The Gateway Primary Academy
Policy for supporting pupils with medical conditions including administration of first aid and medication

January 2026

Written by: Mr Cassem
Date shared and agreed by full governing body:
To be reviewed: January 2027
Please note this will be updated as necessary following updated guidance from the government with regard to children with medical conditions.

This policy is written in line with the requirements of:-

- Children and Families Act 2014 - section 100
- Supporting pupils at school with medical conditions: statutory guidance for governing bodies of maintained schools and proprietors of academies in England, DfE Sept 2014
- 0-25 SEND Code of Practice, DfE 2014
- Mental Health and behaviour in schools: departmental advice for school staff, DfE June 2014
- Equalities Act 2010
- Schools Admissions Code, DfE 1 Feb 2010

This policy should be read in conjunction with the following school policies:

- SEND Policy
- Child Protection and Safeguarding Policy
- Children who cannot attend school due to health needs

Definition of Medical Conditions

Pupils' medical needs may be broadly summarised as being of two types:

- **Short-term** affecting their participation at school because they are on a course of medication
- **Long-term** potentially limiting access to education and requiring on-going support, medicines or care while at school to help them to manage their condition and keep them well. This includes monitoring and intervention in emergency circumstances. It is important that parents feel confident that the school will provide effective support for their child's medical condition and that pupil's feel safe.

Some children with medical conditions may be considered disabled. Where this is the case governing bodies **must** comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEN) and may have a statement or Education, Health and Care Plan (EHCP). Where this is the case this policy should be read in conjunction with the 0-25 SEND Code of Practice and the school's SEND policy, SEND Information Report and the individual healthcare plan will become part of the EHCP.

The statutory duty of The Governing Body/ Board of Trustees

The Governing Body remains legally responsible and accountable for fulfilling their statutory duty for supporting pupils at school with medical conditions. The governors of The Gateway Primary Academy fulfil this by:

- Ensuring that arrangements are in place to support pupils with medical conditions. In doing so we will ensure that such children can access and enjoy the same opportunities at school as any other child.
- Taking into account that many medical conditions that require support at school will affect quality of life and may be life-threatening. Some will be more obvious than others and therefore the focus is on the needs of each individual child and how their medical condition impacts on their school life.
- Ensuring that the arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions, should show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care. We will ensure that staff are properly trained to provide the support that pupils need.
- Ensuring that no child with a medical condition is denied admission, or prevented from taking up a place in school because arrangements for their medical condition have not been made. However, in line with safeguarding duties, we will ensure that pupils' health is not put at unnecessary risk from, for example, infectious diseases, and reserve the right to refuse admittance to a child at times where it would be detrimental to the health of that child or others to do so.
- Ensuring that the arrangements put in place are sufficient to meet our statutory duties and ensure that policies, plans, procedures and systems are properly and effectively implemented;
- Developing a policy for supporting pupils with medical conditions that is reviewed regularly and accessible to parents and school staff (this policy alongside the supporting children with health needs who cannot attend school).

- Ensuring that the policy includes details on how the policy will be implemented effectively, including a named person who has overall responsibility for policy implementation (see section below on policy implementation);
- Ensuring that the policy sets out the procedures to be followed whenever the school is notified that a pupil has a medical condition (see section below on procedure to be followed when notification is received that a pupil has a medical condition).
- Ensuring that the policy covers the role of individual healthcare plans, and who is responsible for their development, in supporting pupils at school with medical conditions (see section below on individual healthcare plans).
- Ensuring that the school policy clearly identifies the roles and responsibilities of all those involved in arrangements for supporting pupils at school with medical conditions and how they will be supported, how their training needs will be assessed and how and by whom training will be commissioned and provided (see section below on staff training and support).
- Ensuring that the school policy covers arrangements for children who are competent to manage their own health needs and medicines (see section below on the child's role in managing their own medical needs).
- Ensuring that the policy is clear about the procedures to be followed for managing medicines including the completion of written records (see section below on managing medicines on school premises).
- Ensuring that the policy sets out what should happen in an emergency situation (see section below on emergency procedures).
- Ensuring that the arrangements are clear and unambiguous about the need to support actively pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so (see section on day trips, residential trips and sporting activities).
- Ensuring the defibrillators is maintained and a number of staff are trained in the use of the defibrillator is the situation arises.

- Considering whether to:
    - develop transport healthcare plans in conjunction with the LA for pupils with life-threatening conditions who use home- to- school transport.

