



Supporting Children and Young People with Medical Conditions in School

Policy and Implementation Guidance

September 2024

Current Leader: Kirsty Palmer
Operational Lead: Anne Pimblett

Review Shedule: Annual

St. Paul and St. Timothy's Catholic Infant School
Mission Statement

Love, Learn, Believe, Achieve

At St. Paul and St. Timothy's Catholic Infant School we celebrate the individual differences and gifts that God has blessed each and every one of us with.

*Education "is about forming the human person, equipping him or her to live life to the full." The Catholic ethos, "needs to inform every aspect of school life."
(Pope Benedict XVI)*

We believe each new day brings the opportunity to express our love for God and one another. We provide a supportive, yet challenging, learning environment where each individual is able to develop their abilities and gifts. Our school is a place where children and adults can express their belief in God; develop belief in themselves and others. We believe everyone in our school community can achieve, whatever their ability. Each achievement is as unique as each individual and all are celebrated. We aspire to equip all in our school community to proclaim the Good News and "live life to the full".

Policy and Implementation Guidance for:

Supporting Children and Young People with Medical Conditions in School

Contents

	<u>Page</u>
Policy statement	4
Policy	5
Legislation and guidance	17
Annexes to support the policy and implementation	17

Policy statement

The policy to support children and young people with Medical Conditions in school will provide guidance to ensure;

- **St. Paul and St. Timothy's Infant School meets its statutory responsibilities to manage medicines and medical conditions in line with Government guidance 'Supporting pupils at school with Medical conditions' and the 'Special Educational Needs and Disability code of practice: 0-25 years'.**
- **We implement inclusive practices to support children and young people with medical conditions.**
- **We aim to provide all pupils with all medical conditions the same opportunities as others at school.**

St. Paul and St. Timothy's Infant School will ensure the implementation of the 'Supporting Medical Conditions in School' Policy to meet the following values and principles:

- All children and staff are healthy and stay safe.
- Children and parents/carers feel secure and confident in our ability to support them or their child.
- Children make a positive contribution and get to experience a wide and varied curriculum and experiences.
- All staff understand their duty of care to safeguard children and young people in all aspects of their needs and especially within the event of an emergency.
- All staff are appropriately trained, competent and confident in knowing what to do in an emergency.
- Staff understand that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood.
- That the staff understand the importance of medication being taken as prescribed.
- All staff understand common medical conditions that affect children at our school. Our staff receive training from specialist medical staff on the impact medical conditions can have on children.

The school's Governing Body names **Mrs. T. Gillon** as the governor responsible for ensuring this policy is fully implemented and monitored regularly.

Policy

1. St. Paul and St. Timothy's Infant School is an inclusive community that aims to support and welcome all children and young people including those with medical conditions.

- i. The governing body understand that it has a responsibility to make arrangements for supporting pupils with medical conditions who currently attend and to those who may attend in the future.
- ii. Children with medical conditions are encouraged to take control of their condition, in a way that is appropriate to their age and/or stage of development. Children feel confident in the support they receive from the school to help them do this.
- iii. We will ensure we will provide all children with all medical conditions the same opportunities at school.
- iv. We aim to include all pupils with medical conditions in all school activities.
- v. St. Paul and St. Timothy's Infant School staff (Teaching and Support) understand their duty of care to children and young people in the event of an emergency.
- vi. Parents/carers of pupils with medical conditions feel secure in the care their children receive both in the school and on educational visits.
- vii. All staff are confident in knowing what to do in an emergency and receive regular training to do so.
- viii. There is knowledge that certain medical conditions are serious and can be potentially life-threatening.
- ix. All staff understand the common medical conditions¹ that can affect all children in school. Staff receive training on the impact this can have on pupils.

¹ Common medical conditions include Asthma, Epilepsy, Diabetes and Anaphylaxis

2. All staff have a sound knowledge, understand their role and are trained to a level that fulfills and informs them in what to do to support children with the most common serious medical conditions found at the school and how to uphold the policy.

