WHOLE SCHOOL MEDICAL AND FIRST AID POLICY

2026-2028

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Version 1.0

CLEEVE SCHOOL
AND SIXTH FORM CENTRE OF EXCELLENCE

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Whole School Medical and First Aid Policy 2026-2028

1. Aims

The aims of our First Aid Policy are to:

- Ensure the health and safety of all staff, pupils, and visitors.
- Ensure that staff and Trustees are aware of their responsibilities with regards to health and safety.
- Provide a framework for responding to an incident and recording and reporting the outcomes.
- Ensure arrangements are in place for first aid and administration of medication.
- Ensure arrangements are in place to support pupils at school with medical conditions.

2. Legislation and guidance

This policy is based on advice from the Department for Education on first aid in schools and health and safety in schools and the following legislation:

- The Health and Safety (First Aid) Regulations 1981, which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel.
- The Management of Health and Safety at Work Regulations 1992, which require employers to make an assessment of the risks to the health and safety of their employees.
- The Management of Health and Safety at Work Regulations 1999, which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training.
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013, which state that some accidents must be reported to the Health and Safety Executive (HSE) and set out the timeframe for this and how long records of such accidents must be kept.
- Social Security (Claims and Payments) Regulations 1979, which set out rules on the retention of accident records.
- The Education (Independent School Standards) Regulations 2014, which require that suitable space is provided to cater for the medical and therapy needs of pupils.
- Supporting pupils at school with Medical Conditions December 2015

3. Roles and responsibilities

3.1 Appointed person(s) and first aiders

The school's appointed persons are responsible for:

- Taking charge when someone is injured or becomes ill.
- Ensuring there is an adequate supply of medical materials in first aid kits and replenishing the contents of these kits.
- Ensuring that an ambulance or other professional medical help is summoned when appropriate.
- First aiders are trained and qualified to carry out the role and are responsible for:
    - Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person and provide immediate and appropriate treatment.
    - Sending pupils home to recover, where necessary.
    - Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident (see the template in appendix 1).

3.2 The Board of Trustees

The Board of trustees has ultimate responsibility for health and safety matters in the school, but delegates operational matters and day-to-day tasks to the Executive Head and staff members**.**

3.3 The Executive Head

The Executive Head with the Head of Operations and Facilities are responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of appointed persons and/or trained first aid personnel are present in the school at all times.
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role.
- Ensuring all staff are aware of first aid procedures.
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place.
- Undertaking, or ensuring that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place.
- Ensuring that adequate space is available for catering to the medical needs of pupils.
- Reporting specified incidents to the HSE when necessary.

3.4 Staff

School staff are responsible for:

- Ensuring they follow first aid procedures.
- Ensuring they know who the first aiders and/or appointed person(s) in school are. *Please contact Head of Operations and Facilities for a list.*
- Completing accident reports (see appendix 1) for all incidents they attend to where a first aider/appointed person is not called.
- Informing the Executive Head or their manager of any specific health conditions or first aid needs. The Executive Head will notify HR/ the Chair of Trustees.

4. First aid procedures

4.1 In-school procedures

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment.
- The first aider, if called, will assess the injury, and decide if further assistance is needed from a colleague or the emergency services. They will remain on the scene until help arrives.
- The first aider will also decide whether the injured person should be moved or placed in a recovery position.
- If the first aider judges that a pupil is too unwell to remain in school, parents will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents.

- In an emergency, arrangements should be made for the parent/guardian to escort the student to A&E. In extreme circumstances a first aider may escort the child to A+E, until the parent/guardian arrives.

- If emergency services are called, the student reception team will contact parents immediately.
  - When the emergency services are called the Head of Operations and Facilities will be informed
- The first aider/relevant member of staff will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury.

4.2 Off-site procedures

When taking pupils off the school premises, staff will ensure they always have the following:

- A school mobile phone.
- A portable first aid kit including, at minimum:
  - A leaflet giving general advice on first aid.
  - 6 individually wrapped sterile adhesive dressings.
  - 1 large sterile unmedicated dressing.
  - 2 triangular bandages – individually wrapped and preferably sterile.
  - Individually wrapped moist cleansing wipes.
  - 2 pairs of disposable gloves.
- Information about the specific medical needs of pupils.
- Parents' contact details.

