

# Littleover Community School



## and Sixth Form Centre

### Supporting students with medical conditions & Children with health needs who cannot attend school policy

September 2025

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Link Governor	Brian Scanlon

Policy approved on (date):			<b>To be approved by Governors in September 2025. SMT approved 23/07/2025</b>
By:	Governing Board	Signed:	

Last reviewed on :		16/07/2025	
By:	Anita McSkimming	Signed:	
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Date of next review :		September 2026	

## Introduction

This policy describes the arrangements to provide support for Students with medical conditions. It includes details on how the policy will be implemented effectively, including a named person who has overall responsibility for policy implementation.

The policy covers the administration of medicines in school and the role of individual Healthcare Plans for those Students who need them. It identifies who is responsible for the development of Healthcare Plans in supporting Students at school with medical conditions.

It describes the arrangements to actively support students with medical conditions for them to participate in school trips and visits, or in sporting activities, and not prevent them from doing so; please also refer to the Educational Visits Policy for further information on this.

This policy also covers actions school will take to ensure a continued education for students who cannot attend school because of health needs.

This policy also:

requires that written records are kept of all medicines administered to students.

requires that staff are properly trained to provide the support students need.

sets out what should happen in an emergency situation.

requires that the appropriate level of insurance is in place and appropriately reflects the level of risk, with risk assessment being carried out, when appropriate.

requires parents/carers to provide the school with sufficient and up-to-date information about their student's medical needs. This will be prompted with an annual data check

## Aims

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To ensure students at Littleover Community School with medical conditions, in terms of both physical and mental health, are properly supported so they can play a full and active role in school life, remain healthy and achieve their academic potential.

To ensure the needs of students with medical conditions are effectively supported in consultation with health and social care professionals, parent/carers and the student themselves.

The school aims to:

- Assist parents/carers in providing medical care for their student
- Educate staff and student in respect of special medical needs
- Arrange training for volunteer staff to support individual students
- Liaise as necessary with medical services in support of the individual student
- Ensure access to full education if possible, so that all students with medical conditions are able to participate in all aspects of school life
- Monitor and keep appropriate records

## Definitions

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

- (a) Short-term affecting their participation in school activities, whilst they are on a course of medication.
- (b) Long-term, potentially limiting their access to education and requiring extra care and support (deemed Special Medical Needs).

## Rationale

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Local Authorities and schools have a responsibility for the health and safety of students in their care. The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of students with Special Medical Needs, the responsibility of the employer is to make sure that safety measures cover the needs of all Students at the school. This may mean making special arrangements for particular students who may be more at risk than their classmates. Where individual procedures may be required, the employer is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support these students may need.

The Student and Families Act 2014, from September 2014, places a duty of schools to make arrangements for students with medical conditions. Students with Special Medical Needs have the same right of admissions to school as any other student and cannot be refused admission or excluded from school on medical grounds alone. Teachers and other school staff in charge of students have a common law duty to act in loco parent/carer and may need to take swift action in the event of an emergency. This duty also extends to teachers/staff members leading activities taking place off the school site. This could extend to a need to administer medicine.

**The prime responsibility for a student's health lies with the parent/carer, who is responsible for the student's medication and should supply the school with all relevant information.** The school takes advice and guidance from the medical professions which encourages self-administration of medication when possible.

## Entitlement

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It is expected that:

- Any student with a medical condition requiring medication or support in school should have an individual Health Care Plan which details the support that student needs. If the parent/carer, health care professional and school agree that a Health Care Plan is inappropriate or disproportionate, a record of the student's medical condition and any implications for the student will be kept in the school's medical record and the student's individual record which are stored safely in school. Inhalers, insulin, diabetes equipment, adrenaline pens and antihistamines needed for life threatening allergy will be kept by the individual student for easy access; in exceptional circumstances, any adrenaline pen not kept on person will have been discussed with the Medical Officer and a plan in place for the storage of these items as deemed necessary.
- Parents/carers will be encouraged to co-operate in training students to self-administer medication if this is practicable and that members of staff will only be asked to be involved if there is no alternative.
- Where parents/carers have written to request the school administer the medication for their student, the prescription and dosage regime should be typed or printed clearly on the outside of the medication. The school will only administer medicines in which the dosage cannot be administered outside of school hours, or has to be taken with meals. The container for the medication should be provided with the pharmacy label attached. School staff will not accept any medications not presented as prescribed.
- Staff are trained by professionals and parents/carers, in some instances, to administer medicines such as Adrenaline Auto-Injectors (AAIs)
- Controlled drugs (such as methylphenidate) may only be taken on school premises by the individual to whom they have been prescribed. Passing such drugs to others is an offence. Controlled drugs will be stored in a double locked cupboard in the medical room and only administered by trained staff.
- Staff will consider carefully their response to requests to assist with the giving of medication or supervision of self-medication and that they will consider each request separately.
- The school will liaise with the School Health Service for advice about a student's special medical needs and will seek support from the relevant practitioners, where necessary, and in the interests of the student.
- Littleover Community School cannot be held responsible for side effects that occur when medication is taken correctly.
- Any medicines brought into school by staff e.g. over the counter medication will be kept securely in appropriate storage and kept out of the reach of students. Staff medicine is the responsibility of all staff concerned and not the school and must not be accessible or given to students under any circumstances.

