OAKLANDS CATHOLIC SCHOOL  
AND  
SIXTH FORM COLLEGE  

With delegated responsibility from the  
Edith Stein Catholic Academy Trust  

MEDICAL CONDITIONS AND  
ADMINISTRATION OF MEDICINES POLICY  

<table>
<thead>
<tr>
<th>APPROVED BY LOCAL GOVERNING BODY</th>
<th>MAY 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>SCRUTINISED BY TEACHING AND LEARNING COMMITTEE</td>
<td>MAY 2019</td>
</tr>
<tr>
<td>DATE LAST REVIEWED</td>
<td>MAY 2019</td>
</tr>
<tr>
<td>MEMBER OF STAFF RESPONSIBLE</td>
<td>DEPUTY HEADTEACHER (PASTORAL) / DIRECTOR OF BUSINESS AND FINANCE</td>
</tr>
<tr>
<td>STATUTORY / NON-STATUTORY</td>
<td>STATUTORY</td>
</tr>
</tbody>
</table>

Community  
Unity  
Opportunity
Policy Amendments

<table>
<thead>
<tr>
<th>Version Date</th>
<th>Section / Page</th>
<th>Amendments</th>
</tr>
</thead>
<tbody>
<tr>
<td>November 2019</td>
<td>Page 5 / Section 4</td>
<td>Addition of paragraph 4.5</td>
</tr>
</tbody>
</table>
1.0 Supporting Pupils at School with Medical Conditions

1.1 Oaklands Catholic School and Sixth Form College will undertake to ensure compliance with the relevant legislation and guidance with regard to procedures for supporting children with medical conditions, to include the administration of medicines.

1.2 The Head Teacher who is the Responsible Manager for this policy and its implementation holds responsibility for the needs of pupils with pre-existing and newly diagnosed medical conditions at Oaklands Catholic School and Sixth Form College. The Responsible Manager delegates the responsibility for all administration of medicines, on a day-to-day basis, to the Student Services Officer.

1.3 The Responsible Manager and staff will treat all information regarding medical conditions confidentially. All administration of medicines is arranged and managed by the Responsible Manager and staff in accordance with the health guidance for schools document. All staff have a duty of care to follow and co-operate with the requirements of this policy.

NB: This policy for supporting pupils at Oaklands Catholic School and Sixth Form College with medical conditions will hereafter be referred to as the “Medical Conditions and Administration of Medicines Policy”.

2.0 Aims and Objectives

2.1 Oaklands Catholic School and Sixth Form College is an inclusive community that aims to support and welcome pupils with medical conditions. The school understands that it has a responsibility to make the school welcoming and supportive to pupils with medical conditions who currently attend and to those who may enrol in the future. Oaklands Catholic School and Sixth Form College also understands that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood.

2.2 Oaklands Catholic School and Sixth Form College ensures that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities. Oaklands Catholic School and Sixth Form College aims to provide all children with medical conditions the same opportunities as others at school. We will help to ensure they can:

- Be healthy
- Stay safe
- Enjoy and achieve
- Make a positive contribution
- Achieve economic well-being

2.3 This support will be achieved by:

- Including all pupils in all school activities
- Encouraging pupils to take control of their condition. Pupils should feel confident in the support they receive from the school to help them do this
- Ensuring all staff understand their duty of care to children and young people in the event of an emergency
- Ensuring all staff understand how medical conditions impact on a child’s ability to learn
- Ensuring all trained staff feel confident in knowing what to do in an emergency.
2.4 No child will be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made. However, in line with our safeguarding duties, the Local Governing Body should ensure that pupils' health is not put at unnecessary risk from, for example infectious diseases. Therefore, Oaklands Catholic School and Sixth Form College will not accept a child in school at times where it would be detrimental to the health of that child or others to do so.

