

CAMBOURNE VILLAGE COLLEGE MANAGING ILLNESS & MEDICINES POLICY	
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Introduction

The Governors of Cambourne Village College will ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life as possible. To help achieve this, the school has drawn up this policy with due consideration to the following Acts and Guidance:

Supporting students with medical conditions at school. Ref DFE-003393 2014. Published 1st September 2014. Last updated 16 August 2017. [Link](#)

First aid in Schools. Ref DFEE-20025-2000. Published 15th August 2000. Last updated 14th February 2022. [Link](#)

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). [Link](#)

Pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.

Some children with medical conditions may be considered disabled under the definition set out in the Equality Act 2010. The school will comply with their duties under the Act to make reasonable adjustments to support pupils with disabilities.

There are disabled toilets throughout the school. There is a lift at the school entrance and lift keys are available when required, such as wheelchair usage.

Some children with medical conditions may also have Special Educational Needs (SEN) and may have an Education, Health and Care Plan (EHCP) which brings together health and social care needs as well as the provision for their special educational needs. Where the child has a special educational need identified in a statement or EHCP, the Individual Healthcare Plan (IHCP) will be linked to or become part of that statement or EHCP. The IHCP will be developed with the child's best interests in mind to ensure that the risks to the child's education, health and social wellbeing are managed, and minimises disruption, for children with medical conditions.

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with parents, pupils, healthcare professionals (and, where appropriate, social care professionals) and local authorities to ensure that needs of pupils with medical conditions are met effectively.

This policy should be read and considered in conjunction with the Safeguarding Policy and provision for students' wellbeing and mental health as outlined in the Relationship and Sex Education and Health Education Policy.

1. Roles and Responsibilities

1.1. The School

The **Governing Body** for Cambourne Village College will ensure that arrangements are in place so that children with medical conditions:

- are properly supported
- can play a full and active role in school life
- can remain healthy and achieve their academic potential
- ensure that staff are properly trained to provide the support that pupil's needs

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

1.1.1. Training

The **School** will ensure that:

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

1.1.2. Appointed Person

James Russen has been appointed to have overall responsibility for implementing the school's policy for supporting pupils with medical conditions. He will ensure that children with medical conditions are appropriately supported and that individual plans are reviewed at least annually so that they are up to date. The day-to-day preparation and management of the plans may be delegated to the First Aid Support Co-ordinator. For those children with Special Educational Needs, these plans will be drawn up with and reviewed in conjunction with the school's SENCO and Centre Manager.

1.1.3. Transitional Arrangements

The school has made the following procedures for transitional arrangements:

- Parents of new pupils with significant medical needs will have a meeting with the First Aid Co-ordinator, their Year Team, the school's SENCO team, involving their child where appropriate
- Parents will provide information for an Individual Healthcare Plan
- Any prescribed medicine will be approved, written consent provided, and given to the First Aid Support Co-ordinator.

1.1.4. Support in School

All members of **School Staff** may be asked to provide support to pupils with medical conditions, including administering medicines.

All members of staff should know what to do and respond accordingly if they become aware that a pupil with a medical condition needs help.

Staff must not give prescription or non-prescription medication, or undertake healthcare assessments or procedures, without appropriate training.

1.2. Pupils

Where appropriate, pupils with medical conditions:

- will be consulted to provide information about how their condition affects them.
- will 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.

If a child becomes unwell or is injured whilst at school, they should inform their teacher. The teacher will then notify the first aid room and ask for them to be assessed by a first aider. If the first aid room is closed, the pupil will access first aid from the main reception. Pupils will be examined and assessed by a first aider and an appropriate triage of symptoms undertaken. If it is considered that a pupil needs to go home, then a parent/carer will be contacted by the first aid team and asked to collect their child.

If a pupil decides they do not feel well enough to be in school and contacts their parent/carer direct to be collected, this absence will be unauthorised.

1.3. Parents

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

When a child is suffering a minor illness, if parents consider their child is fit for school the school will support their assessment and encourage the child to stay at school for the full day unless their medical condition deteriorates during the course of the school day and gives cause for concern.