When transporting pupils using a minibus or other large vehicle, the school will make sure the vehicle is equipped with a clearly marked first aid box containing, at minimum:

- 10 antiseptic wipes, foil packed.
- 1 conforming disposable bandage (not less than 7.5cm wide).
- 2 triangular bandages.
- 1 packet of 24 assorted adhesive dressings.
- 3 large sterile unmedicated ambulance dressings (not less than 15cm × 20 cm).
- 2 sterile eye pads, with attachments.
- 12 assorted safety pins.
- 1 pair of rustproof blunt-ended scissors.

Risk assessments will be completed prior to any educational visit that necessitates taking pupils off school premises.

Should an injury or accident occur during an off-site visit, staff should seek appropriate advice from the First Aid provision at the venue as to the best course of action, and, using this, and their judgement, decide the best course of action.

Contact should be made to the student's parent/guardian, as soon as practicable, from the PE pay as you go phone or staff mobile.

Student Reception should be informed of all First Aid incidents that took place during off-site visits, as soon as practicable.

The student's SIMS medical record is to be updated, as soon as practicable by Student Reception, outlining details of the incident and First Aid provision that took place. If necessary, this needs to include any on-going medical support required.

If the student is fit and well enough to return to school on the school transportation, they will. The student must be left with a First Aider out of school hours, until picked up by parent/guardian.

5. First aid equipment

All requirements for the First Aid kits are supplied by Student Reception and are regularly stocked at request of individual and reviewed annually.

A typical first aid kit in our school will include the following as a minimum:

- A leaflet giving general advice on first aid.
- 20 individually wrapped sterile adhesive dressings (assorted sizes).
- 2 sterile eye pads.
- 2 individually wrapped triangular bandages (preferably sterile).
- 4 medium-sized individually wrapped sterile unmedicated wound dressings.
- 2 large sterile individually wrapped unmedicated wound dressings.
- 3 pairs of disposable gloves.

No medication is kept in first aid kits.

Wheelchairs and blankets are available from the first aid medical room is required.

First aid kits are available off-site trips and can be collected in advance from Student Reception.

The school's minibuses should have a prominently marked First Aid box on board which is readily available for use, and which is maintained in a good condition.

If First Aid kits are used, they should be taken to the First Aid Medical Room via Student Reception, who will ensure that the First Aid Kit is re-stocked.

Cleeve School has two Automated External Defibrillators (AED), which are located in the foyer of Main Reception and the Sports Centre.

6. High Risk Departments

Higher risk departments are normally Design and Technology (D&T), PE and Science. Within these departments some staff are first aid trained.

Should a minor injury or accident occur during one of these lessons, then a qualified First Aider within the department will issue First Aid Care.

All departments have access to a Radio to communicate in an emergency.

Our First Aiders will attend the lesson, as required to give First Aid care/treatment, often resulting in students being transferred from lesson to the First Aid Medical Room safely.

Staff should always call an ambulance when there is a medical emergency and / or serious injury. This should be done by someone who is with the casualty. Please ensure Reception are made aware of the location of the incident and to expect an ambulance crew.

All department minor injuries will be reported to Student Reception First Aiders so that the students SIMS medical record can be updated. If ever, a more severe First Aid incident or accident occurs, the school's First Aiders will be called in line with this policy.

Contact with parents/guardians will not be made if the injury or accident is deemed minor e.g. plaster applied for a minor cut, but all the necessary administration for reporting will be carried in line with this policy.

'When PE utilise our Kayte Lane playing fields, we class this as an on-site provision, and follow this First Aid Policy.'

7. Record-keeping and reporting

7.1 First aid and accident record book

- An accident form will be completed by the first aider/relevant member of staff on the same day or as soon as possible after an incident resulting in an injury.
- As much detail as possible should be supplied when reporting an accident, including all of the information included in the accident form at appendix 1.
- A copy of the accident report form will be sent to Student Reception to be added to the pupil's educational record.
    - In respect of any incident/accident-causing personal injury to students or staff and noted on the form, the Head of Operations and Facilities will take reasonable steps to investigate the circumstances of such accidents.
- Student medical records will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of
- In the event of serious accident/incident, parents/guardians must be informed by a First Aider as soon as practicable.

