

# Oak Farm Primary School

## Supporting Children with Medical Needs and First Aid Provision.

September 2023



**OAK FARM**  
PRIMARY SCHOOL

Approved by:

Date: September 2023

Last reviewed on:

Next review:

September 2024

### 1. Aims

This policy aims to ensure that:

- Pupils, staff and parents understand how our school will support pupils with medical conditions
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities.

The governing board will implement this policy by:

- Making sure sufficient staff are suitably trained;
- Making staff aware of pupil's condition, where appropriate;
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions;
- Providing supply teachers with appropriate information about the policy and relevant pupils;
- Developing and monitoring individual healthcare plans (IHPs).

## **2. Legislation and Statutory Guidance**

This policy meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education's statutory guidance: Supporting pupils at school with medical conditions.

## **3. Definitions**

- 'Parent' is a wide reference not only to a pupil's birth parents but to adoptive, step and foster parents, or other persons who have parental responsibility for, or who have care of, a pupil.
- 'Medical condition' for these purposes is either a physical or mental health condition as diagnosed by a healthcare professional which results in the child or young person requiring special adjustments for the school day, either ongoing or intermittently. This includes a chronic or short-term condition, a long-term health need or disability, an illness, injury or recovery from treatment or surgery.
- 'Medication' is defined as any prescribed or over the counter treatment.
- 'Prescribed medication' is defined as any drug or device prescribed by a doctor, prescribing nurse or dentist and dispensed by a pharmacist with instructions for administration, dose and storage.

- A 'staff member' is defined as any member of staff employed at Oak Farm Primary School.

## **4. Roles and Responsibilities**

### **4.1 The governing body:**

- Is legally responsible for fulfilling its statutory duties in respect of this policy but also by adhering to statutory guidance from the Department for Education;
- Must ensure arrangements are in place to support pupils with medical conditions;
- Ensures that pupils with medical conditions can access and enjoy the same opportunities as any other child at the school;
- Ensures that no prospective pupil is denied admission to the school because arrangements for their medical condition have not been made;
- Works with the LA, health professionals, commissioners and support services to ensure that pupils with medical conditions receive a full education;
- Ensures that, following long-term or frequent absence, pupils with medical conditions are reintegrated effectively;
- Ensures that the focus is on the needs of each pupil and what support is required to support their individual needs;
- Instils confidence in parents/carers and pupils in the school's ability to provide effective support;
- Ensures that all relevant members of staff are properly trained to provide the necessary support and are able to access information and other teaching support materials as needed;
- Ensures that pupils' health is not put at unnecessary risk. As a result, it 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 or there are contagious diseases in school;
- Ensures that policies, plans, procedures and systems are properly and effectively implemented;
- Provides resources for staff to receive suitable training and to ensure they are competent before they are responsible for supporting children with medical conditions.

### **4.2 The Headteacher:**

- Ensures that all staff are aware of this policy and understand their role in its implementation;
- Dedicates resources to and arranges for a sufficient number of staff to receive training to implement this policy and deliver against all Individual Healthcare Plans (IHPs), including in contingency and emergency situations;
- Makes sure that school staff are appropriately insured and aware that they are insured to support pupils in this way;
- Takes overall responsibility for the development of IHPs;

- Ensures that this policy is effectively implemented with partners;
- Considers recruitment needs for the specific purpose of ensuring pupils with medical conditions are properly supported;
- Contacts the school nursing service where a pupil with a medical condition requires support that has not yet been identified;
- Ensures that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date.

#### **4.3 Staff:**

- Will notify parents if their child is unwell.
- May be asked to provide support to pupils with medical conditions, including the administering of medicines, but are not required to do so;
- Take into account the needs of pupils with medical conditions in their lessons when deciding whether or not to volunteer to administer medication;
- Receive sufficient training and achieve the required level of competency before taking responsibility for supporting pupils with medical conditions;
- Know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.
- Will take into account the needs of pupils with medical conditions that they teach.

#### **4.4 Parents:**

- Notify the school if their child has a medical condition;
- Provide the school with sufficient and up-to-date information about their child's medical needs;
- Are involved in the development, drafting and review of their child's IHP;
- Carry out any action they have agreed to as part of the implementation of the IHP e.g. provide in date medicines and equipment;
- Sign a parental consent form to administer medicine or treatment before bringing medication into school;
- Ensure that they, or another nominated adult, are contactable at all times.