- i. All staff at the school are aware of the most common serious medical conditions which they may come across when children are in their care.
- ii. Staff understand their duty of care to pupils in the event of an emergency. In an emergency situation school staff are required under common law duty of care to act like any reasonably prudent parent. This may include administering medication.
- iii. All staff that work directly with pupils receive training and know what to do in an emergency for the pupils in their care with medical conditions.
- iv. Training is refreshed for all staff as appropriate and should be referred to the child's Individual Healthcare Plan.
- v. Action for staff to take in an emergency for the common serious conditions at the school is displayed in prominent locations for all staff including classrooms, kitchens and the staff room.
- vi. The school uses the child's Individual Healthcare Plan to inform the appropriate staff (including supply teachers and support staff) of pupils in their care who may need emergency help.
- vii. The school has procedures in place so that the most up to date copy of the child's Individual Healthcare Plan is sent to the emergency care setting with the pupil. On occasions when this is not possible, the form is sent (or the information on it is communicated) to the hospital as soon as possible.
- viii. The school have plans in place to cover staff absence and sickness.

The following roles and responsibilities are recommended practice within the policy. These roles are understood and communicated regularly.

Governing Body

The Governing body has a responsibility to:

- Uphold the Equality Act 2010 and make any reasonable adjustments.
- Ensure that arrangements are in place to support pupils with medical conditions (plans and suitable accommodation). In doing so they should ensure that such children can access and enjoy the same opportunities at school as any other child.
- Take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening and therefore focuses on the needs

of the individual child.

- Make sure the 'Supporting Medical Conditions in School' policy is effectively implemented, monitored and evaluated and updated in line with the school policy review timeline.
- Ensure all parents/carers are fully aware and understand their responsibilities (Form 6).

Head teacher

The school's head teacher has a responsibility to:

- Ensure the school puts the policy into practice and develops detailed procedures.
- Liaise between interested parties including children, parents/carers, school staff including SENCO, pastoral support staff, learning support staff, school nurses, governors, the school health service, the Local Authority and local emergency care services and seek advice when necessary.
- Ensure every aspect of the policy is maintained even if they are not the governing body's nominated staff member.
- Ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place using the child's Individual Healthcare Plans.
- Maintain the child's confidentiality whilst ensuring that staff who need to be aware of the details of any medical condition have the information that they need to safeguard their well-being.
- Quality assure any training, support development needs of staff and arrange for any identified needs to be met via formally commissioned arrangements.
- Ensure all supply teachers and new staff know the medical conditions policy.
- Delegate a staff member to check the expiry date of medicines kept at school and maintain the school medical register.
- Monitor and review the policy at least once a year, with input from children, parents/carers, staff and external stakeholders and update according to review recommendations and recent local and national guidance and legislation.
- Report back to all key stakeholders about implementation of this policy.
- In partnership with the parent/carer have joint responsibility for the safe travel of the child. □ Provide staff to cover absence.

All school staff

All staff at the school have a responsibility to:

- Be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency by receiving whole school awareness training. □ Be aware that medical conditions can affect a child's learning and provide extra help when a child needs it.
- Understand this policy and how this impacts on a child's education.
- Know which children in their care have a medical condition and be familiar with the content of each child's Individual Healthcare Plan.
- Allow all children to have immediate access to their emergency medication.
- Maintain effective communication with parents/carers including informing them if their child has been unwell at school.
- Ensure children who carry their medication with them have it when they go on a school visit or out of the classroom.

- Be aware of children with medical conditions who may be experiencing bullying or need extra social support.
- Understand the common medical conditions and the impact it can have on child.
- Ensure all children with medical conditions are not excluded unnecessarily from activities they wish to take part in. Where necessary make reasonable adjustments to accommodate all children in activities.
- Ensure children have the appropriate medication or food with them during any exercise and are allowed to take it when needed.

First aiders

First aiders at the school have a responsibility to:

- Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards with the school.
- When necessary, ensure that an ambulance or other professional medical help is called.

Special Educational Needs Coordinators (SENCO) The

SENCO at the school has responsibility to:

- Help update the school's medical condition policy.
- Know which children have a medical condition and which have special educational needs because of their condition.
- Be the key member or liaise with other staff to ensure children with medical conditions continue to make expected progress.
- Ensure teachers make the necessary arrangements and make reasonable adjustments if a child needs special consideration or access arrangements in exams or course work.