Parents/carers should contact the Pupil Absence Line or send an email to thecollege@cambournevc.org, on each day of absence to inform the school if their child is going to be off school due to illness.

Parent/carers should ensure contact details are current and that they always have arrangements in place for their child to be collected from school should the need arise. A responsible adult must collect them and if this is not a person with parental responsibility, we will require written permission from the registered email address of a parent/carer with details of the authorised person collecting. A pupil is generally not allowed to walk or cycle home alone if unwell.

Parents should provide the school with sufficient and up to date information about their child's medical needs.

Parents should tell the school of any change in prescription which should be supported by either new directions on the packaging of medication or by a supporting letter from a medical professional.

Parents are key partners and will be involved in the development and review of any Individual Healthcare Plan for their child. They must also provide medicines and equipment as required by the IHCP.

It only requires one parent to request that medicines are administered. As a matter of practicality, this will be the parent with whom the school has day-to-day contact.

Parents should:

- bring their child's medication and any equipment into school at the beginning of the school year
- replace the medication before the expiry date
- take into school a new asthma reliever inhaler or autoinjector when prescribed
- collect expired items from the school and take them to a pharmacy for safe disposal
- during periods of high pollen count, encourage their children, who suffer from hay fever, to take medication before school so that their condition can be better controlled during the school day
- keep their children at home when they are acutely unwell; ie. an elevated temperature above 37.5C
- keep their child at home for 48 hours following last episode of diarrhoea and/or vomiting

2. Staff Training and Support

The Appointed Person will ensure that all staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing the policy.

Training needs will be assessed to ensure the school provides adequate first aid cover throughout the school.

First aid awareness training is provided to all staff on joining and refreshers are given annually on training days within school or another suitable time for existing staff. Catch-up sessions are held for any member of staff not able to attend. Additional training to meet individual students' additional specific requirements is arranged as and when required. More detailed training for anaphylaxis/epilepsy/asthma/diabetes is offered to all staff via online training and from the first aid team.

Any member of staff who agrees to accept responsibility for administering prescribed medicines to a child does so voluntarily and will have appropriate training and guidance. Training needs will be identified during the development or review of Individual Healthcare Plans and will be reviewed annually. The family of a child will 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, but will not be the sole trainer.

Training will be provided for staff to ensure that they are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in Individual Healthcare Plans. Training will be provided by appropriately qualified individuals so that staff have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative and emergency measures, so that they can recognise and act quickly if a problem occurs.

Only staff with appropriate training will give prescription medicines or undertake healthcare procedures.

3. Individual Healthcare Plans (IHCPs)

An Individual Healthcare Plan clarifies for staff, parents and the pupil the support that can be provided. Individual Healthcare Plans for pupils with medical conditions, (eg. asthma, anaphylaxis, diabetes

and/or epilepsy) will be drafted with parents/pupils and other healthcare professionals where appropriate. The plan will include:

- the medical condition - its triggers, signs, symptoms and treatments
- the pupil's resulting needs, including:
 - medication (dose, side effects and storage) and other treatments,
 - time, facilities, equipment, testing,
 - access to food and drink where this is used to manage their condition, dietary requirements and
 - environmental issues eg. 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 or additional emotional or mental health support
- the level of support needed (some pupils will be able to take responsibility for their own health needs), including in emergencies. If a pupil is self-managing their medication, then this will be 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; 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. This may, where appropriate, require information to be shared with the school's catering contractor and their staff
- confirmation from parents of medication to be held by the school or carried by their child (separate authority forms are required depending upon circumstances) and can be found [here](#)
- separate arrangements or procedures required for school visits or other school activities outside of the normal school timetable that will ensure the pupil can participate, eg. risk assessments
- where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition
- where appropriate, details of the Healthcare Professional / lead clinician involved in managing the child's medical condition
- what to do in an emergency, including whom to contact, and contingency arrangements.