The SENDCO and Medical Officer are responsible for ensuring that whenever school is notified that a student has a medical condition:

- Sufficient staff are suitably trained.
- All relevant staff are made aware of a student's medical condition.
- Cover arrangements in case of staff absence/turnover is always available
- Supply teachers are briefed.
- Risk Assessments for trips and visits are carried out, in conjunction with the visit leader.
- Individual Healthcare Plans are reviewed, when evidence is presented that the student's needs have changed. The plan should be developed with the student's best interests in mind and ensure that the school assesses and manages risks to the student's education, health and social wellbeing and minimizes disruption.
- Individual Health Care Plans are reviewed for trips and as necessary.
- Transitional arrangements between schools are carried out.
- If a student's needs change, the above measures are adjusted accordingly.

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### Individual Health Care Plans

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There is a need for proper documentation at all stages when considering the issue of support for students with medical needs in school. The following information should be considered when writing an individual Health Care Plan:

- The medical condition, its triggers, signs, symptoms, and treatments.
- The student's resulting needs, including medication and other treatments, times, facilities, equipment, testing, dietary requirements and environmental issues.
- Specific support for the student's educational, social and emotional needs.
- The level of support needed including in emergencies.
- Who will provide support, their training needs, expectation of their role, confirmation of their proficiency and cover arrangements.
- Individual Care Plans are shared to Go4Schools.
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable, that will ensure the student can participate.
- Confidentiality.
- What to do if a student refuses to take medicine or carry out a necessary procedure.
- What to do in an emergency, who to contact and contingency arrangements.
- Where a student has SEND but does not have an Education, Health and Care plan, their special educational needs should be mentioned in their individual Health Care Plan.

## Emergencies

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- Medical emergencies will be dealt with under the school's emergency procedure protocols.
- Where an Individual Health Care Plan (IHCP) is in place, it should detail:
  - What constitutes an emergency.
  - What to do in an emergency.
- If a student needs to be taken to hospital, a member of staff will remain with the student until their parent/carer arrives. If a parent/care is not available, a member of staff will accompany the student to hospital. The student will be taken by two members of staff in the school minibus or by staff members car, who has business insurance.

## Supporting Students with Allergies

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- LCS takes allergies seriously and has measures in place to support students with allergies. We aim to create an inclusive environment with proactive measures to minimise risk and have emergency plans in place.
- All students with allergies will have an Individual Health Care Plan. Those with EpiPen's will have an Allergy Action Plan; See Appendix 1. Those without this will have a care plan generated on Medical Tracker by the Medical Officer.
- Any parent/carer concerned about their child's allergies, or medical needs, should contact the LCS Medical Officer who will help to ensure the school reviews your child's needs, the procedures for managing allergies, or medical needs, and how parents/carers can contribute.
- Students who are diagnosed with Anaphylaxis must carry two in date EpiPens and a small supply, (enough for 2 doses) of antihistamines with them at all times, including during PE lessons. These should be kept in an accessible clearly defined case/bag for First Aiders to have easy access to.
- Parents/carers should ensure their child/ren are reminded to avoid taking food and drink from other students, particularly unlabelled foods. This information is presented to new students on Induction and in Assemblies at intermittent intervals throughout the school year.
- Tills in the dining areas are set up to prevent students with allergies purchasing food items from the dining areas which they have reported being intolerant or allergic to. This information is taken from what parents/carers declare to LCS and parents/carers should keep LCS informed of any changes to allergies, medical conditions, etc
- Students are discouraged from purchasing items for other students. Staff are also not to purchase food for students. Staff monitor any behaviour which may indicate such events.
- Staff members are reminded not to bring known allergens into school, especially at the end of term.
- Staff members check with the Medical Officer and on Go4Schools for any students with allergies prior to handing out any food and drink items
- All incidences are to be recorded on Medical Tracker in a timely manner, parents/carers be made aware and a log put on CPOMS.