Pastoral support staff

The pastoral support staff at the school have the responsibility to:

- Help update the school's medical conditions policy.
- Know which children have a medical condition and which have special educational needs because of their condition.
- Monitor children's attendance and punctuality and consider additional support and planning with the SENCO.
- Ensure all children with medical conditions are not excluded unnecessarily from activities they wish to take part in.

Health Services

The school nurse and others from the local Health Community and services who work with the school has a responsibility to:

- Co-operate with schools to support children with a medical condition.
- Be aware of the needs and training the school staff need in managing the most common medical conditions at school.
- Provide information about where the school can access other specialist training or alternatively provide training if this has been locally developed.

Other healthcare professionals, including GPs and paediatricians have responsibility to:

- Notify the school nurse when a child has been identified as having a medical condition that will require support at school.
- Provide advice on developing healthcare plans.
- Consider that Specialist local health teams may be able to provide support in schools for children with particular conditions (e.g. asthma, diabetes, epilepsy).

Parents/Carers

The parents of a child at the school have a responsibility to:

- Tell the school if their child has a medical condition.
- Ensure the school has a complete and up-to-date Healthcare Plan for their child.
- Inform the school about the medication their child requires during school hours.
- Inform the school of any medication their child requires while taking part in educational visits or residential visits, especially when these include overnight stays.
- Tell the school about any changes to their child's medication, what they take, when, and how much. □ Inform the school of any changes to their child's condition.
- Ensure their child's medication and medical devices are labelled with their child's full name and date of birth and a spare is provided with the same information.
- Ensure that their child's medication is within expiry dates. □ Inform the school if your child is feeling unwell.
- Ensure their child catches up on any school work they have missed.
- Ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional. Pass on any information that the school will require to support their child.
- Ensure their child has a written care/self-management plan from their doctor or specialist healthcare professional to help their child manage their condition.

3. All staff understand and are trained in the school's general emergency procedures.

- i. St. Paul and St. Timothy's Infant School has a general Health and Safety Policy that includes risk assessments and have arrangements in place to deal with emergencies.
- ii. All staff know what action to take in the event of a medical emergency. This includes:
 - How to contact emergency services and what information to give (Form 5).
 - Who to contact within the school.
- iii. Action to take in a general medical emergency is displayed in prominent locations for staff. These include the staff room, food preparation areas and the hall.
- iv. If a child needs to be taken to hospital, a member of staff will always accompany them and will stay with them until a parent/carer arrives. The school tries to ensure that the staff member will be one the child knows.
- v. Staff should not take a child to hospital in their own car it is safer to call an ambulance.

4. The school has clear guidance on the administration of medication at school and what is deemed as unacceptable practice.

Administration – general

- i. The school understands the importance of medication being taken as prescribed.
- ii. All staff are aware that there is no legal or contractual duty for any member of staff to administer medication or supervise a child taking medication unless they have been specifically contracted to do so.
- iii. All use of medication defined as a controlled drug, even if the child can administer the medication themselves, is done under the supervision of named members of staff at this school.
- iv. The named members of staff are Mrs. Griffin, Miss. Palmer, Mrs. Reichinger, Mrs. McLeod, Mrs. Pimblett and Mrs. Donnelly.
- v. If a child requires specific medication, there will be a named member of staff with the appropriate training from healthcare professionals to administer the required medication.
- vi. If a trained member of staff, who is usually responsible for administering medication, is not available the school makes alternative arrangements to continue to provide this support.
- vii. For medication where no specific training is necessary, any member of staff may administer prescribed and non-prescribed medication to children under the age of 16, but only with the written consent of their parent (Form 2).
- viii. Training is given to all staff members who agree to administer medication to pupils, where specific training is needed. The local authority provides full indemnity.
- ix. Parents/Carers at this school understand that if their child's medication changes or is discontinued, or the dose or administration method changes, that they should notify the school immediately.
- x. If a child at this school refuses their medication, staff should not force them and record this and follow procedures set out in the Individual Healthcare Plan. Parents are informed as soon as possible.

Administration – Emergency Medication

- xi. All children with medical conditions have easy access to their medication.
- xii. A child who does not carry and administer their own medication knows where their medication is stored and how to access it.
- xiii. Children who do not administer their own medication understand the arrangements for a member of staff (and the secondary member of staff) to assist in helping them take their medication safely.