Some pupils may have an emergency Healthcare Plan (such as an Allergy or Asthma Action Plan) prepared by their lead clinician that could be used to inform development of their Individual Healthcare Plan. Healthcare Plans will be reviewed at least annually but some may need to be reviewed more frequently if there is a change in the child's medical needs or circumstances. Where appropriate the Individual Healthcare Plan will be reviewed at the pupil's Annual Review.

Where an Individual Healthcare Plan is drawn up for a child, its existence will be clearly indicated on their Bromcom record and an electronic copy attached to that record to enable it to be easily accessed in an emergency. A printed copy will also be held in the first aid room.

4. The Pupil's Role in managing their own Medical Needs

After discussion with parents, pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. Parents will be asked to give permission for their child to manage their own medical condition and complete the relevant consent forms, including an acknowledgement that their child is mature and responsible enough to manage their own medication.

This information will be recorded in the Individual Healthcare Plan. (This is in reference to auto-injectors, insulin and inhalers.) Please refer to Section 5.1 for special arrangements for Sixth Form students.

If it is not appropriate for a child to self-manage, then relevant staff will help to administer medicines and manage procedures for them, and a record of administration will be made.

If a pupil refuses to take medicine or carry out a necessary procedure, staff will not force them to do so but will contact the parents and follow the procedure agreed in the Individual Healthcare Plan.

Parents will be contacted where the first aid team are notified that the pupil is using their asthma inhaler more frequently than usual as this may indicate their condition is not well-controlled.

For their own safety and for that of others, pupils should not carry any medication other than inhalers, diabetic equipment, and adrenaline auto-injectors (eg. EpiPens). For Sixth Form students, please also refer to the Sixth Form Medicines Policy at 5.1.

5. Managing Medicines on School Premises

There are regulations regarding medicines in a school setting. By law, parents/carers must give written consent for a child aged under 16 to carry their own medication and/or to be given medication by the school. Only certain medication for conditions, such as an allergy which causes anaphylaxis, asthma, or diabetes, will be allowed to be carried by pupils whilst in school. For other recognised and diagnosed medical conditions, or in anticipation of minor illness/injury, there is provision for the school to store and dispense medication to the pupil when necessary, following receipt of written parental consent for all pupils (except Sixth Form students).

Unless it is deemed essential for their condition, pupils are not allowed to carry their own medication. This includes over the counter and prescription medications for pain relief but please refer to Section 5.1 for special arrangements for Sixth Form students.

Pupils will only be given prescription or non-prescription medicines after parents have completed a consent form (except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases the school will encourage the pupil to involve their parents while respecting their right to confidentiality).

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

Medications brought into school must be given to Reception or to the First Aid Support Co-ordinator.

Parents/carers should complete [Form 1](#) for medication that has been prescribed by the doctor, or for analgesics/allergy relief bought over the counter. A trained first aider can administer the medication to the pupil in the first aid room. It is the pupil's responsibility to present to the first aid room, with their class teacher's permission, if their medication needs to be taken at a specific time.

[Form 3](#) requires completion if a parent/carer wishes their child to be allowed to carry their own medication at school. Medicines should always be provided in the original container or box as dispensed by pharmacist or as purchased from a shop, and clearly marked with the child's name. For their own safety, and for that of other persons, pupils should not be carrying their own pain relief medication in school. Parents/carers will need to confirm that their child is responsible enough to understand the administration requirements of their medication and that their child has taken the medication previously without experiencing any side effects.

Separate consent forms will be required for autoinjectors and inhalers (see below). Please complete the [Inhaler Consent](#) or [Autoinjector Consent](#) form as appropriate.

All relevant consent forms must be completed by the parent/carer. It is the parent/carer's responsibility to ensure that medication is handed to the main office or direct to the first aid team. Medication must be in date, in its original packaging, and clearly labelled with pupil's name.