#### **4.5 Pupils:**

- Are fully involved in discussions about their medical support needs;
- Contribute, if wishing to, to the development of their IHP;
- Provide information about how their medical condition affects them;
- Comply with the IHP and self-managing their medication or health needs including carrying medicines or devices, if judged competent to do so by a healthcare professional and agreed by parents.
- Are sensitive to the needs of pupils with medical conditions.

#### **4.6 The school nurse:**

- At the earliest opportunity, notifies the school when a pupil has been identified

as having a medical condition which requires support in school. This will be before the pupil starts school, wherever possible;

- Supports staff to implement IHPs and provides advice and training;
- Liaises with lead clinicians locally on appropriate support for pupils with medical conditions.

#### **4.7 Other Healthcare Professionals:**

- Such as GPs and pediatricians, will liaise with the school's nurses and notify them of any pupils identified as having a medical condition;
- Support staff to draft and implement IHPs and provide advice and training;
- Provide specialist support if necessary, for example providing support in schools for children with particular conditions (e.g. asthma, diabetes).

#### **4.8 Clinical Commissioning Groups (CCGs)**

- Ensure that commissioning is responsive to pupils' needs, and that health services are able to cooperate with schools supporting pupils with medical conditions;
- Make joint commissioning arrangements for education, health and care provision for pupils with SEND;
- Are responsive to LAs and schools looking to improve links between health services and schools;
- Provide clinical support for pupils who have long-term conditions and disabilities;
- Ensure that commissioning arrangements provide the necessary ongoing support essential to ensuring the safety.

#### **4.9 The Local Authority (LA):**

- Commissions school nurses for local schools;
- Promotes co-operation between relevant partners;
- Makes joint commissioning arrangements for education, health and care provision for pupils with SEND;
- Provides support, advice and guidance, and suitable training for school staff, ensuring that IHPs can be effectively delivered;
- Works with the school to ensure that pupils with medical conditions can attend school full-time.
- Where a child 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.

## **5. Admissions**

No child is denied admission to the school 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. School admission forms will request information on pre-existing medical conditions.

## **6. Equal opportunities**

Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so unless medically indicated by a health professional such as a GP.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities. Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

Please also refer to Health and Safety Executive (HSE) guidance on school trips.

## **7. Being notified that a child has a medical condition**

When the school is notified that a pupil has a medical condition, the process outlined in Appendix 3 will be followed to decide whether the pupil requires an IHP. The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

## **8. Medical Conditions Register**

- A medical conditions list or register will be kept, updated and reviewed regularly.
- Parents will be made aware that their child is being added to the medical conditions register through the process outlined in the diagram at Appendix 3 and will be involved in key decisions around whether their child will require an IHP.
- All class teachers will have a list of the pupils in their care who have a medical condition and this will be within easy access. Class teachers will also have been informed through the process outlined in Appendix 3. Supply staff and support staff will be informed on a need to know basis.
- Parents can be assured that data sharing principles are adhered to.

## **9. Individual Healthcare Plans (IHPs)**

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to the SENCO. Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the Headteacher will make the final decision.

IHP plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician who can best advise on the pupil's specific needs. The plan will be reviewed at least annually or earlier if there is evidence of a change in need. The pupil will be involved wherever appropriate.

Where a pupil has an Educational, Health and Care Plan (EHCP), the IHP will be linked to it or become part of it. If a pupil has SEN but does not have an EHCP, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed.

The Headteacher and SENCO, will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments;
- The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons;
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions;
- The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring;
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable;
- Who in the school needs to be aware of the pupil's condition and the support required;

- Arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours;
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments;
- Where confidentiality issues are raised by the parent/pupil about the designated individuals to be entrusted with information about the pupil's condition;
- What to do in an emergency, including who to contact, and contingency arrangements.

IHPs will be easily accessible to all relevant staff whilst preserving confidentiality. Staffrooms are inappropriate locations under Information Commissioner's Office (ICO) advice for displaying IHPs as visitors/parent helpers may enter. However, in the case of conditions with potentially life-threatening implications, the information will be available clearly and accessible to everyone on Medical Tracker.

Where a child is returning from a period of hospital education of alternative provision or home tuition, collaboration between the local authority or alternative provision provider and school is needed to ensure that the IHP identifies the support the child needs to reintegrate.