7.2 Reporting to the HSE

The Head of Operations and Facilities will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The Head of Operations and Facilities will report these to the HSE as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death.
- Specified injuries, which are:
    - Fractures, other than to fingers, thumbs, and toes.
    - Amputations.
    - Any injury likely to lead to permanent loss of sight or reduction in sight.
    - Any crush injury to the head or torso causing damage to the brain or internal organs.
    - Serious burns (including scalding).
    - Any scalding requiring hospital treatment.
    - Any loss of consciousness caused by head injury or asphyxia.
    - Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness or requires resuscitation or admittance to hospital for more than 24 hours.
    - Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident).

- Where an accident leads to someone being taken to hospital.
- Near-miss events that do not result in an injury but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
  - The collapse or failure of load-bearing parts of lifts and lifting equipment.
  - The accidental release of a biological agent likely to cause severe human illness.
  - The accidental release or escape of any substance that may cause a serious injury or damage to health.
  - An electrical short circuit or overload causing a fire or explosion.

Information on how to make a RIDDOR report is available here:
http://www.hse.gov.uk/riddor/report.htm

8. Medical Information

Medical information relating to a student's condition, or any care provided whilst at school, is recorded on the SIMS Medical Records System. Access to this system is restricted to designated users only in order to protect confidentiality.

Upon admission to Cleeve School, parents/guardians should provide an Admission Form containing sufficient information about their child's medical condition or needs. Ideally, this should include a letter from the student's GP outlining treatment, special requirements, and any current medication. Parents/guardians should also ensure that their child's immunisations are up to date in accordance with the UK Department of Health schedule.

Cleeve School works closely with its partner primary schools to ensure that relevant information about a child's health or medical needs is shared so that appropriate support can be provided at Cleeve.

Parents/guardians should, in consultation with the Head of Operations and Facilities and the relevant Head of Learning, agree the school's role in supporting their child's medical needs in accordance with the school's policy. Where appropriate, parents/guardians will be invited to consult with the school and relevant healthcare professionals to develop an Individual Healthcare Plan.

Parents/guardians must inform the school if a student needs to take either prescription or non-prescription medication during the school day and must notify the school of any changes to that medication.

The school requests that medication is only taken at school where it is essential and where it would be detrimental to the student's health not to administer the medication during the school day. Wherever possible, medicines should be taken at home, before or after attending school.

Student Reception staff will seek student and parental agreement, where appropriate, before sharing information about a student's health with other members of staff. Sharing relevant information is important to ensure that staff can provide appropriate care and support.

An Individual Healthcare Plan will be maintained for each student with a chronic or significant medical condition, whether or not regular medication is required. The plan will be reviewed at least annually, or sooner if circumstances change, as identified in the Individual Healthcare Plan. These plans will be stored on SIMS. A Healthcare Plan template is provided in Appendix 2.

Student Reception will be responsible for documenting all medication administered to students and any other relevant information relating to their medication. They will ensure the appropriate maintenance of records and the correct use of the Medical Records System (SIMS) within the First Aid Room and will advise other members of staff as required. Other members of staff may be appointed as a designated person to oversee medication procedures on a day-to-day basis, provided they have received appropriate instruction and record all medication administered on SIMS.

This information will be treated as confidential but may be shared with relevant professionals where necessary to safeguard or promote the welfare of a student or other members of the school community.

9. Students with Medical Conditions

Many students will at some time have a medical condition that may affect their participation in school activities and learning. For many this may be a short-term condition. Other students have medical conditions that, if not properly managed, could limit their access to education. These students are regarded as having medical needs. Most children with medical needs are able to attend school regularly and, with support from the school and the First Aiders, can take part in school activities. However, school staff may need to take extra care in supervising some activities to make sure that these students, and others, are not put at risk and there may be some activities that are unsuitable.

Where appropriate, an individual Health Care Plan can help the school to identify the necessary safety measures to support students with medical needs and ensure that they and others are not put at risk. An individual Health Care Plan should be completed by Student Reception and the Heads of Learning Team with information from the student's parents/guardians with input from Student Reception and the pastoral team.

Parents or guardians have prime responsibility for their child's health and should provide the school with information about their child's medical condition. Parents should give details in conjunction with their child's GP or Paediatrician, as appropriate. Student Reception and the Heads of Learning Team may also be able to provide additional background information for school staff. This information would be confidential and only shared with other members of staff after discussion with parents/guardians to ensure the safety and wellbeing of the student.