The appropriate forms are available from the school's reception, first aid team or on our website [here](#)

Parents/carers are responsible for ensuring that the medication held by the school is in date and remains appropriate for their child's condition. They are also responsible for notifying the school of any changes to the administration protocol for the medication. Any out-of-date medication will be disposed of. It is **NOT** the school's responsibility to notify parents/carers if medication is out of date.

There is no legal duty requiring school staff to administer medication. This is a voluntary role. If teaching/support staff wish to administer medication, they will receive appropriate training and guidance and follow the school policy on administering medicines.

5.1. Sixth Form Medicines Policy

Part of the Sixth Form ethos at Cambourne Village College is to encourage independence and a sense of responsibility, preparing our young people for adulthood. In line with this ethos, we have developed a medicines policy specifically for sixth form students. In the absence of any information to the contrary, all sixth form students will be assumed to have Gillick competency.

Sixth form students are permitted to carry and self-administer medicines that they may require during the school day, prescription and/or non-prescription. With this comes an expectation that all students will behave in a responsible manner and ensure their health and safety, as well as that of other students in the school.

Students should only bring to school sufficient quantities of any medicines that will/may be required for that day ie. a maximum of two paracetamol tablets, not the whole packet. This will ensure that pupils cannot accidentally take inappropriate quantities within a limited time period.

Students should keep their medication securely on their person at all times.

Students must also strictly not share medicines amongst any other students. Should the student or their parents still prefer the school first aid team to store and administer the medicines, this can be facilitated. Also, should a member of staff have any concerns over the suitability of an individual student to safely and accurately administer their own medications, this will be raised with the student's parents and discussed. Any student who does not adhere to the policy, or acts irresponsibly, will not be permitted to carry or self-administer any medications and these will instead be held in the first aid room.

Parents should still keep the school informed of any medical conditions or regular medication that their child has to take. Students who are prescribed reliever inhalers for asthma or adrenaline auto-injectors for anaphylaxis should still provide a spare to the school for emergency purposes. This policy also applies to any school visit which students may attend; parents are asked to fully document on the visit consent form any medical conditions and details of medication to be taken during the visit. **This information is essential to ensure the health and safety of their child in an emergency situation.**

5.2. Prescribed medication

The school will only accept prescribed medicines that:

- Are in date,
- Are in the original packaging as dispensed by the pharmacy

- Are clearly labelled with the pupil's name
- Include instructions for administration, dosage and storage.

The exception to this is insulin which must still be in date, but will be available inside an insulin pen or a pump, rather than in its original container. Parents should note the expiry date so that they can provide a new prescription as and when required.

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

Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours. We would encourage parents/carers to ask the prescriber to consider the use of medicines that only need to be taken outside school hours. If medication were required three times a day, it could be taken before school, after school and before bedtime, thereby removing the need to bring medicines into school.

A member of the first aid team who is able to administer medication is on site until 4pm.

5.2.1. Controlled Drugs

Some medicines prescribed for pupils (eg. methylphenidate) are controlled by the Misuse of Drugs Act, 1971. A pupil who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another pupil for use is an offence. The school will keep controlled drugs in a locked non-portable container, to which only named staff have access, but will ensure they are easily accessible in an emergency.

School staff may administer a controlled drug to the child for whom it has been prescribed in accordance with the prescriber's instructions. Staff who have access to the Controlled Drugs cabinet and have agreed to administer medication and have received training are:

- Jenni Goldsmith
- Anna Buga
- Sharon Asplen

A record will be kept of any doses used and the amount of the controlled drug held in school, ie. total number of doses (tablets) provided to the school, the dose given, and the number of doses remaining.

A controlled drug, as with all medicines, will be returned to the parent when no longer required to arrange for safe disposal. If this is not possible, it will be returned to a dispensing pharmacist.

5.3. Short-term Medication

Many children will need to take medicines during the day at some time during their time in the school. This will usually be for a short period only, perhaps to finish a course of antibiotics, which will minimise the time that they need to be absent. **Antibiotics** prescribed three times a day can be taken outside of school hours. The school will support children who have been prescribed antibiotics that need to be taken **four** times day. It is the parent's responsibility to provide the medication, under the conditions outlined under 6.2.1, and complete the appropriate authority form.