## **10. Staff Training and Support**

The following measures are put in place in terms of staff training and support:

- Any staff member providing support to a pupil with medical conditions receives training.
- Staff do not undertake healthcare procedures or administer medication without appropriate training.
- Training needs are assessed by the school nurse in conjunction with all stakeholders through the development and review of IHC plans, on a termly basis for all school staff, and when a new staff member arrives. The school nurse identifies suitable training opportunities that ensure all medical conditions affecting pupils in the school are fully understood, and that staff can recognise difficulties and act quickly in emergency situations.
- Newly appointed staff all receive training on the 'Supporting Pupils with Medical Conditions' policy alongside other key school procedures such as reporting accidents, intimate care, first aid and health and safety.
- The clinical lead for each training area/session will be names on

each IHP. The following measures are also put in place:

- No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to this condition

and signed off as competent.

- The school nurse confirms the proficiency of staff in performing medical procedures or providing medication.
- A first aid certificate does not constitute appropriate training in support children with medical conditions.
- School will keep a record of medical conditions supported, training undertaken and a list of staff qualified to undertake responsibility under this policy. They will notify Health and Safety DCC, and Risk, Insurance & Governance Manager, DCC.

## 11. Medicines

**Welfare is located** - on the first floor between Yr. 3 and Yr. 4

Prescription medicines will only be administered at school:

- When it would be detrimental to the pupil's health or school attendance not to do so and
- Where we have parents' written consent (see parental consent to administration of medicine form).
- Without written parental consent in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. Every effort will be made to encourage the child to involve their parents whilst respecting their right to confidentiality.

The school will only accept prescribed medicines that are:

- In-date
- Labelled
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage
- The exception to this is insulin which must still be in date, but will often come in a pump or pen rather than its original container (instructions will be included).

When administering medicines, the following points are taken into consideration:

- No child under 16 will be given medication containing aspirin without a doctor's prescription.
- Anyone giving a pupil any medication will first check maximum dosages and when the previous dosage was taken. Parents will always be informed.
- A maximum of four weeks' supply of the medication can be provided to school at one time.
- All medicines are stored safely, locked away, in the school welfare room, those

with long term medical conditions, such as Diabetes, have a medi-bag which contains their medicine, they also have an assigned member of staff. Signed consent for administration of medicines and details on how to administer medicine as well as what to do in an emergency are kept by welfare via care plans.

- Adults, and children (where appropriate) know where their medicine is at all times and can access them immediately. On a school trip, the designated first aider or trip leader will keep these in a bag on their person at all times to ensure immediate availability.

Whilst a child may legally have in their possession a prescribed controlled drug (if competent to do so), at Oak Farm Primary School, these are, instead, kept securely stored in a non-portable container and only named staff have access. These are easily available in an emergency and a record is kept of the amount held in school and the dosages administered.

- Written records will be kept of any medication administered to children stating what, how and how much was administered, when and by whom. Any side effects of the medication administered at school will also be noted (note that Oak farm Primary School cannot be held responsible for side effects when medication is administered correctly).
- Medicines will be returned to parents to arrange for safe disposal when no longer required. Sharps boxes will be made available if required for the safe disposal of needles and other sharps.

## **12. Self-Management**

Following discussion with parents/carers, pupils who are competent to manage their own health needs and medicines are encouraged to take responsibility for self-managing their medicines and procedures. This is reflected in their IHP.

Pupil's medicines or devices are held in suitable locations that can be accessed quickly and easily. Pupils who self-administer medicine may require an appropriate level of supervision. This will be set out in their IHP.

If a child 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 is followed. Following such an event, parents/carers are informed so that alternative options can be considered.

## **13. Emergency Procedures**

Medical emergencies are dealt with under the school's emergency procedures.

IHPs will clearly define what constitutes an emergency and explain what to do, including

ensuring all relevant staff are aware of what to look out for and procedures. Other pupils may know what to do in general terms, for example informing a teacher straight away if help is needed.

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

## **14. Daily welfare provision**

All accidents, no matter how small, must be entered on the Medical Tracker- grazes, nose bleeds, scratches, head and regular tummy aches etc. All bumps on the head should be taken seriously and referred to the Welfare Team for further examination. The Welfare Team will determine the next course of action and will call the parents to inform them if it is serious or there is a mark on the child's face. A bump note is sent via Medical Tracker sent home for information. A note should also be sent for accidents resulting in serious grazes, nose bleeds etc.

