers may follow the formal complaints procedure in accordance with school policy. The school is committed to learning from complaints and using them to improve practice and ensure the highest standards of care.

Appendices

Appendix 1: Example Health Care Plan (see Allergy Policy for Allergy HCP)
Appendix 2: Example Asthma Plan

Appendix 1: Example Health Care Plan (see Allergy Policy for Allergy HCP)

Health and Care Plan		
Child / young person name		
Date of birth		
Gender		
Medical diagnosis or condition		
Behaviour, if yes please refer to behaviour plan for intervention		
Year group / class / tutor		
Preferred methods of communication		
Terminology for body parts / functions		
Does the pupil have any allergies sensitivity?		
Does the pupil require assistance with mobility or transfers, if yes please refer to the manual handling risk assessment		
Does the pupil have any religious or cultural needs?		
Number of carers required and reason why:	Carers: 2	Reason: once to stay with the child, other to call for assistance and support.

Procedure- please tick all that apply			**Staff identified**	
Toileting	Dressing and undressing			
	Pad change			
	Menstruation			
	Assistance with toileting			
	Supervised toileting			
	Lotions / cream			
Personal care	Washing			
	Dressing			
	Cleaning			
	Lotions / cream			
	Medication			

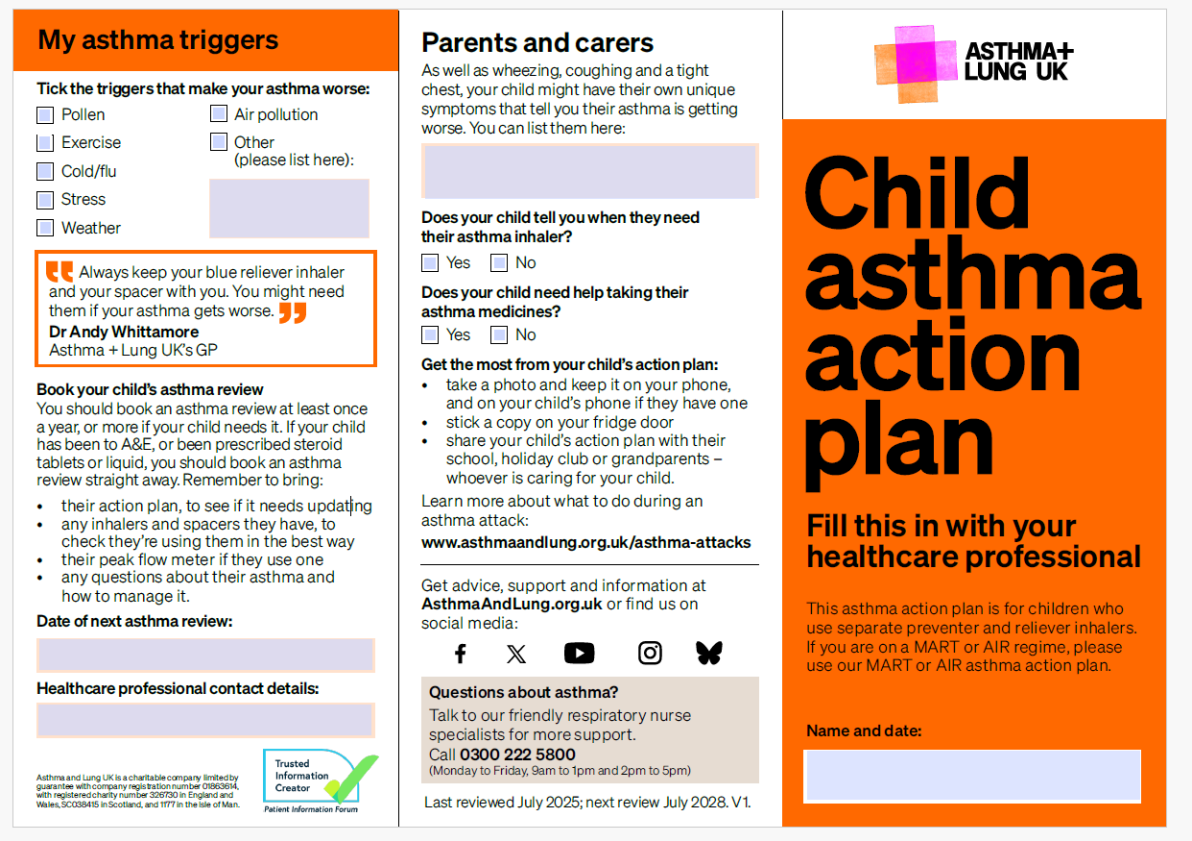
	Medical			

SAFE SYSTEM OF WORK

IT IS ASSUMED THAT THE NAMED STAFF FOLLOWING THESE SYSTEMS OF WORK HAVE BEEN TRAINED TO CARRY OUT ALL TECHNIQUES AND PROCEDURES DOCUMENTED