- Ensuring that the policy is explicit about what practice is not acceptable (see section on unacceptable practice).

- Ensuring that the appropriate level of insurance is in place and appropriate to the level of risk (see section on Liability and Indemnity).

- Ensuring that the policy sets out how complaints may be made and will be handled concerning the support to pupils with medical conditions (see section on complaints).

- Ensuring that the policy sets out procedures followed in the Administration of Medication both long and short term.

- Ensuring that the policy sets out procedures to be followed in the event of an accident within school or offsite whilst in the school's care.

Policy implementation

The statutory duty for making arrangements for supporting pupils at school with medical conditions rests with the governing Body. The governing body have conferred the following functions of the implementation of this policy to the staff below; however, the governing body remains legally responsible and accountable for fulfilling our statutory duty.

The overall responsibility for the implementation of this policy is given to Mr Cassem, headteacher. He will also be responsible for ensuring that sufficient staff are suitably trained and will ensure cover arrangements in cases of staff absences or staff turnover to ensure that someone is always available and on-site with an appropriate level of training.

The School Administrator will be responsible for overseeing the preparation of assessments for school visits and other school activities outside of the normal timetable and for the monitoring of individual healthcare plans. Ensuring students' medical details and emergency contact details are available for both onsite and offsite for staff.

The First Aid officer will be responsible in conjunction with parents/carers, for drawing up, implementing and keeping under review the individual healthcare plan for each pupil and making sure relevant staff are aware of these plans

All members of staff are expected to show a commitment and awareness of children's medical conditions and the expectations of this policy. All new members of staff will be inducted into the arrangements and guidelines in this policy upon taking up their post.

Procedure to be followed when notification is received that a pupil has a medical condition

This covers notification prior to admission, procedures to cover transitional arrangements between schools or alternative providers, and the process to be followed upon reintegration after a period of absence or when pupils' needs change.

For children being admitted to The Gateway Primary Academy for the first time with good notification given, the arrangements will be in place for the start of the relevant school term. In cases, such as a new diagnosis or a child moving to The Gateway Primary Academy mid-term, we will make every effort to ensure that arrangements are put in place within two weeks.

In making the arrangements, we will take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. We also acknowledge that some may be more obvious than others. We will therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life. We aim to ensure that parents/carers and pupils can have confidence in our ability to provide effective support for medical conditions in school, so the arrangements will show an understanding of how medical conditions impact on the child's ability to learn, as well as increase their confidence and promote self-care.

We will ensure that staff are properly trained and supervised to support pupils' medical conditions and will be clear and unambiguous about the need to support actively pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them in doing so. We will make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible.

We will make sure that no child with a medical condition is denied admission or prevented from attending the school because arrangements for supporting their medical condition have not been made. However, in line with our safeguarding duties, we will ensure that all pupils' health is not put at unnecessary risk from, for example infectious disease. We will therefore not accept a child in school at times where it would be detrimental to the health of that child or others.

The Gateway Primary Academy does not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on available evidence. This would normally involve some form of medical evidence and consultation with parents/carers. Should evidence conflict, further discussions may be necessary to ensure

that the right support can be put in place. These discussions will be led by the First Aid Officer following which an individual healthcare plan will be written in conjunction with the parent/carers, and be will be put in place and shared with appropriate staff.

Individual healthcare plans (Appendix 1)

Individual healthcare plans will help to ensure that The Gateway Primary Academy effectively supports pupils with medical conditions. They will provide clarity about what needs to be done, when and by whom. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. They are likely to be helpful in the majority of other cases too, especially where medical conditions are long-term and complex. However, not all children will require one. The school, healthcare professional and parent/carer should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached the Headteacher, Mr Cassem, is best placed to take make the final decision.

Individual healthcare plans will be easily accessible to all who need to refer to them, while preserving confidentiality. Plans will capture the key information and actions that are required to support the child effectively. The level of detail within the plan will depend on the complexity of the child's condition and the degree of support needed. This is important because different children with the same health condition may require very different support. Where a child has SEN but does not have a statement of EHC plan, their special educational needs should be mentioned in their individual healthcare plan.

Individual healthcare plans (and their review) should be drawn up in partnership between the school, parents/carers and a relevant healthcare professional e.g. school, specialist or children's community nurse, who can best advise on the particular needs of the child. Pupils should also be involved whenever appropriate. The aim should be to capture the steps which The Gateway Primary Academy should take to help manage their condition and overcome any potential barriers to getting the most from their education. Partners should agree who will take the lead in writing the plan, but responsibility for ensuring it is finalised and implemented rests with the school.