## Food sold in school for charity events and Sports Day

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- All foods sold in school follow strict guidelines dictated by <https://www.narf.org.uk/natashaslaw>. The foods known as Prepacked for Direct Sale (PPDS) are to be labelled clearly and show allergens in bold. The law requires the labelling of the 14 major allergens.
- Food stuffs prepared outside of school premises adhere to strict hygiene practices.



- All non-packaged foods sold in school are to have a clearly printed, fully written ingredients list available and on display near to where the food is being sold. The allergens must be written in bold. Cross contamination must also be declared.

### Education visits

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- Trip leaders will discuss with educational visit providers the dietary requirements of specific students prior to the visit taking place.
- The provider will be responsible for informing all food outlet companies used on the educational visit with the relevant information for the specific student to ensure that all allergens are avoided and cross-contamination is avoided.
- Students are reminded to always read the ingredients lists on the packaging and avoid all food products and drinks that are not clearly labelled e.g. in a different language.
- The trip leaders for residential placements will take spare EpiPen's. These will be sourced by the Medical Officer.
- Parent/carers will be contacted to ensure the student has two EpiPen's for the visit which are in date. The student must also carry antihistamines. The trip leader will ensure the EpiPen's are in the possession of the student prior to boarding transport for departure. Failure to have the correct supplies may result in student being denied a place on the trip of the EpiPen's cannot be obtained from parent/carer in a timely manner.
- Parents / carers and staff should remind students to avoid taking food and drink from other students, particularly unlabelled foods and drinks.

## **Roles and Responsibilities**

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### **The Governing Board**

- Governors ensure, through this policy, that arrangements are in place to support students with medical conditions. They also ensure that school leaders consult health and social care professionals, students and parent/carers to ensure that the needs of students with medical conditions are effectively supported.
- Some students with medical conditions may be disabled. Where this is the case, the Governors, through policy, comply with their duties under the Equality Act 2012. In doing so they will ensure that such students can access and enjoy the same opportunities at school as any other student. Some students may have special education needs (SEND) and may have an Education Health Care Plan (EHCP) which brings health and social care needs, as well as their special educational provision. For students with SEND, this guidance should be read in conjunction with the SEND code of practice 2014.
- In making these arrangements, the Governing Board considers that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. Some will be more obvious than others. The focus is on the needs of each individual student and how their medical condition impacts on their school life.
- The Governing Board, through this policy, intend that their arrangements give parents/carers and students' confidence in the school's ability to provide effective support for medical conditions in school. They intend that the arrangements should show an understanding of how medical conditions impact on a student's ability to learn, as well as increase their confidence and promote self-care.
- The Governing Board intend that staff should be properly trained to provide the support that students need.
- The Governing Board intend that the arrangements put in place are sufficient to meet their statutory responsibilities and that policies, plans, procedures and systems are properly and effectively implemented. This aligns with their wider safeguarding duties.
- The Governing Board also intend that this policy is reviewed at least annually.

### **The Headteacher**

- Should ensure that this policy is implemented.
- Should consult with appropriate health and social care professionals, students and parents/carers to ensure that the needs of students with medical conditions are effectively supported.
- Should ensure all staff are aware of this policy and understand their role in its implementation.
- Should ensure all staff who need to know are informed of a student's condition.
- Should ensure enough staff are appropriately trained to implement the policy and deliver IHCPs, including in emergency and contingency situation.
- Should ensure the school and staff are appropriately insured.
- Is responsible for the development of IHCPs.
- Should pass on any information regarding a student's medical condition to the appropriate member of staff.
- Should ensure appropriate records are kept.
- Should ensure all staff are aware of this policy.
- Should ensure the policy is reviewed annually and is developed effectively with partner agencies.