Procedure:		**Number of carers:**	
Pupil's Level of Ability			
Independent	Independent / supervised	Partially assisted by: **number of carers**	Fully assisted by: **number of carers**
Environment Required:			
Equipment Required:			
Detailed Description of Procedure: **If pupil has emergency medication, follow procedure.** **MANAGEMENT OF OTHER CHILDRENS NEEDS** **Encourage (PUPIL) throughout the procedure to promote independence and give praise for cooperation** **Carer to use simple and clear instructions throughout** •			
Parent / guardian signature		**Proposed review date**	

Appendix 2: Example Asthma Plan



My asthma triggers

Tick the triggers that make your asthma worse:

- ☐ Pollen
- ☐ Exercise
- ☐ Cold/flu
- ☐ Stress
- ☐ Weather
- ☐ Air pollution
- ☐ Other (please list here):

> Always keep your blue reliever inhaler and your spacer with you. You might need them if your asthma gets worse.
> **Dr Andy Whittamore**
> Asthma + Lung UK's GP

Book your child's asthma review

You should book an asthma review at least once a year, or more if your child needs it. If your child has been to A&E, or been prescribed steroid tablets or liquid, you should book an asthma review straight away. Remember to bring:

- their action plan, to see if it needs updating
- any inhalers and spacers they have, to check they're using them in the best way
- their peak flow meter if they use one
- any questions about their asthma and how to manage it.

Date of next asthma review:

Healthcare professional contact details:

Parents and carers

As well as wheezing, coughing and a tight chest, your child might have their own unique symptoms that tell you their asthma is getting worse. You can list them here:

Does your child tell you when they need their asthma inhaler?

☐ Yes ☐ No

Does your child need help taking their asthma medicines?

☐ Yes ☐ No

Get the most from your child's action plan:

- take a photo and keep it on your phone, and on your child's phone if they have one
- stick a copy on your fridge door
- share your child's action plan with their school, holiday club or grandparents – whoever is caring for your child.

Learn more about what to do during an asthma attack:
www.asthmaandlung.org.uk/asthma-attacks

Get advice, support and information at **AsthmaAndLung.org.uk** or find us on social media:

Questions about asthma?
Talk to our friendly respiratory nurse specialists for more support.
Call **0300 222 5800**
(Monday to Friday, 9am to 1pm and 2pm to 5pm)

Last reviewed July 2025; next review July 2028. V1.