Any prescribed medication will be held in the first aid room and refrigerated where required by its storage instructions. It is up to the child to remember to visit the first aid room to deliver the medication, take it when required, and collect it at the end of the school day for administration at home.

5.4. Non-prescription Medication

Non-prescription medication will only be given with prior written permission of the pupil's parents unless in exceptional circumstances.

5.4.1. Hay Fever Relief and Antihistamines

The school will not keep hay fever remedies to administer on an ad-hoc basis during the school day. Parents will be contacted if their child has hay fever. If pupils require medication to control hay fever symptoms, then parents will be asked to take their children to a pharmacist or to their GP for a formal diagnosis and advice on appropriate medication.

Most hay fever remedies are now a “one per day” dosage and should therefore be taken by the pupil before school.

Parents may leave a supply of the recommended medication with the first aid team for their child to access if they have omitted to take their dose at home, subject to completion of the relevant authority. Before they will administer the medication, the first aid team will need to confirm with parents that the pupil has not already taken a dose that day.

5.4.2. Pain Relief

Pupils sometimes ask for pain relief (analgesics) at school, eg. paracetamol or ibuprofen tablets or liquid. This may be for conditions such as a headache or period pains, or to deal with an injury.

Parents will be asked to sign a consent form confirming that the medicine has been administered without adverse effect to their child in the past and that they will inform the school immediately if this changes. Parents will be expected to provide the medication for the school to hold for their child’s use.

Pain relief is stored in the first aid room and only administered by members of the first aid team.

Without written consent from a healthcare professional, ibuprofen will not be administered to pupils known to have asthma.

When a pupil requests pain relief, staff will first check maximum dosages and when the previous dose was taken. Parents will be contacted for confirmation if there is any uncertainty. If parents are unavailable, a dose will not usually be given before lunch.

A record will be kept of all doses given. Parents will be notified of the administration of pain relief to ensure that no further doses are given until the specified period has elapsed and that the recommended dose is not exceeded.

6. Record Keeping

Emergency information that is pertinent to administering emergency medication, (such as known potential anaphylaxis), or to conditions requiring immediate treatment (such as epilepsy), is shared with all staff. Information relevant to food allergies is shared with the school’s catering contractor.

Documents stored electronically are held on Bromcom to which all authorised staff have access, and stored on a central shared drive to which limited staff have access. Hard copies of all emergency protocols are kept in the first aid room & in the pupils’ emergency boxes (where held) and may be given to emergency services in the event of them needing to be called.

All other medical information is documented on Bromcom. All medical information is treated in the strictest confidence.

All attendances to the first aid room will be documented by the first aid team using a central spreadsheet to which only limited, relevant staff have access.

The school will keep a record of all medicines administered to individual pupils, stating what

and how much was administered, how, when and by whom. Any side effects of the medication administered at school will be noted. Any medication, whether routine or ad hoc, given to a pupil by staff will be documented on that spreadsheet. Parents/carers will be notified of any ad hoc medication doses given to their child.

A second person will witness the administration of controlled drugs.

A record of administration of medicine will not be recorded where the pupil has taken responsibility for their own medication, eg. asthma inhalers, and takes their medication as and when it is required, unless this takes place in the first aid room.

If a pupil refuses to take medication, staff will not force them to do so but will inform parents/carers by phone or email.

Staff will not administer medication unless suitably trained. If there is any doubt about procedures, staff will check with parents/carers or a healthcare professional before taking further action.

If a pupil has an accident in school, this will be recorded on the central spreadsheet and, if appropriate, parents/carers will be notified. If the accident is reportable, following guidance from Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR), the form is completed online and returned to the Health and Safety Executive. All accidents will be audited each term and reviewed on a termly basis within the Health and Safety meetings. This is to assist with improving the health, safety and welfare of all pupils and staff at Cambourne Village College.