Unacceptable Practice

- xiv. The school uses its discretion and professional judgment on individual cases but it is not generally acceptable practice to:
- Prevent a child from easily accessing their medication or inhalers when or where necessary.
 - Assume that every child with the same condition requires similar or the same support.
 - Ignore the views of the child and their parents/carers
 - Send children home frequently or prevent them from staying for school activities.
 - Send a child unaccompanied to the school office or medical room if they become ill.
 - Penalise their attendance records if their absences are related to their medical condition e.g. hospital appointments. Children who attend medical (including dental) appointments will be given an 'authorised absence'.
 - Prevent pupils from drinking, eating or taking toilet or other breaks in order to effectively manage their own medical condition.
 - Require parents/carers or make them feel obliged to attend school to administer long term medication or provide medical support.
 - Prevent or create unnecessary barriers to children participating in any aspect of their educational experience, this includes school visits, e.g. requiring the parents/carers to accompany the child.

5. The school has clear guidance keeping clear and up to date records which supports the planning and access to school.

Administration/Admission forms

- i. Parents/carers at this school are asked if their child has any health conditions or health issues on the admission form, which is filled out at the start of each school year. Parents/carers of new pupils starting at other times during the year are also asked to provide this information on admission forms.
- ii. On the School Induction Day, during the term before the child is admitted to our school, parents/carers are asked to share any information related to medical conditions, allergies, dietary requirements etc.

School Medical Register

- iii. Individual Healthcare Plans are one document that is used to create a medical register of pupils with medical needs, not all children with medical conditions will need an individual plan. An identified member of staff, Kirsty Palmer, has responsibility for the medical register at school.
- iv. Kirsty Palmer has responsibility for the medical register. If required and in consultation with the parent/carers, she will add any further details to a child's Individual Healthcare Plan or follow up on any missing or incomplete information e.g. permission for administration of medication.

Individual Healthcare Plans

Drawing up Individual Healthcare Plans

- v. An Individual Healthcare Plan may be initiated by a member of school through the SENCO, Kirsty Palmer. Plans should be drawn up with the input of healthcare professionals e.g. Specialist Nurse, parents/carers and the child (Form 3).
- vi. As a sign of good practice the school will use Individual Healthcare Plans to record important details about individual children's medical needs at school. It will also contain information about their triggers, signs, symptoms, medication and other treatments. It will be used to identify the level of support they need. Further documentation can be attached to the Individual Healthcare Plan if required.
- vii. An Individual Healthcare Plan, accompanied by an explanation of why and how it is used, is sent to all parents of pupils with a long-term medical condition. This is sent: ☐ at the start of the school year,
 - at admission,
 - or when a diagnosis is first communicated to the school.
- viii. If a child has a short-term medical condition that requires medication during school hours, a medication form plus explanation is given to the pupil's parents/carers to complete (Form 1).

Ongoing communication and review of the Individual Healthcare Plan.

- ix. Parents/carers at St. Paul and St. Timothy's Infant School are regularly reminded to update their child's Individual Healthcare Plan if their child has a medical emergency or if there have been changes to their symptoms (getting better or worse), or their medication, treatments or conditions change.
- x. Staff at our school invite parents/carers to review and check that information held by the school on a child's condition is accurate and up to date.
- xi. Every child with an Individual Healthcare Plan at this school has their plan discussed and reviewed at least once a year.
- xii. Where the child has SEND, the Individual Healthcare Plan should be discussed and reviewed as part of the graduated approach of Assess, Plan, Do, Review and/or linked to their Education Health and Care Plan if they have one.

Storage and access to Individual Healthcare Plans

- xiii. St. Paul and St. Timothy's Infant School ensures that all staff protect confidentiality.
- xiv. Individual Healthcare Plans are kept in a secure central location at school and attached as linked documents using the school's computer system.
- xv. Apart from the central copy, specified members of staff, agreed by the parents/carers, securely hold copies of Individual Healthcare Plans e.g. in the blue file in the drop box

on the door of the class stock cupboard, in the kitchen and the office. These copies are updated at the same time as the central copy.