3.0 Identifying Medical Conditions and Support Needs

3.1 Prior to a pupil joining the school medical needs are identified as follows:

- On accepting the place at Oaklands Catholic School, parents will fill in a Personal Detail Form which will indicate any medical conditions.
- The Student Services Officer enters all pupil details of any medical condition onto the school database (SIMS)
- The enrolment form is placed in the pupil's school file held in a secure location.
- Prior to the new academic year a report of all pupils transitioning from primary school with stated medical conditions is made available for the Student Services Officer.
- Where new starters have joined from another Secondary school the Admissions Officer will notify the Student Services Officer of any stated medical condition when the Enrolment Form is processed
- The Student Services Officer will review all reports of medical conditions of pupils who will be joining the school and where relevant contact parents/carers to clarify any medical needs prior to them joining, and a healthcare information form will be sent out.
- Where transitional arrangements are needed between schools, these will be identified at this stage.

*NB: A separate process is in place to cover transition of children with Special Educational Needs*

3.2 Where a pupil is already on role with Oaklands Catholic School and Sixth Form College, but is returning to school having been diagnosed with a new/changed medical condition and/or after a long period of absence, then the parent/carer is responsible for notifying the school of the medical condition prior to the pupil returning to school

3.3 Parents/carers of pupils with pre-existing medical conditions (already notified to the school) are required to notify the school if their child has a medical emergency or if there have been changes to their symptoms, or their medication and treatments change.

4.0 Defining Support Required

4.1 Where the pupil has a medical condition already being managed by the school then the existing healthcare plan will be reviewed by the parent/carer with the pupil’s healthcare professional if needed.

4.2 Where appropriate a pupil will be integrated into existing healthcare procedures where they exist, for example where a pupil has a severe allergy which could result in anaphylaxis and their needs are the same as other pupils with a similar condition, then they will be integrated into the Anaphylaxis Awareness Emergency Care procedures.

4.3 Where the pupil has significant medical support needs which may impact on their learning and education, and are unique to them then the school may agree for an Individual Healthcare Plan (IHCP), see the section on ICHPs, below, for more details.

4.4 Irrespective of whether an IHCP is needed all medical conditions notified to the school will be documented on a central register by the Student Services Officer which will include special provisions required by the school (or a link to the IHCP)
4.5 If a child is absent from school for a significant period of time due to illness or hospitalisation, the school will, depending on the nature of the illness and the length of absence make provision to ensure that the impact on education and progress is minimised. They will plan and deliver this in conjunction with medical professionals and parents. The school will do this in one or more of the following ways:

- By setting work for the student to complete at home / in hospital using hard copy, learning platforms or websites
- By marking / assessing and giving feedback on the work completed
- By making a referral to Education Inclusion Service for home tuition
- By liaising with home / hospital tutors regarding the setting and marking of work
- By using virtual classroom platforms e.g. Place2Learn

4.6 The Hampshire County Medical Policy has been updated to bring it in line with DfE guidelines. This document gives guidance around children who are too unwell to attend school. The link to the document is https://documents.hants.gov.uk/education/HCC-Medical-Policy-2019.pdf

5.0 Individual Health Care Plan (IHCP)

5.1 The aim of the IHCP is to capture the steps that the school should take to help the child manage their condition and overcome any potential barriers to getting the most from their education. They provide clarity about what actions need to be undertaken, when and by whom. An IHCP will often be essential for students whose medical conditions fluctuate or are long-term and complex and has an impact on their education. However, not all children will require an IHCP. The school, healthcare professional and parent should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached, the Responsible Manager will take the final view.

5.2 Where a child is returning to school following a period of hospital education or alternative provision (including home tuition), schools should work with the local authority and previous education provider to ensure that the IHCP identifies the support the child will need to reintegrate effectively.

5.3 When deciding what information should be recorded on IHCPs, the following are considered:

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

5.4 All Individual Health Care Plans are held in the Medical Room and are on the schools database.
6.0 Healthcare Information Forms

6.1 Parents/carers of pupils who have completed a healthcare information form are reminded to inform the school if their child has a medical emergency or if there have been changes to their symptoms, or their medication and treatments change. The healthcare information is updated accordingly.

6.2 The school should ensure that plans are reviewed at least annually or earlier if evidence is presented that the child’s needs have changed.