The Gateway Primary Academy will ensure that individual healthcare plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed. They will be developed and reviewed with the child's best interests in mind and ensure that The Gateway Primary Academy assesses and manages risks to the child's education, health and social wellbeing, and minimises disruption. Where a child is returning to school following a

period of hospital education or alternative provision, we will work with the local authority and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

Individual healthcare plans should all include the following information

- 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 (some children will be able to take responsibility for their own health needs) including in emergencies. If a child is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring;
- Who in the school needs to be aware of the child's condition and the support required
- What to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan

Roles and responsibilities

Please refer to the section on policy implementation for the functions that have been delegated to different, named members of staff at The Gateway Primary Academy.

In addition we can refer to the **Community Health Team** for support with drawing up Individual Healthcare Plans, provide or commission specialist medical training, liaison with lead clinicians and advice or support in relation to pupils with medical conditions.

Other **healthcare professionals, including GPs and pediatricians** should notify the Community Health Team when a child has been identified as having a medical condition that will require

support at school. Specialist local health teams may be able to provide support, and training to staff, for children with particular conditions (eg Asthma, diabetes, epilepsy)

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other pupils will often be sensitive to the needs of those with medical conditions, and can, for example, alert staff to the deteriorating condition or emergency need of pupils with medical conditions.

Parents/carers should provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents are key partners and should be involved in the development and review of their child's individual healthcare plan, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, eg provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Local authorities are commissioners of school nurses for maintained schools and academies in Kent. Under Section 10 of the Children Act 2004, they have a duty to promote co-operation between relevant partners such as governing bodies of maintained schools, proprietors of academies, clinical commissioning groups and NHS England, with a view to improving the well-being of children with regard to their physical and mental health, and their education, training and recreation. KCC is currently consulting on the re-organisation of its Health Needs provision which will strengthen its ability to provide support, advice and guidance, including suitable training for school staff, to ensure that the support specified within individual healthcare plans can be delivered effectively. KCC will work with us to support pupils with medical conditions to attend full time. Where pupils would not receive a suitable education in a mainstream school because of their health needs, The local authority has a duty to make other arrangements. Statutory guidance for local authorities sets out that they should be ready to make arrangements under this duty when it is clear that a child will be away from school for 15 days or more because of health needs (whether consecutive or cumulative across the year) education for children with health needs who cannot attend school

Providers of health services should co-operate with schools that are supporting children with medical conditions. They can provide valuable support, information, advice and guidance to schools, and their staff, to support children with medical conditions at school.

Clinical commissioning groups (CCGs) commission other healthcare professionals such as specialist nurses. They have a reciprocal duty to co-operate under Section 10 of the Children Act 2004 (as described above for local authorities). The local Health and Well-being Board provides a forum for the local authority and CCGs to consider with other partners, including locally elected representatives, how to strengthen links between education, health and care settings.

The **Ofsted** inspection framework places a clear emphasis on meeting the needs of disabled children and pupils with SEN, and considering the quality of teaching and the progress made by these pupils. Inspectors are already briefed to consider the needs of pupils with chronic or long-term medical conditions alongside these groups and to report on how well their needs are being met. Schools are expected to have a policy dealing with medical needs and to be able to demonstrate that it is being implemented effectively.

Staff training and support

The following staff have received full first aid training:

School First Aiders (full first aid at work certificate) are:
Mrs Hazel Hogg – Teaching Assistant (September 2025 – September 2028)
Mrs Clare Taylor – Teaching Assistant (Sept 25 – Sept 2028)

Paediatric First Aider:
Mrs Sam Mahoney – Teaching Assistant/MMS/ Breakfast Club (Dec 2025 – Dec 2028)
Miss Molly Cleary – Teaching Assistant/MMS - (March 2025 – March 2028)

Defibrillator trained staff: All staff
Staff responsible for the maintenance of the defibrillator:
Mrs Munday – Office Administrator
Named people for administrating medicines:
All staff

All support staff receive First Aid Training including Epipen Training.

An up to date record of First Aid Training is kept in the Medical File located in the school office medical procedures.

All staff who are required to provide support to pupils for specific medical conditions will be trained by healthcare professionals qualified to do so.