- xvi. All members of staff who work with groups of children will access the Individual Healthcare Plans to provide support with their planning of teaching and learning.
- xvii. When a member of staff is new to a pupil group, for example due to staff absence, the school makes sure that they are made aware of (and have access to) the Individual Healthcare Plans of children in their care.
- xviii. The school seeks permission from parents/carers to allow the Individual Healthcare Plan to be sent ahead to emergency care staff, should an emergency happen during school hours or at a school activity outside the normal school day. This permission is included on the Individual Healthcare Plan.

Use of an Individual Healthcare Plan

- xix. Individual Healthcare Plans are used by the school to:
 - Inform the appropriate staff and supply teachers about the individual needs of children with a medical condition in their care.
 - Remind children with medical conditions to take their medication when they need to.
 - Identify common or important individual triggers for children with medical conditions that bring on symptoms and can cause emergencies. The school uses this information to help reduce the impact of common triggers.
 - Ensure that all medication stored at school is within the expiry date
 - Ensure our school's local emergency care services have a timely and accurate summary of a pupil's current medical management and healthcare in the event of an emergency.
 - Remind parents/carers of a child with medical conditions to ensure that any medication kept at school for their child is within its expiry dates. This includes spare medication.

Consent to administer medicines

- xx. If a child requires regular prescribed medication at school, parents/carers are asked to provide consent on their child's Individual Healthcare Plan giving the pupil or staff permission to administer medication on a regular/daily basis, if required. A separate form is sent to parents/carers for pupils taking short courses of medication.
- xxi. In an emergency, a child may be given a single dose of non-prescribed medication, **ONLY** with written parental permission.
- xxii. All parents/carers of children with a medical condition who may require medication in an emergency are asked to provide consent on the Individual Healthcare Plan for staff to administer medication. xxiii. If a child requires regular/daily help in administering their medication then the school outlines the school's agreement to administer this medication on the Individual Healthcare Plan. The school and parents/carers keep a copy of this.

Off-site, Sporting Activities and Residential visits

- xxiv. When attending a residential visit or off-site activity (including sporting events) the lead staff member will have copy of all visit paperwork including risk assessments for children where medication is required. A copy of the Individual Healthcare Plan will accompany the child if necessary and reference should be made to any medical conditions in the planning and risk assessment prior to the visit taking place.
- xxv. All parents of a child with a medical condition attending an off-site activity or overnight residential are asked for written consent, giving staff permission to administer medication if required whether or not an Individual Healthcare plan has been drawn up.

Other record keeping

- xxvi. The school keeps an accurate record of each occasion an individual pupil is given or supervised taking medication. Details of the supervising staff member, pupil, dose, date and time are recorded. If a pupil refuses to have medication administered, this is also recorded and parents are informed as soon as possible (Form 2).
- xxvii. The school holds training on common medical conditions once a year. A log of the medical condition training is kept by the school and reviewed every 12 months to ensure all new staff receive training.
- xxviii. All school staff who volunteer or who are contracted to administer medication are provided with training by a healthcare professional. The school keeps a record of staff who have had training (Form 4).

6. There is clear guidance on the safe storage and handling of medication at school.

Safe storage – emergency medication

- i. Emergency medication is readily available to children who require it at all times during the school day or at off-site activities. If the emergency medication is a controlled drug and needs to be stored in a lockable room, the keys are readily available and not held personally by members of staff.

Safe storage – non-emergency medication

- ii. All non-emergency medication is kept in a secure place, in a lockable cupboard in a cool dry place. Pupils with medical conditions know where their medication is stored and how to access it.
- iii. Staff ensure that medication is only accessible to those for whom it is prescribed.