6.3 When deciding what information should be recorded on Healthcare Information Forms, the following are considered;

- the diagnosis and condition of the student, signs, symptoms and triggers
- what to do in an emergency, including whom to contact, contingency arrangements and follow up care. Some children may have a healthcare plan prepared by their lead clinician that could be used to inform development of their IHCP.
- where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child’s condition

6.4 All Healthcare Information Forms are held in the Medical Room and are on the school database.

7.0 Risk Assessments

7.1 The aim of a risk assessment is to enable the school to take the measures necessary for the safety and health of pupils with conditions when they are in the care of the school.

7.2 Parent/carer to be present at the initial risk assessment undertaken by the Student Services Officer. If an IHCP has not been deemed necessary for a pupil with a particular medical condition, the school may decide to complete a risk assessment for example:

- If there is a significant chance of triggers to that medical condition being presented at school;
- If the medical condition has potential to be life threatening to the pupil and or other users of the school;
- If medical equipment used by a child may have harmful effects on themselves or others with improper use and/or storage.
- If the student has had an accident and has limited mobility.
- If the student has had an operation, or a procedure.

7.3 All risk assessments are held in the Medical Room and are on the school database.

7.4 Additionally, a risk assessment should be completed prior to any school visits, holidays and other school activities outside of the normal timetable; this will be undertaken by the trip organizer.

8.0 Personal Emergency Evacuation Plan (PEEP)

8.1 If a student has had an accident/operation/limited mobility, a PEEP will be generated to address evacuation in an emergency. The Student Services Officer will update all staff with information, which can also be accessed on the school database.
9.0 Communication and Training

9.1 All First Aid trained staff understand and are trained in what to do in an emergency for the most common serious medical conditions at this school.

9.2 Where any individual staff needs to receive training in order to support a child with medical needs, the Student Services Officer will ensure that sufficient staff are suitably trained and cover arrangements are in place in case of staff absence or staff turnover to ensure someone is always available. A 'staff training record' sheet will be completed to document the level of training undertaken. Such training will form part of the overall training plan and refresher training will be scheduled at appropriate intervals.

9.3 All staff are notified of any specific medical conditions which may need emergency care and are provided a briefing on the actions required in the event of an emergency.

9.4 This briefing is notified via the following methods: -

- Notices in morning briefing
- Sent to all staff via email every term
- Available in the staff room
- Available on the school database

9.5 At the start of each academic year a copy of the Medical Register will be sent to all staff via email. Heads of Department should also provide this information to all new staff in their area on joining and to all supply staff on their first day at the school. A further briefing will be released on identification and definition of any new medical need or support requirement.

9.6 The [Medical note] field on SIMS also contains a summary of any conditions noted on the Medical Register. Any SIMS user will be presented this information when they view a pupil's details.

10.0 Record Keeping

10.1 Enrolment Forms

10.1.1 Parents/carers at Oaklands Catholic School and Sixth Form College are asked if their child has any health conditions on the enrolment form, which is filled out prior to joining the school whether this be a transition from primary school or a transfer from another secondary school. These forms are held on the pupil's school file.

10.1.2 If a pupil is already on role, then written notification from the parent/carer including any evidence from healthcare professionals will be held on the pupil’s school file.

10.2 School Medical Conditions Register

A register of pupils with medical needs is maintained by the Student Services Officer who has responsibility for the register at Oaklands Catholic School and Sixth Form College.
11.0 Medication in School

11.1 Our administration of medicine requirements will be achieved by:

- Establishing principles for safe practice in the management and administration of:
  - prescribed medicines
  - non-prescribed medicines
  - maintenance drugs
  - emergency medicine
- Providing clear guidance to all staff on the administration of medicines
- Ensuring that there are sufficient numbers of appropriately trained staff to manage and administer medicines
- Ensuring that there are suitable and sufficient facilities and equipment available to aid the safe management and administration of medicines
- Ensuring that the above provisions are clear and shared with all who may require them
- Ensuring the policy is reviewed periodically or following any significant change which may affect the management or administration of medicines

12.0 Procedure for the Administration of Medicines

12.1 When deciding upon the administration of medicine needs for children we will discuss this with the parents concerned and make reasonable decisions about the level of care required.