Training should be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements set out in the individual healthcare plans. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

Staff must not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect any individual healthcare plans). A first aid certificate does not constitute appropriate training in supporting children with medical conditions. Healthcare professionals, including the school nurse, can provide confirmation of proficiency of staff in a medical procedure, or in providing medication (see template).

All staff will receive induction training and regular whole school awareness training so that all staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing the policy. Mr Cassem, Headteacher, will seek advice from relevant healthcare professions about training needs, including preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.

The family of a child will often be key in providing relevant information to school staff about how their child's needs can be met, and parents will be asked for their views. They should provide specific advice, but should not be the sole trainer.

The child's role in managing their own medical needs

If, after discussion with the parent/carer, it is agreed that the child is competent to manage his/her own medication and procedures, s/he will be encouraged to do so. This will be reflected in the individual healthcare plan.

Wherever possible children in Year 5 & 6 will be allowed to access their own medication for self-medication quickly and easily; these will be stored in the classroom, to ensure that the safeguarding of other children is not compromised. The Gateway Primary Academy also recognises that children who take their medicines themselves and/or manage procedures may require an appropriate level of supervision. If it is not appropriate for a child to self-manage, then relevant staff will help to administer medicines and manage procedures for them.

If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but inform the Headteacher who will take the appropriate action which may include informing parents so that alternative options can be considered.

Managing medicines on school premises and record keeping

At The Gateway Primary Academy the following procedures are to be followed:

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so;

- No child under 12 should be given prescription or non-prescription medicines without their parents written consent

- Non-prescription medicines will only be administered by prior agreement of the Headteacher should the parent be unable to attend the school site to administer the medicine. Parents will be informed as and when non-prescription medication such as pain relief is administered.

- The Gateway Primary Academy will only administer prescribed medicines, on completion of a medication form by the parent/carer (Appendix 2). The medication must be in-date, labelled, and provided in the original container as dispensed by the pharmacist. It must include instructions for administration, dosage and storage. The exception to this is insulin which must be in-date, but will generally be available to schools inside an insulin pen or a pump, rather that its original container;

    - All medicines will be stored safely in a locked cupboard in the school office with the exception of Epi-pens and agreed medication such as Eczema cream.
    - Appropriate medicines and devices such as Asthma inhalers and blood glucose testing meters should always be readily available within the classroom and not locked away.
    - Epi-pens are stored in individual boxes, clearly named with a photograph of the child in the school office and classroom. They are kept in clear view for easy access in an emergency, all staff are aware of the location.

    - Medication and devices of all types must be marked with the child's name.

    - The short term medication form will need to be completed by the parent prior to leaving the medicine at the school office.

- During school trips the first aid trained member of staff is responsible for ensuring all required medical devices and medicines are taken on the trip and made available as needed

- Class teacher will carry a folder which lists parental consent to administer emergency treatment, medical details and parent contact details for each child in the class when attending off-site visits.

- Staff administering medicines should do so in accordance with the prescriber's instructions. The Gateway Primary Academy will keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted. Written records are kept of all medicines administered to children. These records offer protection to staff and children and provide evidence that agreed procedures have been followed;

- When no longer required, medicines should be returned to the parent/carer to arrange safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps.

Administration of short term medication

We recognise that some children may require medication in school, either on a short-term basis, e.g. antibiotics or more regular basis, e.g. Asthma inhalers.
Under these circumstances the school will assist in the administration of medicines in school, although responsibility for a child's health lies with parents and, if at all possible we encourage parents to ensure that any prescription medicine is administered out of school hours. Acutely unwell children are expected to remain at home. If this is not appropriate, the following procedures are followed:

• Parents are asked to complete an agreement to administer medicine in school giving details of the medication and when it should be administered. No child will be given medication without this permission. Only medicine prescribed by a doctor will be administered in school, except where prior agreement has been made with the Headteacher for non-prescribed medication, such as pain relief, to be administered.

All medicine is to be clearly labelled with the child's name and kept in a locked cupboard in the main office. The only exception to this procedure is medication for children who suffer from anaphylaxis and require medication from an Epi-pen. Medicines which need to be refrigerated are kept in a cool place.

• Parents/carers are responsible for ensuring that short term medication is delivered to the school office each morning and collected at the end of the school day.

• A record is kept of any medicine administered in school.

• Where practical, parents are asked to provide only the dose required for each day.