All staff should be aware of such medical conditions as asthma, anaphylaxis, diabetes and epilepsy and the emergency care that they may require.

Student Reception can be contacted for any information or advice on these specific conditions and any other conditions a student may have. Specific medical information is only shared with relevant staff in so far as it is important for the wellbeing of the student, whilst at school and on trips. Further details can be requested and given if appropriate for the student's care. This is updated as soon as the school is informed of the condition and as and when Student Reception is informed of any changes/updates throughout the academic year.

9.1 Receipt of Medicines

All medicines brought into school for safe keeping will be received by a member of the reception team and logged on the inventory.

A ‘Medication request form (See Appendix 3) for e.g., Epi-Pen, asthma inhaler) should be completed by the parent/guardian and handed to Student Reception with the medication.

The form should be uploaded to the child’s SIMS medical record so that it may be viewed by all parties permitted to administer medication.

This form will be valid until the child leaves the school, or a separate expiry date noted on the form.

9.2 Medication in School

Cleeve School does not allow students to carry or administer any medications in school, without prior consultation and permission from a Student Reception First Aider.

If a student requests to take any homely medications, such as Paracetamol, during the school day, a phone call home will be completed asking for parental permission to administer Paracetamol. No Paracetamol will be administered to a student, unless parental consent, verbal or written, has been confirmed with a Student Reception First Aider only. Verbal permission will only be taken once during the student’s time at school. The students SIMS medical record will need to be kept up to date with a recording of any homely remedies issued, times and consent given. (see Appendix 4)

9.2.1 Administration of medicines away from school

When away from school the parent/guardian of the student would supply the school the balance of the prescribed medication. For occasional days out, a separate supply may be organised.

Details of the student’s medication taken out should be recorded and the administration supervised by the staff responsible for the student whilst away from school. A record of any administration of medicines whilst on the trip should be communicated back to Student Reception. (See Appendix 4)

Any other student medications would be given to the Trip Organizer with instruction on administration from the parents/guardians and/or Student Reception with information as to the reason for giving and any medical conditions.

If a student attending an off-site visit or sporting event cannot self-medicate, they will be accompanied by a member of staff who has received appropriate training to administer the medication in accordance with this policy.

9.2.2 Storage of Medicines

All medicines should be stored in The First Aid Medical Room.

All medicines shall be stored in the original container in which they were dispensed, together with the prescriber's instructions for administration.

Parents/guardians and are responsible for ensuring that any date-expired medication is collected from the school.

Medication access keys or codes should only be held by authorized designated members of staff.

Emergency medication such as salbutamol inhalers and blood glucose testing meters will be kept in the First Aid Medical Room in a clearly designated place.

A separate and secure dedicated refrigerator is available to be used exclusively for stock and prescribed medicines requiring cold storage.

9.2.3 Students Self Administration of Medicines

When a student is responsible for self-administering medication (aged 16+), prescribed or non-prescribed, an entry must be kept with information of the medication and the times of administration which will be documented on the students SIMS medical record.

Where appropriate, individual students will be given responsibility for keeping such equipment with them and this will be reviewed on a regular basis. In other cases, the equipment will be kept, suitably labelled, and securely stored in the First Aid Medical Room, accessible by Student Reception and all First Aiders on site.

The Heads of Learning teams and Student Reception First Aiders must undertake regular checks to ensure that the student has taken the medication and document such a check on the students SIMS medical record. They must ensure that medication is locked away so that it cannot be taken by other students.

When necessary, discussions should be undertaken by the Heads of Learning teams and Student Reception with the student to encourage compliance in taking medication. Tactful support or timely reminders must be given to the student if necessary to aid compliance. If they are unable to comply, the right to self-medicate may need to be reviewed.

Any problems should be reported to the Head of Operations.

9.2.4 Prescribed Medicines and Controlled Drugs

Written prescriptions, both NHS and private may be provided for individual students for medicines in all categories.

The Medicines Act clearly defines that prescribed medicines must only be administered to the person for whom they have been prescribed, labelled, and supplied. Medicines supplied for individuals are the property of that individual. These medicines may not therefore be used as “stock” by the school.