12.2 Any child required to have medicines will have an ‘administration of medicine’ consent form completed by the parent/carer and kept on file.

12.3 Individual health care information sheets will be completed for children where required and reviewed periodically in discussion with the parents/carers to ensure their continuous suitability.

12.4 For any child receiving medicines, a ‘record of prescribed medicines’ sheet will be completed each time the medicine is administered and this will be kept on file. This includes paracetamol. If it has been prescribed/advised by a doctor then parents must supply school with the paracetamol and the dosage instructions from the GP.

12.5 If a child refuses to take medication the parent/carer will be informed at the earliest available opportunity.

13.0 Routine Administration

13.1 It is our policy to manage prescribed medicines (eg. Antibiotics, inhalers) where appropriate following consultation and agreement with, and written consent in the form of the administration of medication proforma, which is to be completed by the parent/carer.

13.2 For all non-prescribed medicines such as cough linctus, hay fever treatment, over the counter eye drops, the same rules apply as our prescribed medicines. Consent in the form of the administration of medication proforma must be completed by a parent/carer.

14.0 Maintenance Drugs

14.1 It is our policy to manage the administration of maintenance drugs (eg. Insulin) as appropriate following consultation, agreement with and written consent from the parents/carers. On such occasions, a health care information sheet must be completed for the child concerned by the parent/carer and health care provider.
14.2 An administration of medicines proforma must also be completed and both forms handed into Student Services.

15.0 Emergency Asthma Inhalers and Epi Pens

15.1 Since 2015 schools may hold asthma inhalers for emergency use and as of 2017 epi-pens. This is entirely voluntary, and the Department of Health has published a protocol which provides further information. As a school we have agreed to purchase and keep emergency inhalers and epi-pens. These will only be used for those children who are already prescribed asthma inhalers and epipens. They will only be used in an emergency, with written parental consent, and at all times the school will seek to use the child’s prescribed inhaler/epi-pen if possible.

15.2 Responsibility for decision-making about the administration of all non-prescribed medicines will always be at the discretion of the Responsible Manager who may decide to administer under certain miscellaneous or exceptional circumstances.

16.0 Emergency Medicine

16.1 It is our policy (where appropriate) to manage the administration of emergency medicines such as:

- Injections of adrenaline for acute allergic reactions
- Injections of Glucagon for diabetic hypoglycemia

16.2 In all cases, professional training and guidance from a competent source will be received before commitment to such administration is accepted.

16.3 If a child is requiring pain relief, paracetamol can be administered between the hours of 11.20am and 3pm. We must have written consent from parents/carers before administering paracetamol and this consent is then added to SIMS.

16.4 Paracetamol is administered in accordance with NHS guidance:

16.4.1 Paracetamol tablet dosages for children – NHS

<table>
<thead>
<tr>
<th>Age</th>
<th>How much (every 4 to 6 hours, maximum 4 doses in 24 hours)</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 to 12 years</td>
<td>500mg</td>
</tr>
<tr>
<td>12 to 16 years</td>
<td>750mg</td>
</tr>
<tr>
<td>16 years +</td>
<td>1000mg</td>
</tr>
</tbody>
</table>

16.4.2 Don't give a child paracetamol and ibuprofen at the same time, unless advised to by a healthcare professional.

16.4.3 Don't keep switching between doses of paracetamol and ibuprofen unless advised to by a healthcare professional.

16.5 If a student requests pain relief outside of these hours (e.g. if they are staying on site for an after school activity) then verbal consent must be obtained from a parent first and noted on the student's medical record card.
17.0 Notification of Administration of Medicines

17.1 Parents will be notified by text message should their child be administered medication during the school day. This includes prescribed medication and non-prescribed medication. The message will contain the date and time(s) the medicines were administered, the name of the medication and the dosage. The text messages will be sent out between 3.30-4.00pm each day by one of the Student Services staff.