Where a child has hospital treatment following an accident during school hours, witness statements are written by all staff that witnessed the incident and gave immediate care of the child. All accounts are added to Medical Tracker.

Children often need a change of clothes and if adult assistance is required then two adults must be present to do this. Spare clothes are kept in the Medical Room cupboard. The clothes going home should be put in a carrier bag. It may be necessary to wash a child. A shower in the room next to the main office is supplied for this purpose and two adults must be present at all times.

At the beginning of the autumn term a meeting is held with the Welfare Team and the member of staff from the Nursery to discuss the children transferring to the main school.

SIMS/Medical Tracker is kept up to date with all relevant pupil details.

A spreadsheet including medical information is given to each class teacher with known medical information on it for each child in the class. Parents are asked about medical conditions when a child enters the school, this is added to SIMS and Medical Tracker.

The school has an Asthma Policy. A list of all asthmatic children and children with allergies is kept on Medical Tracker and in class boxes. This ensures immediate availability should a medical emergency arise.

Parents supply a spare inhaler OR EpiPen to be kept in school. Please refer to Asthma policy (separate) and Allergy policy at Appendix 4.

There are also six green emergency asthma bags around the school, one located in each year group corridor, one by the Crossway, one in the Medical Room and one in the Nursery.

The Welfare Assistant should arrange for the School Nurse to meet with the staff annually to bring them up to date with procedures to comply with the asthma policy. Oak Farm have yearly Asthma training for all staff and hold the Asthma Champion Award.

### **Record Keeping**

The Welfare Assistant is responsible for accepting medication and ensuring that a parental consent form is signed. Parents must give written permission for the Welfare Assistant to administer emergency treatment prior to the child starting nursery/school - this includes permission for inhalers, Adrenaline Auto Injectors etc.

Medicines prescribed by the doctor can only be administered when parents have completed and signed the permission slip. When medication is given to a child, the details are entered on to the Medication Administered Form which states the date, time, the medicine administered, dosage given, the condition being treated and by whom.

The school will only allow prescribed medications to be administered. We do not keep supplies of pain killers etc.

### **Storage**

Prescribed medicines are kept in the Medical Room in a cupboard accessible only by adults. The medical room is kept shut when welfare staff are not in the room. If medication is required to be refrigerated, it is stored in the fridge in the Medical Room.

### **Monitoring**

A chart listing notifiable infectious diseases and related information is kept in the Medical Room. The Health Authority are advised by the Welfare Assistant of any fractures that happen on the school premises by completing relevant paperwork. The current procedure is to complete a online from: RIDDOR.

**Class first aid box** - These are well stocked and checked regularly by someone from the Welfare team.

**Maybe the child has a minor issue** - A **First Aid Trained** member of staff can manage this with the class first aid box. It is recorded in the yellow record book within the box. Welfare check this book regularly.

If an incident is of a type that needs a visit to Welfare, the Welfare staff will send home an email via Medical Tracker regarding this.

**If a child needs to visit welfare they are** walked there or welfare are phoned to visit the classroom.

**Opening times** - Welfare is open from 8.30am to 3.30pm.

Break and Lunchtimes: Welfare are located in 'The Crossway' area between both playgrounds. The children are aware of this. If Welfare need to be contacted on the phone at this time the main office can contact them via mobile phone.

**Guide to Welfare** - This will be available in the Welfare room for use in cases of emergency cover (So that all the systems are clear to everyone).

## **15. Liability and Indemnity**

The governing body ensures that appropriate insurance is in place to cover staff providing support to pupils with medical conditions as per this policy. All staff providing such support are provided access to the insurance policies (contact Business Manager)  
In the event of a claim alleging negligence by a member of staff, civil actions are most likely to be brought against the school, not the individual.

**The school holds an insurance policy covering liability relating to the administration of medication.**

The policy has the following requirements:

- All staff must have undertaken appropriate training.

**The school holds an insurance policy covering healthcare procedures.**

The policy has the following requirements:

- All staff must have undertaken appropriate training.

## **16. Unacceptable**

**The school will never:**

- 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 and/or their parents/carers.
- 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 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/carers feel obliged or forced to attend school to administer medication or provide medical support, including for toilet issues. The school

will ensure that no parent/carer is made to feel that they have to give up working because the school is failing to support their child's needs.

- Create barriers to children 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.

## **17. Complaints**

All complaints should be raised with the school in the first instance. The details of how to make a complaint can be found in the School Complaints Policy (available in school and on our website).