Staff must not tamper with supplies of prescribed packs of medicines or decant from one container to another for the purpose of storage. This includes remains of the current supply when a new supply is received. The original supply should be finished first. Stock levels of medication should be kept at an appropriate level for each student dependent on need.

Before it can be administered a prescribed medicine must have a printed label showing:

- Student’s name.
- Date of dispensing.
- Name and strength of the medicine.
- Dose and frequency of the medicine.

Multiple containers should be labelled individually. Where items have an inner container, (e.g., eye drops, creams, etc.) the label should be applied to the item instead of, or as well as, the outer container. If the label becomes detached, damaged, or illegible the advice of the Pharmacist should be sought before the product is used.

If medicine is supplied which is unexpectedly different from that received in the past, the staff must check with the prescriber before formally receiving or administering the medication.

It is the responsibility of the parent/guardian to inform Student Reception of any long-term prescribed medication that needs to be administered during school hours and any changes to the prescription.

No verbal orders are to be accepted for a change in dose or frequency of an already prescribed drug unless an accompanying fax, email or written instruction onto the SIMS medical record is available before administration takes place.

Those students who are permitted to possess a controlled drug will be advised that it is an offence to pass the drug to any other person for use.

The school is not permitted to hold controlled drugs as "stock items." The above information relating to prescribed drugs also applies to this group.

If a circumstance arose, where a member of staff was required to remove a substance from a person, they may only take possession of the substance for the purpose of handing it over to the Police for destruction.

A written statement should be produced as soon as practicable but, in any case, before handing the item to the police, which must include the time, date, location and circumstances in which the item was seized.

The actions taken should, whenever possible, be witnessed by another member of staff and the statement by the person seizing the item be countersigned by the witness.

A record must also be made of the time and date the item is passed to the police and the details recorded of the officer to whom it was given, who should also sign the record. Any items seized must be passed to the police as soon as practicable, but in any case, within 24 hours of seizure.

Staff should contact the local community Pharmacist if additional information is required concerning individual medicines.

9.3 Disposal of Controlled Drugs and Other Medicines

All controlled drugs that are out of date or no longer required should be returned to the local pharmacy for destruction, after obtaining positive consent from the parent/guardian of the student for whom they were prescribed. All other unwanted drugs are to be returned to the local pharmacy for destruction.

Prescribed medicines for an individual student are their property and should be returned to the student, parent/guardian, or member of staff as appropriate when leaving the school for any period. Failure in them being collected will result in them be destroyed at the local Pharmacy.

Disposal of medicine should occur when:

- The expiry date is reached.
- A course of treatment is finished or is discontinued.
- When a dose of medicine has been removed from the original container but then not taken by the student. It should be kept by Student Reception and returned to the Local Pharmacy for safe disposal.
- Positive consent has been obtained if the medicine is not a stock item but belongs to a student.
- If a student has left the school and the medication has not been collected by the parent/guardian or student within 14 days of contacting them.
- In the event of death of a student, keep for 14 working days in case needed by Coroner's Office or Courts.

Controlled drugs obtained on individual NHS prescriptions may be disposed of by returning to the supplying pharmacy.

Return of medicines for destruction should be authorised by Student Reception, who should ensure that the record of return is completed and valid for disposal.
The record of disposal should include:

- The student's name (for prescribed, controlled drugs and individual homely remedies)
- Name, strength, and quantity of medicine
- Date of return
- Consent of student (as appropriate)
- Signature of medical team authorizing the return

10. Staff with Medical Conditions

Staff should provide the school with information about any medical condition. They should give details, as appropriate. This information would be confidential and only shared with other members of staff after discussion with the member of staff.

11. Infectious Disease/Illnesses in School

Infectious diseases occur naturally and commonly in school settings. This is a result of the degree of close contact between students and between students and staff, and the difficulties in maintaining a perfect state of hygiene.

Infections acquired in the school may spread to staff, family members and the community. Outbreaks of infection may lead to disruption of the school routine and costly control measures. Where possible, the school will prevent the increase in an outbreak of infection into the school and limit its spread. Exposure to an infectious disease is not normally a reason for medical exclusion from School. If an infectious disease is present at school, then the local Public Health England advisors should be contacted so that appropriate control measures can be discussed.

All Staff should take precautions to avoid infection and to follow basic hygiene procedures (such as regular hand washing).