17.2 If a student receives medication after school (e.g. when participating in a sports activity) or whilst on a school trip, the member of staff will complete a carbonated sheet with the details of date, time, name of the medication and dosage. The top copy will be given to the student to hand to their parent. The carbonated copy will be returned to Student Services.

17.3 All medication that is administered is recorded on each student’s medical card which is held in Student Services.

18.0 Contacting Emergency Services

18.1 When a medical condition causes the child to become ill and/or requires emergency administration of medicines, then an ambulance will be summoned at the earliest opportunity.

19.0 Medical Accommodation

19.1 The medical room in Student Services will be used for medicine administration/treatment purposes. The room will be made available when required.

20.0 Training

20.1 A ‘staff training record’ sheet will be completed to document the level of training undertaken. Such training will form part of the overall training plan and refresher training will be scheduled at appropriate intervals.

21.0 School Medicines Log

21.1 A log of all medicines held at school on behalf of pupils is maintained by the Student Services Officer/team who has responsibility for the register at Oaklands Catholic School and Sixth Form College. This includes a note of all expiry dates for follow-up in accordance with guidelines in the school’s Medical Conditions and Administration of Medicines Policy. It is the responsibility of the parent/carer to provide medicine that is in date, in the correct packaging with the correct paperwork.

22.0 Register of visits to Medical Room

22.1 A log of all visits to the school’s medical room is maintained by the Student Services Officer/team who has responsibility for the register. This includes details of medicines and/or treatment administered. All details of medicines and/or treatment administered to students is recorded.
23.0 Storage of Medicines

23.1 The storage of medicines is the overall responsibility of the Student Services Officer who will ensure that arrangements are in place to store medicines safely.

23.2 A fridge is provided in the Student Services area for this specific purpose and temperature readings taken on a daily basis to ensure the optimum temperature is maintained.

23.3 The storage of medicines will be undertaken in accordance with product instructions and in the original container in which the medicine was dispensed.

23.4 It is the responsibility of all staff to ensure that the received medicine container is clearly labelled with the name of the child, the name and dose of the medicine and the frequency of administration.

24.0 Disposal of Medicines

24.1 It is not the responsibility of Oaklands Catholic School and Sixth Form College to dispose of medicines.

24.2 It is the responsibility of the parents to ensure that all medicines no longer required, including those which have date-expired, are returned to the pharmacy for safe disposal.

24.3 ‘Sharps boxes’ will always be used for the disposal of needles. Collection and disposal of the boxes will be locally arranged through a licensed waste management provider as appropriate.

25.0 Unacceptable Practice

25.1 Although school staff should use their discretion and judge each case on its merits with reference to the child’s IHCP, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents/carers; or ignore medical evidence or opinion, (although this may be challenged);
- send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHCPs;
- if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise children for their attendance record if their absences are related to their medical condition e.g. hospital appointments;
- prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent/carer should have to give up working because the school is failing to support their child’s medical needs; or
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, eg by requiring parents/carers to accompany the child.
26.0 Roles and Responsibilities

26.1 Each member of the school and health community knows their roles and responsibilities in maintaining an effective Medical Conditions and Administrations of Medicines Policy.

26.2 Governing Body
The Governing Body must make arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed, implemented and regularly reviewed. They should ensure that a pupil with medical conditions is supported to enable the fullest participation possible in all aspects of school life. The Local Governing Body should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. They should also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

26.3 Student Services Officer
The Student Services Officer should review all information provided to the school about medical conditions and ensure that actions outlined in this policy are activated, where appropriate. They will then maintain all documentation held at school relating to the medical condition and information on medicines and/or treatment administered and will trigger reviews of this information at the defined times.

26.4 Student Services Team

26.4.1 The Student Services team will be the primary contact at school for providing support to pupils when administration of medicines and/or treatment is required. They will ensure that all medicines held at school are managed in accordance with the school's Medical Conditions and Administration of Medicines Policy. The Student Services team should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions and the administration of their medication.