If the issue remains unresolved, the complainant has the right to make a formal complaint to the DfE. Parents/carers and pupils are free to take independent legal advice and bring formal proceedings if they consider they have legitimate grounds to do so.

## **18. Home to School Transport**

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

### **Review of Policy and Procedures**

Oak farm carries out a three-yearly review of this Policy, led by the SENCO. This includes an evaluation of the extent to which this policy has been effectively implemented throughout the school. The Governors will remedy any deficiencies or weaknesses in addressing issues without delay and without waiting for the next policy review date, should any be necessary.



# APPENDIX 1: Parental Agreement for Administration of Medicine Form



## Oak Farm Primary School

### Parental agreement for Oak Farm Primary School to Administer Medicines.

Oak Farm Primary School will not give your child medicine unless you complete and sign this form.

Full name of child	
Date	
Class	
Name and strength of medicine	
Expiry date of medicine	
Dose to be given	
When to be given	
Any other instructions	

**Note: Medicines must be in the original container as dispensed by the pharmacy**

#### **Any other relevant information:-**

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to Oak Farm staff to administer medicine in accordance with school policy

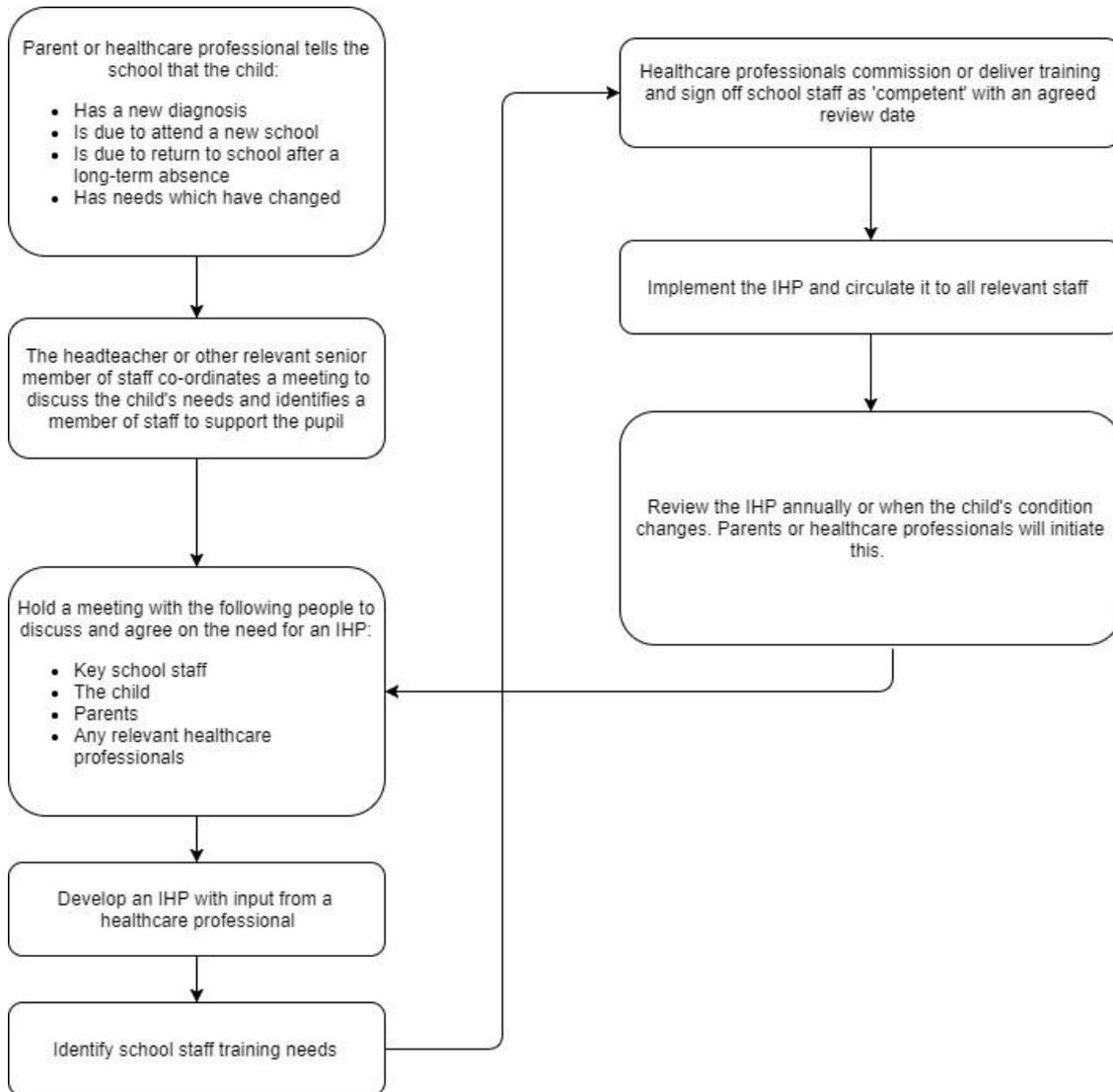
Parent's signature.....