### **School Staff**

All/any member of school staff;

- may be asked to provide support to students with medical conditions, including the administering of medicines, although they cannot be required to do so.
- should receive sufficient and suitable training and achieve the necessary level of competency before taking on the responsibility of supporting students with medical conditions.
- should familiarise themselves with procedures detailing how to respond when they become aware that a student with a medical condition needs help.
- should undertake training to achieve necessary competency to support students with medical conditions, if they are required to undertake that responsibility.
- should know what to do and respond accordingly when they become aware that a student with a medical condition needs help.

Staff who undertake responsibilities within this policy are covered by the school's insurance.

### **School Nurses**

- Are responsible for notifying the school when a student has been identified as having a medical condition which will require support in school.
- Should liaise locally with lead clinicians on appropriate support.
- May support staff on implementing a student's IHCP and provide advice and liaison.

### **Other Healthcare Professionals**

- May provide advice on developing Health Care Plans
- Specialist local teams may be able to provide support for particular conditions (e.g. Asthma, diabetes) and should be consulted where necessary.

### **Students**

- Should, wherever possible, be fully involved in discussions about their medical support needs and contribute to, and comply with, their IHCP.
- Students are required to bring in their own life-sustaining medication such as asthma inhalers, diabetes medication and equipment and/or adrenaline pens.

### **Parent/Carers**

- Must provide the school with sufficient and up-to-date information about their student's medical needs; to be completed using completed Appendix 1 – Individual Health Care Plan template.
- Are the key partners and should be involved in the development and review of their student's IHCP.
- Should carry out any action they have agreed to as part of the IHCP implementation.
- Must come in to school to complete a written request for medicines to be administered by the school staff; see Appendix 2 – Parent/Carer agreement for a school to administer medicine template.
- Must abide by and follow this policy.
- Should provide life sustaining medication for their child to bring into school such as asthma inhalers, diabetes medication and equipment and adrenaline pens. Failure to do so may result in the child being unable to attend lessons and/or school trips.

### Day trips, residential visits and sporting activities

- Where Students are required to take medication during a day trip etc, it will be the responsibility of the student to take the necessary medication themselves.
- It is advised that best practice be carried out by the First Aider on the visit if any medication is taken by a student that is it recorded on Medical Tracker.
- The student will only carry enough supply of medication with them for during the visit e.g. 1 dose for every 4/6/8 hours as needed and the medication must not be shared with any other student.
- Students with medical conditions should not be precluded from taking part in day trips, residential visits or sporting activities, unless evidence from a clinician such as a GP states that their participation is not possible or advisable.
- Teachers should be aware of how a student's medical condition may impact on their participation.
- School will consider any reasonable adjustments that may need to be made to enable students with medical conditions to participate fully and safely on visits.
- Trip leaders/First Aiders should liaise with parent/carer prior to the trip departing to discuss medical conditions and procedures needed to be in place during the trip.
- All incidences of a medical or First Aid nature must be reported on Medical Tracker and reported to a parent or carer immediately.
- The Medical Officer and Educational Visits Officers must be informed as soon as possible of any First Aid or medical issues which occurred on the visit.
- **Students failing to carry life-sustaining medication such as asthma inhaler, diabetes medication and equipment and/or adrenaline pens may not be permitted on the trip.** Every endeavour will be made to ensure the medication is obtained from home without delaying the visit being delayed.
- Two trained members of staff in diabetes management must be present on residential trips.

### Unacceptable practice

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The following are generally considered to be unacceptable practice;

- Preventing students from easily accessing inhalers and medication and administering them when necessary.
- Assuming that every student with the same condition requires the same treatments.
- Ignoring the views of the student or their parent/carer, or medical evidence or opinion (although this may be challenged).
- Sending students with medical conditions home frequently or preventing them from staying for normal school activities, including lunch, unless this is specified in their Individual Health Care Plan.
- If the student becomes ill, sending them to Reception or Medical Room unaccompanied or with someone inappropriate.
- Penalising students for their attendance record if their absences are related to the medical condition e.g. Hospital appointments.
- Preventing students from drinking, eating or taking toilet or other breaks when they need to, where students require this to manage their medical condition effectively.
- Requiring parent/carers or making them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent/carer should have to give up working because the school is failing to support their student's medical needs.
- Preventing students from participating or creating unnecessary barriers to students' participating in any aspect of school life, including school trips. e.g. by requiring parent/carers to accompany the student.