7. Safe Storage of Medicines

Medicines will be stored in a locked cupboard in the first aid room except for emergency medication, such as adrenaline auto-injectors and asthma inhalers, which are stored in the emergency cupboard in the main reception office. Medicines requiring refrigeration will be stored in the first aid room fridge.

Keys for the first aid room are held with the first aid support coordinator and first aid pastoral support. In the event of both the neither person being available, the school site team, SLG, Year Teams and Centre Manager can access the first aid room.

All emergency medication, such as adrenaline auto injectors and asthma inhalers, can be carried by the pupil and/or kept immediately accessible in the school's reception. There are separate consent forms to cover autoinjectors and inhalers to ensure it is clear whether emergency medication is carried on the pupil or held by the school, and that we have appropriate authority to administer the school's spare inhaler/autoinjector if necessary.

Emergency boxes are stored in the emergency cupboard in main reception. Medication to be held by the school should be placed in a plastic box with the student's name on all sides, with a recent photograph of them attached. Individual protocols (eg Allergy Action Plan or Asthma Action Plan), together with the pupil's IHCP and signed consent forms, will be kept inside the box. Emergency boxes will be held by the trip leader accompany the pupil on all off-site visits.

Medicines will be stored strictly in accordance with product instructions - paying particular note to temperature - and in the original container in which dispensed. Pupils will be advised where their medication is stored and how to access it, and there are signs around school to remind them about where and how to access their emergency medication. Medicines and devices such as asthma inhalers and adrenaline pens are always readily available from reception and never locked away.

A few medicines require refrigeration. They will be kept in a clean storage container, clearly labelled, and stored in the first aid room refrigerator. The temperature of the refrigerator will be monitored during the period of storage.

Medication must never be prepared ahead of time and left for staff to administer.

An audit of pupil's medication will be undertaken every term, disposing of any medication that is no longer required. It is the parent's responsibility to ensure their child's medication remains in date, although as a courtesy the school will check the expiry date of essential medication and notify parents when it is about to expire.

8. Disposal of Medicines

Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal.

Sharps boxes will always be used for the disposal of needles. A sharps box is kept in the first aid room.

9. Hygiene and Infection Control

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

10. Day Visits, Residential Visits and Sporting Activities

The school follows all procedures as set out in the County School Visits guidance. The rules on administration of medicine are concordant with those above.

The school trips policy can be viewed on the [Policies Page](#).

The school will actively support pupils with medical conditions to participate in school visits or in sporting activities. The school will make reasonable adjustments for the inclusion of pupils in such activities. Some children may need to take precautionary measures before or during exercise, and may need access, for example, to asthma inhalers. Staff supervising sporting activities will be made aware of relevant medical conditions, and will consider the need for a risk assessment to be made.

The school will consider the reasonable adjustments that can be made to enable pupils with medical needs to participate fully and safely in visits. These arrangements will be included in the risk assessment for the event.

One member of staff accompanying the visit will be asked to take on the lead role for administering medicines or healthcare procedures. Individual Healthcare Plans, essential medicines, equipment and consent forms will be taken on school visits. Medicines are administered and witnessed and recorded. This form is added to the file on return from the visit.

If it is not possible for the pupil to carry their own medication during the activity, they should make sure it is given to the staff member in charge of the sport or activity. This should be labelled clearly with the pupil's name, to avoid any confusion, as there may be several medications handed in. Parents/carers have a responsibility to name medication clearly. Staff cannot be held responsible if unable to give medication because it is not correctly named.

If a pupil has an emergency box, this will accompany them on all offsite trips and activities.