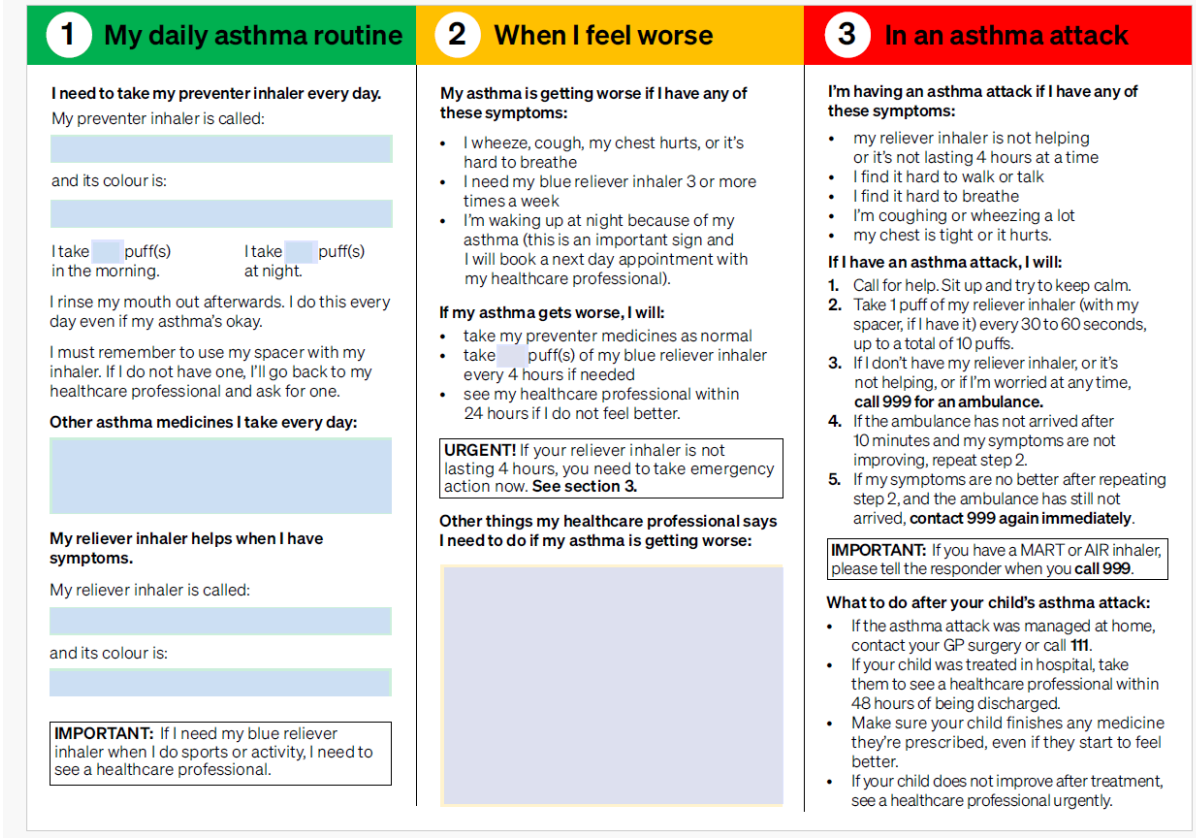
ASTHMA+ LUNG UK

Child asthma action plan

Fill this in with your healthcare professional

This asthma action plan is for children who use separate preventer and reliever inhalers. If you are on a MART or AIR regime, please use our MART or AIR asthma action plan.

Name and date:



1 My daily asthma routine

I need to take my preventer inhaler every day.

My preventer inhaler is called:

and its colour is:

I take ____ puff(s) in the morning.

I take ____ puff(s) at night.

I rinse my mouth out afterwards. I do this every day even if my asthma's okay.

I must remember to use my spacer with my inhaler. If I do not have one, I'll go back to my healthcare professional and ask for one.

Other asthma medicines I take every day:

My reliever inhaler helps when I have symptoms.

My reliever inhaler is called:

and its colour is:

IMPORTANT: If I need my blue reliever inhaler when I do sports or activity, I need to see a healthcare professional.

2 When I feel worse

My asthma is getting worse if I have any of these symptoms:

- I wheeze, cough, my chest hurts, or it's hard to breathe
- I need my blue reliever inhaler 3 or more times a week
- I'm waking up at night because of my asthma (this is an important sign and I will book a next day appointment with my healthcare professional).

If my asthma gets worse, I will:

- take my preventer medicines as normal
- take ____ puff(s) of my blue reliever inhaler every 4 hours if needed
- see my healthcare professional within 24 hours if I do not feel better.

URGENT! If your reliever inhaler is not lasting 4 hours, you need to take emergency action now. **See section 3.**

Other things my healthcare professional says I need to do if my asthma is getting worse:

3 In an asthma attack

I'm having an asthma attack if I have any of these symptoms:

- my reliever inhaler is not helping or it's not lasting 4 hours at a time
- I find it hard to walk or talk
- I find it hard to breathe
- I'm coughing or wheezing a lot
- my chest is tight or it hurts.

If I have an asthma attack, I will:

1. Call for help. Sit up and try to keep calm.
2. Take 1 puff of my reliever inhaler (with my spacer, if I have it) every 30 to 60 seconds, up to a total of 10 puffs.
3. If I don't have my reliever inhaler, or it's not helping, or if I'm worried at any time, **call 999 for an ambulance.**
4. If the ambulance has not arrived after 10 minutes and my symptoms are not improving, repeat step 2.
5. If my symptoms are no better after repeating step 2, and the ambulance has still not arrived, **contact 999 again immediately**.

IMPORTANT: If you have a MART or AIR inhaler, please tell the responder when you **call 999**.

What to do after your child's asthma attack:

- If the asthma attack was managed at home, contact your GP surgery or call **111**.
- If your child was treated in hospital, take them to see a healthcare professional within 48 hours of being discharged.
- Make sure your child finishes any medicine they're prescribed, even if they start to feel better.
- If your child does not improve after treatment, see a healthcare professional urgently.