Safe storage – general

- iv. There is an identified member of staff, Kirsty Palmer, who ensures the correct storage of medication at school.
- v. All controlled drugs are kept in a lockable room (Head Teacher's Office) and only named staff i.e. SLT, Kirsty Palmer, Anne Pimblett and Rachael Donnelly, have access, even if the child normally administers medication themselves. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenalin pens will always be readily available to children and not locked away.
- vi. It is the parents/carers responsibility to ensure new and in date medication comes into school on the first day of the new academic year.
- vii. Three times a year, (September, December-January, April-May) the identified member of staff checks the expiry dates for all medication stored at school.
- viii. The identified member of staff, Kirsty Palmer, along with the parents/carers of children with medical conditions, will ensure that all emergency and non-emergency medication brought in to school is clearly labelled with the pupil's name, the name and dose of the medication and the frequency of dose.
- ix. All medication is supplied and stored in its original containers/packages. All medication is labelled with the child's name, date of birth, the name of the medication, expiry date and the prescriber's instructions for administration, including dose and frequency.
- x. Medication will be stored in accordance with instructions, paying particular note to temperature.
- xi. Some medication for pupils at this school may need to be refrigerated. All refrigerated medication is stored in an airtight container and is clearly labelled. Refrigerators used for the storage of medication are in a secure area that is only accessible to staff.
- xii. All medication is sent home with pupils at the end of the school year (July). Medication is not stored over the summer holidays.

Safe disposal

- xiii. Parents will be asked to collect out-of-date medication.
- xiv. If parents/carers do not pick up out-of-date medication, or at the end of the school year, medication is taken to a local pharmacy for safe disposal.
- xv. A named member of staff, Kirsty Palmer, is responsible for checking the dates of medication and will arrange for the disposal of any that have expired.
- xvi. If a sharps box is needed on an off-site or residential visit a named member of staff is responsible for its safe storage and will return it to school or the child's parent/carer.

7. Supporting Medical Conditions in school policy is regularly reviewed, evaluated, consulted with stakeholders and updated.

- i. The policy is reviewed, evaluated and updated annually in line with our school's policy review timeline and receives a full consultation with stakeholders.
- ii. Any new government guidance is actively sought and fed into the review, guidance will be provided by Local Authority Officers.
- iii. When evaluating the policy, we seek feedback and further consultation on the effectiveness and acceptability of the medical conditions policy with a wide-range of key stakeholders within the school, health settings and with parents/carers and children.

Key stakeholders include:

- Children
 - Parents/carers
 - School nurse and/or school healthcare professionals
 - Head teacher
 - Teachers
 - Special Educational Needs Coordinator (SENCO)
 - Pastoral support staff
 - First aiders
 - All other school staff
 - Local emergency care service staff (including accident & emergency and ambulance staff)
 - Local health professionals
 - School governors

All key stakeholders should be consulted in two phases:

- Initial consultation during development of the policy.
 - Comments on a draft policy before publication and implementation.
- iv. The views of children with various medical conditions are actively sought and considered central to the evaluation process.
 - v. Parents/carers, school staff, governors, relevant local health staff and any other external stakeholders are informed and regularly reminded about the policy and how they impact on its implementation and review.

8. Complaints Procedure.

- i. If parents or carers have concerns or are dissatisfied with the support provided they should directly contact the school and follow the complaint procedure set by St. Paul and St. Timothy's Infant School.

Legislation and Guidance

This policy and guidance has been compiled using recommended government documents and Acts, these include;

Supporting pupils with Medical Conditions – September 2014
Special Educational Needs and Disability Code of Practice: 0-25 years
Children and Families Act 2014 – Part 5: 100
Health and Safety: advice for schools – June 2014
Equality Act 2010
The management of Health and Safety at work regulations 1999
Education Act 1996
Health and Safety at work Act 1974
Medicines Act 1968

The Local Authority will provide both national and local guidance.

For further information and guidance see;

<https://www.gov.uk/government/publications/supporting-pupils-at-school-withmedical-conditions--3/supporting-pupils-with-medical-conditions-links-to-other-usefulresources--2>

Annexes to support the policy and implementation

The following Annexes are based on the templates provided by the DfE in 'Supporting pupils with Medical Condition: Templates (May 2014)'

Annex Title	Page Number
Annex A: Form 3: Individual Healthcare Plan	19
Annex B: Parental Agreement for setting to Administer Medicine	22
Form 1: Medication Care Plan	24
Annex C: Record of medicine administered to an individual child	25
Annex D: Record of Medicine Administered to all children	27
Annex E: Staff Training Record – Administration of medicines	29
Annex F: Contacting the Emergency Services	30
Annex G: model letter inviting 31 parents to contribute to individual healthcare plan development	
Annex H: Parent Guide	35
Annex I: Quick Guide to Schools	36

Annex A: Form 3: Individual Healthcare Plan

Name of school/setting

Child's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Clinic/Hospital Contact

Name

Phone no.