11. Arrangements for Common Conditions

11.1. Asthma

A register of all pupils with asthma will be compiled:

- All parents/carers of children with asthma are asked to provide a copy of their child's Asthma Action Plan
- All staff will be trained to be able to recognise the symptoms of an asthma attack and know how to respond in an emergency
- The majority of pupils are expected to carry their own inhalers and know when and how to administer them. Parents will be asked to sign a consent form for their child to carry an inhaler and to confirm that their child is able to manage their own condition
- The school is happy for parents to provide a spare inhaler for their child which will be held in the main reception and accessible in an emergency, and will be taken on all trips away from the school premises
- The school will maintain an emergency salbutamol inhaler, accessible at all times from reception
- The emergency inhaler will only be given to pupils known to have been diagnosed with asthma whose reliever inhaler is not in school or whose inhaler has run out or expired, who are on the register, and whose parents have provided written consent
- The holding and use by the school of a spare reliever inhaler will be managed in accordance with **Emergency asthma inhalers for use in schools** (published 4th September 2014) [Link](#)
- Trained staff will know how and when to use the emergency salbutamol inhaler
- Parents will be informed of any emergency dosages given

The school's consent form for asthma inhalers can be found here: [Inhaler consent form](#)

11.2. Anaphylaxis (Severe Allergic Reaction)

All staff will be trained to be able to recognise the symptoms of anaphylaxis, and be trained on when and how to use an adrenaline auto-injector.

An Individual Healthcare Plan will be written:-

- This will include the arrangements the school will make to control exposure to the child's allergens
- A copy of the child's Allergy Action Plan should be provided to the school
- If a pupil has been prescribed an auto-injector, a minimum of two auto-injectors must be provided by the pupil's parents to the school. Those pupils are encouraged to securely carry one of the auto-injectors on their person at all times and the other one can be kept in an emergency box for the pupil, held in an unlocked cabinet in the school's reception, which is always readily accessible and staffed
- The emergency box will accompany the child on all trips away from the school premises
- The school will hold a spare auto-injector which can be administered in the event of the failure of the child's own device. This may only be administered if written parental permission has been provided (this consent is part of the standard BSACI Allergy Action Plan)
- The holding and use of an autoinjector by the school will be managed in accordance with **Using emergency adrenaline auto injectors in school** (published 20th September 2017) [Link](#)
- Trained staff will know how and when to use the emergency autoinjector
- Emergency services will be called and parents notified in the event that a pupil's condition requires the use of an autoinjector

The school's consent form for autoinjectors can be found here: [Autoinjector consent form](#)

If additional medications are required to support the pupil's Allergy Action Plan, please complete the relevant consent form(s).

11.3. Epilepsy

All staff will be trained to be able to recognise the symptoms of epilepsy and the emergency first aid steps to be taken.

An Individual Healthcare Plan will be written;

- An appropriate number of staff will be trained in dealing with a seizure, including administering medication where prescribed
- There will be a trained member of staff available to deliver the emergency medication – their details will be recorded on the pupil's Healthcare Plan
- A medical room with a bed will be kept available so that if needed the pupil will be able to rest following a seizure, in a safe supervised place, if appropriate
- The school will offer support with a mentoring or buddying system to help broaden an understanding of the condition
- The school will enable pupils to take a full part in all outings and activities where assessed it is safe for them to do so, after discussion with the pupil's parents and/or medical professionals
- The school will make necessary adjustments eg. exam timings, coursework deadlines, timetables
- The school will liaise fully with parents and health professionals
- Some pupils with epilepsy are prescribed buccal midazolam. This will only be administered by staff who are specifically trained to undertake this task and have agreed to this responsibility
- The dignity of the pupil will be protected as far as possible, even in an emergency
- If appropriate, a record will be kept of the pupil's seizures, so that any changes to seizure patterns can be identified and so that this information can be shared with the pupil's parents and healthcare team
- If specifically requested and authorised by the child's parents, the seizure may be filmed and the video passed on to the parents and healthcare team, after which it will be deleted from the recording device

11.4. Diabetes

An Individual Healthcare Plan will be written;