The school need to be informed as soon as possible of any infectious disease, held by either a student or member of staff. They should stay at home for a minimum of 48 hours, and until they are no longer infectious and a risk to the school community.

12. Vaccinations

Information about immunisations and vaccines delivered in school can be obtained from: https://www.nhs.uk/conditions/vaccinations/ and via the school calendar, published on the school website.

A formal letter will be sent home with further details around any immunisations being issued in school.

13. Training

All school staff are able to undertake first aid training if they would like to.

All first aiders must have completed a training course and must hold a valid certificate of competence to show this. The school will keep a register of all trained first aiders, what training they have received and when this is valid until.

The school will arrange for first aiders to retrain before their first aid certificates expire. In cases where a certificate expires, the school will arrange for staff to retake the full first aid course before being reinstated as a first aider.

14. Complaints

If parents/guardians or students are dissatisfied with the First Aid support provided at the school, they should raise these concerns in the first instance with the Heads of Learning and/or Head of Operations and Facilities. If this doesn't remedy the complaint, the next stage would be to follow our Complaints Policy.

15. Child Protection

All staff are attentive to child protection issues and any concerns must be documented on a Cause for Concern Form and passed immediately to the School's Designated Safeguarding Lead. All staff will follow School procedures as set out in the Safeguarding: Keeping Children Safe Policy: https://www.cleeveschool.net/Policies/

16. Monitoring arrangements

This policy will be reviewed by the by the Senior Leadership Team two yearly basis.

17. Links with other policies

This whole school medical and first aid policy is linked to the:

- Health and safety policy

Appendix 1: Accident report form

Cleeve School First Aid Consultation Form

This form is to be completed by a qualified first aider only, upon student/staff entry to the First Aid Medical Room and/or First Aid incident

Name of student/Staff:			
Date		**Time**	**Year or College**
Location of accident/incident			
Details of accident/incident and treatment given/further comments			
First Aider Name/Signature		**BTL or Collected By**	**Time**

Parent/Guardian Contacted	Y / N	**Time**	
Unable to contact parent/guardian, reason for			
The student/staff was well enough following first aid to remain in school		Y / N	
The school is of the opinion to seek further medical advice		Y / N	
SHE Report Needed		Y / N	

SIMS First Aid Report (please circle)
Event Type: First Aid Immunisation
Description: General Care Sickness PE Accident Accident/Incident

Print out First Aid Additional Details form if required

Last updated: July 2022

Appendix 2: Health Care Plan

Individual Health Care Plan

Students Name	
Date of birth	
College, Year Group, Tutor Group	
Medical diagnosis or condition	
Date	
Review date	
Family Contact Information	
Name	
Relationship to child	
Contact telephone number 1	
Contact telephone number 2	
Name	
Relationship to child	
Contact telephone number 1	
Contact telephone number 2	
Clinic/Hospital Contact	
Name	
Phone number	
Doctor or GP	
Name	
Phone number	
Who is responsible for providing support in school	

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision.

Daily care requirements.

Specific support for the pupil's educational, social and emotional needs.

Arrangements for school visits/trips etc.

Other information.

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

For office use only

Plan developed with

Form copied to

Date

Appendix 3: Medication Request Form

Parental Agreement for Cleeve School to administer medicine

Cleeve School will not give your child medicine unless you complete and sign this form.
This form must be completed for medication to be administered to your son/daughter during school hours. Where possible, medication should be administered to your son/daughter at home at times other than during school hours. Please note all medicines must be in their original container as dispensed and clearly named with the student's name and College.

Students Name	
Date of birth	
College, Year Group, Tutor Group	
Medical diagnosis or condition	

Medicine

Name/type of medicine *(as described on the container)*		
Expiry date		
Dosage and method		
Timing		
Special precautions/other instructions		
Are there any side effects that Cleeve school needs to know about?		
Self-administration (*please circle*)	Yes	No
Procedures to take in an emergency		

NB: Medicines must be in the original container as dispensed by the pharmacy.

Contact Details

Name	
Relationship to child	
Contact telephone number	

I understand that I must deliver the medicine personally to Main Reception

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to Cleeve school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Print name _____ Date _____

Signature _____

Last updated: March 2024

Appendix 4: Student Medications Record

Cleeve School Student Medication Record			
Student Name			
Medication & Dose			
Date of Consent			
Date & Time	Dose	Reason	Initials