Print name .....

Date.....



### APPENDIX 3: Medical Condition Notification Flowchart



## **Appendix 4**

### Allergy policy

[On line guidance can be found here](#)

[Gov.uk guidance can be found here](#)

Both these guidance's are printed and kept in the welfare room

#### **At least 85% of Oak Farm Staff are trained to:**

- recognise the **signs and symptoms of an allergic reaction**;
- understand the rapidity with which anaphylaxis can progress to a life-threatening reaction, and that anaphylaxis may occur with or without prior mild (e.g. skin) symptoms;
- appreciate the need to **administer adrenaline (using an AAI)** without delay as soon as anaphylaxis occurs, before the patient might reach a state of collapse (after which it may be too late for the adrenaline to be effective);
- be aware of the anaphylaxis policy;
- be aware of how to check if a pupil is on the register;
- be aware of how to access the AAI;
- be aware of which staff members have received training to administer AAIs, and how to access their help.

IN THE FIRST INSTANCE, THE WELFARE TEAM ARE THE PEOPLE THAT ARE CALLED APON TO ASSIST ANY CHILD NEEDING MEDICAL CARE AT SCHOOL.

#### **Severe anaphylaxis is a time-critical situation**

The welfare team have been trained in:

- recognising the range of **signs and symptoms of severe allergic reactions**;
- responding appropriately to a request for help from another member of staff;
- recognising when emergency action is necessary;
- administering AAIs according to the manufacturer's instructions;
- making appropriate records of allergic reactions.

- The welfare team are responsible for overseeing the protocol for use of the "spare" AAI, and monitoring its implementation and for maintaining the allergy register;
- The welfare team are responsible for the supply, storage care and disposal of the AAI.

Parents supply a spare EpiPen to be kept in the emergency box. EpiPens are kept in the classroom's Medical box/bag, In KS1 the children take it with them when they leave the classroom including for lunch, PE and educational visits on and off site. KS2 emergency pens are kept next to the dinner hall by reception desk in clearly marked boxes.

1. It is the parents' responsibility to inform school about a student's condition before commencement of school.
2. The school will arrange a meeting with the parent and School Nurse, if necessary. Action plans and protocols will be drawn up.
3. School will ask for a copy of the care plan from parents regarding medical instructions and treatment as provided by the hospital specialist. It is the parent's responsibility to update medical instructions and provide consent for the administration of medication.
4. It is the responsibility of the parents to provide 2 EpiPen, one which will be kept in the Class Medical Box and one in the emergency box by reception desk.
5. It is the responsibility of the class teacher to carry the Class Medical Box to all school activities within or outside school grounds (a portable medi-kit is provided for school trips). These means two pens go with the teacher on all trips.
6. It is the school's responsibility (in liaison with the parent) to check the expiry date of medication and parental responsibility to replace medication, which is due to expire or has been used.
7. The school will ensure first aiders and other school staff are identified and have received recognised training and updates.
8. All staff will be briefed about a student's condition and training will be arranged with the School Nurse annually. This will include practical supervised sessions on the administration of adrenaline injection. Action plans/care plans are stored in the Medical room and small kitchen downstairs for the use of the SMSA's/Breakfast Club. All plans are stored securely on Medical tracker too.
9. All appropriate medications are accessible during the day.

10. Parents will provide a snack as required. Where a parent wishes a student to have school dinners, Pabulum, the school caterer, will produce a consent form.

11. Prior discussion will take place between school and parents regarding provision of food and medicine when school outings are planned.

12. When planned curriculum involves contact with food items (eg cookery), prior discussion will take place between the school and parents/carers to agree on suitable ingredients.

13. Training support for staff will be reviewed on at least on an annual basis.