26.4.2 The Student Services Officer is also responsible for dissemination of information to all staff about pupil’s with medical conditions and support which should be provided routinely and/or in the case of an emergency. Where needed, they will liaise with the school nursing team and other outside agencies to ensure that training or medical briefings are provided.

26.5 All School Staff

26.5.1 Any member of school staff may be asked to provide support to pupils with medical conditions, although administering medicines is not part of teachers’ professional duties, they should take into account the needs of pupils with medical conditions that they teach. School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions.

26.5.2 Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

26.6 Head of Department
Ensure that all new staff in their area and all supply staff receive a medical briefing on or before their first day at school.
School Nurse
The Oaklands Catholic School and Sixth Form College has access to school nursing services. They are responsible for notifying the school when a child has been identified as having a medical condition, which will require support in school. Wherever possible, they should do this before the child starts at the school. They may support staff on implementing a child’s IHCP and provide advice and liaison, for example on training. School nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs – for example there are good models of local specialist nursing teams offering training to local school staff, hosted by a local school. Community nursing teams will also be a valuable potential resource for the school when seeking advice and support in relation to children with a medical condition.

Other Healthcare Professionals, including GPs and Paediatricians
Other healthcare professionals should notify the school nurse when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans. Specialist local health teams may be able to provide support in schools for children with particular conditions (e.g. asthma, diabetes).

Pupils
Pupils with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their IHCP. Other pupils will often be sensitive to the needs of those with medical conditions.

Parents
It is the parents’ responsibility to ensure that they notify the school regarding any updates to preexisting conditions or changes of medication for their child. Parents should provide the school with sufficient and up-to-date information about their child’s medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents are key partners and should be involved in the development and review of their child’s IHCP, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Special Educational Needs Co-ordinator (SENCO)
The SENCO at this school has a responsibility to help update the school’s Medical Condition Policy. Know which pupils have a medical condition and which have special educational needs because of their condition. Ensure teachers make the necessary arrangements if a pupil needs special consideration or access arrangements in exams or coursework. Ensure support is provided in classes where this is needed.

Complaints

Should parents/carers or pupils be dissatisfied with the support they are provided 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. This may be found on the School Website: - [http://www.oaklandscatholicschool.org](http://www.oaklandscatholicschool.org)

Further Advice

Further advice can be found at the following Department of Education link: [https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions-3/supporting-pupils-with-medical-conditions-links-to-other-useful-resources--2](https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions-3/supporting-pupils-with-medical-conditions-links-to-other-useful-resources--2)
29.0 Explanation of Parental Consent and Medical Form Categories

- Category 1 - Routine visits to other local schools and facilities
- Category 2 - Non-hazardous day visits such as museums, theatres, workshop events, geography field trips or college visits
- Category 3 - Non-hazardous residential trip in the UK
- Category 4 - Non-hazardous trip abroad, residential and non residential.
- Category 5 - Hazardous activity such as:
  - Adventure activities using licensed providers
  - Adventure activities using non-licensable providers
  - School-led adventure activities
  - Remote supervision during adventurous activities
  - Visits to coastal or mountain areas
  - Swimming in the sea or other natural waters

30.0 Glossary

<table>
<thead>
<tr>
<th>Administration of Medicines Form</th>
<th>Supporting paperwork for student medication on school site</th>
</tr>
</thead>
<tbody>
<tr>
<td>IHCP</td>
<td>Individual Health Care Plan. For students whose medical</td>
</tr>
<tr>
<td></td>
<td>condition has an impact on their education and learning</td>
</tr>
<tr>
<td>HCI</td>
<td>Health Care Information. Information regarding any student</td>
</tr>
<tr>
<td></td>
<td>with a medical condition</td>
</tr>
<tr>
<td>PEEP</td>
<td>Personal Emergency Evacuation Plan. Evacuation plan for</td>
</tr>
<tr>
<td></td>
<td>any student with a disability/mobility issue</td>
</tr>
</tbody>
</table>