## **Students who cannot attend school because of health needs**

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Local Authorities must arrange suitable full-time education (or as much education as the student/young person's health condition allows) for students of compulsory school age who, because of illness, would otherwise not receive suitable education.

School will use all appropriate and available options in an attempt to help students attend school, however, when it is clear a student cannot attend school full-time for health reasons, the following steps will be taken to ensure their ongoing education.

- If a student requires a part-time timetable for health reasons, either for a short-term or as part of a phased reintroduction to school, this will be agreed with the student, parent/carers, school Medical Officer and Deputy Headteacher, and/or SENDCO, and/or Designated Safeguarding Lead/Deputy Safeguarding Lead with responsibility for attendance. A time scale for review of this provision will be agreed, along with suitable support to help the student attend successfully.
- Where a part-time timetable is not successful, further meetings will be held in school with the student, parent/carers and relevant staff to discuss next steps.
- If it is clear at that point that the student cannot access school due to ongoing health needs, a referral will be made for additional Local Authority support. The designated school Educational Welfare Officer will also be informed of the situation at this point, to offer advice and support. Responsibility for education of students who cannot attend school because of health needs remains with the school.
- The Local Authority will aim to provide appropriate education once notified by the school, as soon as it is clear that the student/young person will be away from school for 15 days or more, whether consecutive or cumulative within a 12 month period, **with the relevant consultant letter or diagnosis.**
- Where a student/young person is on the role of a mainstream city school and is referred for an intervention under Local Authority policy, then an initial 6 week provision will be offered for an appropriate referral.
- Local Authority staff will liaise with the school and the appropriate medical professionals to ensure minimal delay in arranging appropriate provision for the student/young person and to minimise disruption to the student/young person's education. If a student/young person has a long term or complex health issue, the school will ensure that educational provision is regularly reviewed with medical professionals, parent/carers/carers and Local Authority and amended as appropriate.

## **Complaints**

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If parent/carers or Students are dissatisfied with the support provided by school, they should discuss their concerns directly with the school. If, for whatever reason, this does not resolve the issue, they may make a formal complaint via the school's Complaints procedure. Making a formal complaint to the Department for Education should only occur if it comes within scope of section 496/497 of the Education Act 1996 and after other attempts at resolution have been exhausted.


## **Associated policies**

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- **First Aid Policy**
- **Health and Safety Policy**
- **Safeguarding and Child Protection Policy**
- **Attendance Policy**
- **Safeguarding and Child Protection Policy-Addendum Recording information**
- **All GDPR policies**



## Appendix 1



# ALLERGY ACTION PLAN

This child has the following allergies:

Name: \_\_\_\_\_

DOB: \_\_\_\_\_

Photo

● Watch for signs of ANAPHYLAXIS (life-threatening allergic reaction)

Anaphylaxis may occur without skin symptoms: ALWAYS consider anaphylaxis in someone with known food allergy who has **SUDDEN BREATHING DIFFICULTY**

<p><b>A AIRWAY</b></p> <ul style="list-style-type: none"> <li>• Persistent cough</li> <li>• Hoarse voice</li> <li>• Difficulty swallowing</li> <li>• Swollen tongue</li> </ul>	<p><b>B BREATHING</b></p> <ul style="list-style-type: none"> <li>• Difficult or noisy breathing</li> <li>• Wheeze or persistent cough</li> </ul>	<p><b>C CONSCIOUSNESS</b></p> <ul style="list-style-type: none"> <li>• Persistent dizziness</li> <li>• Pale or floppy</li> <li>• Suddenly sleepy</li> <li>• Collapse/unconscious</li> </ul>
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IF ANY ONE (OR MORE) OF THESE SIGNS ABOVE ARE PRESENT:

- 1** Lie child flat with legs raised (if breathing is difficult, allow child to sit)
- 2** Immediately dial 999 for ambulance and say ANAPHYLAXIS ("ANA-FIL-AX-IS")
- 3** In a school with "spare" back-up adrenaline autoinjectors, **ADMINISTER the SPARE AUTOINJECTOR** if available
- 4** Commence CPR if there are no signs of life
- 5** Stay with child until ambulance arrives, do **NOT** stand child up
- 6** Phone parent/emergency contact

\*\*\* IF IN DOUBT, GIVE ADRENALINE \*\*\*

You can dial 999 from any phone, even if there is no credit left on a mobile. Medical observation in hospital is recommended after anaphylaxis. For more information about managing anaphylaxis in schools and "spare" back-up adrenaline autoinjectors, visit [sparepensinschools.uk](http://sparepensinschools.uk)