• Class teachers and support staff are informed of any child in their care receiving medication.

• Parents are made aware of our policy and procedures at pre-school meetings and through the school brochure. They are responsible for informing the school about any medical condition their child may have.

Severe Allergies

For children who suffer from severe allergies and require an epi-pen in school the following procedures are followed:

• A list and photographs of all children requiring epi-pens is kept in the medical file/first aid book.

• Support staff undertake annual training in the administration of epi-pens.

• Parents are responsible for providing two EpiPens which will remain in the school office in an individual sealed box with the child's photograph and health care plan inside. Parents must ensure that the pens are in date and are replaced before the expiry date. A reminder is sent by the school prior to expiry date.

• Staff are responsible for taking epi-pens on any off-site visits.

Asthma

Lists of pupils requiring asthma inhalers are distributed to staff (including mid-day meals supervisors) at the beginning of each school year.

• Parents are asked to ensure a spare inhaler is kept in school, which is to be kept in a medical box inside the classroom.

• Children are encouraged to take responsibility for their inhalers. These are to be clearly labelled with the child's name and kept in a safe place within the classroom. This ensures staff and pupils can quickly locate the inhaler in an emergency.

• If parents and staff of pupils in Year 5 and Year 6 feel the child is both capable and responsible enough to self-administer their asthma inhaler they may do so providing a self-medication form has been completed. The inhalers will be kept in the child's personal tray (Appendix 3).

• Staff are responsible for ensuring inhalers are taken with children on any offsite visits.

• A child having an asthma attack is never left unattended and first aiders are always called to assist.

• Staff are expected to remain calm, reassure the child, and encourage him/her to breathe slowly, deeply and to relax.

• If a child does not respond to an inhaler further medical assistance is sought; an ambulance called and parents/carers immediately contacted.

First Aid

• All playground and classroom accidents that result in first aid treatment are recorded in the accident book by the teacher, teaching assistant or mid-day meals supervisor.

• The accident book is to be checked by the Head teacher at the end of each term and action reported to the Governing Body if necessary.

• All accidents that receive medical treatment are reported to parents. Accidents and treatment given are recorded on an accident form. White forms are used for general accidents and blue forms for all head injuries. Forms are distributed to the classes at the end

of each break ensuring that teacher's attention is drawn to the head injury forms. All forms are handed to the children at the end of the school day to take home.

• In the event of a serious injury requiring hospital treatment and/or loss of attendance at school an accident form (**HS157**) is completed and KCC HSE reporting procedures followed as set out in KCC framework for Health and Safety Section 7. These accident forms and guidance are kept in the school office.

• In cases where a child is very distressed following an accident, or where the severity of the accident requires additional care or hospital treatment parents are contacted as soon as possible. A list of emergency contact numbers are kept in the school office and are regularly updated by office staff. In an emergency situation two members of staff may be authorised by the Headteacher to accompany a child to hospital.

Emergency procedures

Mr Cassem Headteacher, will ensure that arrangements are in place for dealing with emergencies for all school activities wherever they take place, including school trips within and outside the UK, as part of the general risk management process.

Where a child has an individual healthcare plan, this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other pupils in the school should know what to do in general terms, such as informing a teacher immediately if they think help is needed.

If a child needs to be taken to hospital, staff should stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.

Day trips, residential visits, and sporting activities

We will actively support pupils with medical conditions to participate in day trips, residential visits and sporting activities. We will be flexible in making reasonable adjustments unless there is evidence from a clinician such as a GP that this is not possible.

We will always conduct a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions can be included safely. This will

involve consultation with parents\carers and relevant healthcare professions and will be informed by Health and Safety Executive (HSE) guidance on school trips.

Teachers leading the trips shall be issued with the file containing **all pupils** medical needs and parental consent for medical treatment. Where applicable they will also have a copy of the relevant health care plan.

Other issues for consideration

Where a pupil uses home-to-school transport arranged by the LA and they also have a medical condition which is life-threatening, we will share the pupil's individual healthcare plan with the local authority.

Organise staff training for the use of the defibrillator.