- Pupils diagnosed with Type 1 diabetes and have been prescribed insulin will be supported by staff who have specifically agreed to this responsibility and have received training and support from the Diabetic Nurses Team.
- Pupils are allowed to use mobile phones or other devices to monitor their condition as required
- Pupils will be provided with access to a dedicated WiFi to ensure that parents can remotely monitor their condition as required
- Pupils may access the first aid room at any time to carry out blood tests and administer insulin or for monitoring if they or their parents are concerned about their levels
- Pupils will not be prevented from eating drinking or taking toilet breaks whenever they need to in order to manage their medical condition effectively
- If a pupil has a hypo, they will not be left alone; a fast-acting sugar, such as glucose tablets, a glucose rich gel, sweets or a sugary drink will be given immediately
- Once the pupil has recovered, slower acting starchy food, such as a sandwich or two biscuits and a glass of milk, will be given, some 10-15 minutes later
- Trained staff are able to administer a glucagon injection.

11.5. Head Injuries

Any head injury will be assessed by a trained first aider and if there are any concerns, parents will be called to seek medical advice from a medical professional.

If the child suffers a minor head injury which gives no immediate cause for concern, parents will be advised and the child will be given a letter to take home to them, providing details of symptoms which may develop that give cause for concern, and action to be taken in those circumstances.

12. Accident & Emergency Procedures

In the event of an accident or medical emergency, the pupil will be assessed by a qualified member of the first aid team who will determine the nature and severity of the injury/illness, based on their training and qualifications.

If it is considered that professional healthcare treatment is required, the school will prioritise dealing with the child's immediate medical needs. Where appropriate, the school will follow the procedure agreed in the child's Individual Healthcare Plan. This may include immediate administration of emergency medication.

If the child is unable or too unwell to be moved, an ambulance will be called by the first aid team. The reception team, or the first aider dealing with the incident, will contact the child's parents and a course of action agreed upon. If parents cannot be contacted, or are unlikely to arrive before the ambulance, an appropriate member of staff will accompany the child in the ambulance and stay with them until their parents arrive at the hospital.

If the pupil is well enough to be moved and ambulance support is not required, parents will be contacted and asked to collect their child and take them to the nearest Accident & Emergency, Minor Injuries Unit or GP surgery, depending on the nature and severity of the illness/injury.

13. School Procedures for Managing Medicines

Medicines should be brought to the school reception office by 8.30am by parents/carers who will be asked to sign the relevant consent form (unless already provided in advance).

The Reception Team or First Aid Support Co-ordinator will check that the medicine is in its original container as dispensed by a chemist, that the details match those on the form, and that the packaging label clearly states

- the child's first and last names
- the name of medicine
- the dose required
- the method of administration
- the time/frequency of administration
- the medication is in date

and that the patient information leaflet is present to identify any potential side effects;

The First Aid Team will log the medicine in the record book and store the medicine appropriately.

Medicines requiring refrigeration will be kept in the fridge in a clean storage container.

A trained team member will administer medication at the appropriate time.

The following procedure will be followed when administering medication:

1. The pupil will be asked to state their name – this is checked against the label on the bottle/packet
2. The name of the medicine will be checked against the authorisation form and record sheet provided by parent/carer

3. The expiry date will be checked
4. The medicine is administered to the pupil
5. The record sheet is completed by a member of the first aid team
6. Administration of controlled medication will be recorded separately in accordance with 5.2.1 and its administration must be witnessed by a second adult
7. Any side effects will be noted and advised to the child's parent/carer
8. The medicine is returned to appropriate storage
9. If a child refuses to take their medicine, staff will not force them to do so. Staff will record the incident and follow agreed procedures (which are set out in the pupil's Healthcare Plan) and contact parents. If a refusal results in an emergency, the emergency procedures detailed in the Healthcare Plan will be followed
10. If the person administering the medication has concerns about a procedure or a medication that they are being asked to administer they will not administer the medicine, but will check with the parents or a health professional before taking further action.

14. Liability and Indemnity

The Governing Body will ensure that the appropriate level of insurance is in place for staff providing support to pupils with medical conditions and appropriately reflects the level of risk.

The school will contact their insurers to extend their cover should a medical intervention fall outside the conditions covered by this policy.

15. Complaints

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