● Mild/moderate reaction:

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour

Action to take:

- Stay with the child, call for help if necessary
- Locate adrenaline autoinjector(s)
- Give antihistamine: \_\_\_\_\_ (if vomited, can repeat dose)
- Phone parent/emergency contact

**Emergency contact details:**

1) Name: \_\_\_\_\_

2) Name: \_\_\_\_\_

**Additional instructions:**

If wheezy: DIAL 999 and GIVE ADRENALINE using a "back-up" adrenaline autoinjector if available, then use asthma reliever (blue puffer) via spacer.

**Parental consent:** I hereby authorise school staff to administer the medicines listed on this plan, including a "spare" back-up adrenaline autoinjector (AAI) if available, in accordance with Department of Health Guidance on the use of AAIs in schools.

Signed: \_\_\_\_\_

Print name: \_\_\_\_\_

Date: \_\_\_\_\_

For more information about managing anaphylaxis in schools and "spare" back-up adrenaline autoinjectors, visit: [sparepensinschools.uk](http://sparepensinschools.uk)

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This is a medical document that can only be completed by the child's healthcare professional. It must not be altered without their permission. This document provides medical authorisation for schools to administer a "spare" adrenaline autoinjector in the event of the above-named child having anaphylaxis (as permitted by the Human Medicines (Amendment) Regulations 2017). The healthcare professional named below confirms that there are no medical contraindications to the above-named child being administered an adrenaline autoinjector by school staff in an emergency. This plan has been prepared by:

Sign & print name: \_\_\_\_\_

Hospital/Clinic: \_\_\_\_\_

Date: \_\_\_\_\_

## Appendix 2: Parent/Carer Consent Form: Administration of Medicines in School

To be completed by the parent/carers of any student requesting that medication be administered under the supervision of school staff, where a student will self-administer.

### **ALL MEDICATION MUST BE BROUGHT TO STUDENT SERVICES BEFORE MORNING REGISTRATION**

If you need help to complete this form, please contact the school on 01332 513219 ext 329.

Please complete in block letters

<b>Name of student:</b>		<b>Date of Birth:</b>	
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### **OVER THE COUNTER MEDICINES**

Please provide the original box that the medication was purchased in.

Name of medication	Dose	Name of medication	Dose	Name of Medication	Dose
Name of medication	Dose	Name of medication	Dose	Name of Medication	Dose

### **PRESCRIBED MEDICINES**

Please provide the box with the prescription label on (we cannot support medicine taking without the label to cross reference) and enough medication for the doses needed in school time.

The Doctor has prescribed (as follows) for my student:

1. Name of medication to be given.	
2. When? (e.g. lunchtime? after food? when wheezy? before exercise?).	
3. How much? (e.g. half a teaspoon? 1 tablet? 2 drops?).	
4. Route, e.g. by mouth or in each ear.	
5. Any special storage instructions?	

I request that the treatment be supervised in accordance with the information provided on the prescription label by a member of the school staff who has received all necessary training. I understand that it may be necessary for this treatment to be carried out during educational visits and other out-of-school activities, as well as on the school premises.

I undertake to supply the school with the medication in the original labelled containers, provided by the Dispensing Chemist.

I accept that whilst my student is in the care of the school, the school staff stand in the position in loco parent/carer and that the school staff may, therefore, need to arrange any medical aid considered necessary in an emergency, but I will be informed of any such action as soon as possible.

***This form must only be completed by an adult with parent/carer responsibility.***

<b>Name:</b>	
<b>Relationship to student:</b>	
<b>Contact Tel:</b>	

<b>Name:</b>	
<b>Relationship to student:</b>	
<b>Contact Tel:</b>	

<b>Signed:</b>		<b>Date:</b>	
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(Person with parent/carer responsibility)



**Appendix 3**  
**Parental consent to carry medication on educational visits.**

<b>Permission to medicate on trips Form</b>
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Name		Date of birth	
Form		Trip name	

Name of medication		Dose	
Time/s		Duration	
Indication			

Emergency name and contact number	
Emergency name and contact number	

Signature of parent	
Date	

**N.B. Please only supply your child with enough medication for the trip duration.**

**Your child must be competent to take their own medication with adult supervision only. Staff cannot dispense doses of medication to your child.**