Unacceptable practice

Although staff at The Gateway Primary Academy should use their discretion and judge each case on its merit with reference to the child's individual healthcare plan, it is not generally acceptable practice to:

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- Assume that every child with the same condition requires the same treatment;
- Ignore the views of the child or their parents\carers; or ignore medical evidence or opinion (although this may be challenged);
- Send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- If the child becomes ill, send them to the school office or medical room unaccompanied or with someone suitable;

- Penalise children for their attendance record if their absences are related to their medical condition, eg hospital appointments;

- Prevent pupils from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively;

- Require parents\carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs; or

- Prevent children from participating, or creating unnecessary barriers to children participating in any aspect of school life, including school trips, eg by requiring parents to accompany the child.

Liability and indemnity

The Academy has full insurance through the DFE's Risk Protection Assurance Scheme for Academies.

Complaints

Should parents\carers be unhappy with any aspect of their child's care at The Gateway Primary Academy, they must discuss their concerns with the school. This will be with the child's class teacher in the first instance, with whom any issues should be addressed. If this does not resolve the problem or allay the concern, the problem should be brought to the attention of the Headteacher. In the unlikely event of this not resolving the issue, the parent\carer must make a formal complaint using The Gateway Primary Academy Complaints Procedure.

Appendix 1.

THE GATEWAY PRIMARY ACADEMY

HEALTH CARE PLAN FOR A PUPIL WITH MEDICAL NEEDS

Pupils Name:

Parent's role and responsibilities:

- Advise school regarding their child's/young person's condition/treatment/care required and any changes as they occur in writing
- Supply medication, suitable snacks or supplements to school clearly labelled with child's/young person's details

- Ensure medication is available, in date and usable at all times
- Agree access to health care plan for appropriate staff
- Ensure their child/young person is encouraged to self manage their health care as appropriate

School's roll and responsibilities:

- Store medication safely
- Store snacks or supplements with easy access if needed
- Inform staff of medical condition as appropriate
- Record administration of medication/snacks/supplements
- To keep original care plan in school and give copies to Parent and School Nurse

Health care professionals role and responsibility:

- Advise, support and train school staff (where appropriate) in managing this medical condition in school
- Support in drawing up health care plan in partnership with Parents, School and young person, as appropriate

PARENTAL CONSENT FOR SCHOOL TO ADMINISTER MEDICATION:

I consent to the following medication…… being administered to my child……by staff who have received training and are willing to do so, as agreed in this care plan (see training sheet if appropriate)

Academy Staff, who have received appropriate training, and following school guidelines will be covered under the Academy Public Liability Insurance Policy.

Name……. Signature……. Parent/carer

HEALTH CARE PLAN

Name of school	
Child's name	
Class	
Date of birth	

Child's address

Medical diagnosis or condition

Date

Review date

Family Contact Information

Name

Phone no. (work)

Home

Mobile

Name

Phone no. (work)

Home

Mobile

Clinic/Hospital Contact

Name

Phone no.

G.P.

Name

Phone no.

Describe medical needs and give details of child's symptoms

Daily care requirements during the school day

Describe what constitutes an emergency for the child, and the action to be taken if this occurs

Who is responsible in an emergency (state if different for off-site activities)

Form copied to

Headteacher Name:…… Signature……

Appendix 2

Agreement for administration of Medication
in School

Name of child :_____ **Class:**_____

Medical condition or illness:

_____

Medicine

Name of medicine:

_____

Quantity to be administered:

_____

Time to be administered:

_____

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

_____

Arrangement to continue until: a) **Date** ☐

b) **When instructed by parents** ☐

I agree to ensure the correct dosage is delivered to the school office each day.

Signed:_____parent/carer

Date:_____

Headteacher

I agree that (name of child)_____ can receive his/her medication in school as detailed.

He/she will be supervised whilst he/she takes the medication by:

_____

Signed: _____ Headteacher

Date:_____

Appendix 3

Agreement for self-administration of
Asthma Medication Year 5 & Year 6

Name of child :_____

Class:_____

Name of Medication :_____

Quantity to be administered:

_____

Time to be administered:

_____

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

_____

Pupil

- **I agree to take responsibility for my inhaler in school**
- **I will use my medication sensibly and only when needed**
- **I will notify a member of staff if I feel unwell**

Signature:_____
Date:_____

Parent

- **I have discussed this agreement with my child and give permission for him/her to self-administer his/her asthma medication agree to take responsibility for my inhaler in school until otherwise notified**
- **I accept responsibility for replacing my child's medication when necessary**
- **I will label my child's inhaler with their name and current class**

Signature:_____
Date:_____

Headteacher

I agree that (name of child)_____ can receive his/her medication in school as detailed above.

Signed: _____Headteacher