G.P.

Name

Phone no.

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 including Sporting Activities

--

Other information

--

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

--

Who is responsible in an emergency (*state if different for off-site activities*)

--

Plan developed with

--

Staff training needed/undertaken – who, what, when

--

Form copied to

--

Annex B: Parental Agreement for setting to Administer Medicine

The school will not give your child medicine unless you complete and sign this form, and the school has a policy that the staff can administer medicine.

Date for review to be initiated by

Name of school/setting

Name of child

Date of birth

Group/class/form

Medical condition or illness

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 the school/setting needs to know about?

Self-administration – y/n

Procedures to take in an emergency

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

Name

Daytime telephone no.

Relationship to child

Address

I understand that I must deliver the
medicine personally to

(agreed member of staff)

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

Signature(s) _____

Date _____

Annex C: Form 1: Medication Care Plan

Name of school/setting

Name of child

Date medicine provided by parent

Group/class/form

Quantity received

Name and strength of medicine

Expiry date

Quantity returned

Dose and frequency of medicine

Staff signature _____

Signature of parent _____

**Annex C: Record of
medicine
administered to an
individual child:**

Date

Time given

Dose given

Name of member of staff

Staff initials

Date

Time given

Dose given

Name of member of staff

Staff initials

Date

Time given

Dose given

Name of member of staff

Staff initials

Date

Time given

Dose given

Name of member of staff

Staff initials

Date

--	--	--

Time given

--	--	--

Dose given

--	--	--

Name of member of staff

--	--	--

Staff initials

--	--	--

Date

--	--	--

Time given

--	--	--

Dose given

--	--	--

Name of member of staff

--	--	--

Staff initials

--	--	--

Date

Time given

Dose given

Name of member of staff

Staff initials

Date

Time given

Dose given

Name of member of staff

Staff initials

Annex D: Record of Medicine Administered to all children

Name of school/setting

[illegible]

[illegible]

Annex E: Staff Training Record – Administration of medicines

Name of school/setting Name	
Type of training received	
Date of training completed	
Training provided by	
Profession and title	
I confirm that (name of member of staff) has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated (suggested date)	

Trainer's signature _____

Date _____

I confirm that I have received the training detailed above.

Staff signature _____

Date _____

Suggested review date _____

Annex F: Contacting the Emergency Services

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

1. Your telephone number: **0151 228 2114** *or mobile number if out of school*
2. Your name:
3. Your location as follows:

St. Paul & St. Timothy's Catholic Infant School
South Parkside Drive, West Derby, Liverpool *or*
location if off-site

4. State what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code: **L12 8RP** *or postcode if off-site*
5. Provide the exact location of the patient within the school setting:
6. Provide the name of the child and a brief description of their symptoms:
7. Inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient:
8. Provide the Ambulance Service with a copy of the child/young person's Individual Healthcare Plan if agreed by the parent:
9. Put a completed copy of this form by the phone.

Annex G: Model Letter inviting parents/carers to contribute to Individual Healthcare Plan development/review

Dear Parent/Carer,

Thank you for informing us of your child's medical condition. I enclose a copy of a guide of your responsibilities and the full policy for supporting pupils at school with medical conditions can be found on the school website.

An Individual Healthcare Plan now has to be prepared/reviewed. This will set out the support your child needs and how this will be provided. We will develop this plan with you, your child and the healthcare professionals who can advise us on your child's medical case.

We would like to hold a meeting to start developing the plan on xx/xx/xx. Please can you contact us to let us know if this is convenient and to agree who needs to attend or provide information for the meeting?

To confirm your attendance or if you would like to discuss this further please call me on 0151 228 2114 or ask to speak to me in school.

Yours sincerely

Annex H: Parent/Carer Guide

The school will support your child with their medical needs but to do this we ask that you:

- Tell us if your child has a medical condition
- Work with us to ensure your child has a complete and up-to-date Individual Healthcare Plan
- Inform us about the medication your child requires during school hours
- Inform us of any medication your child requires while taking part in educational visits or residential visits, especially when these include overnight stays
- Tell us about any changes to your child's medication, what they take, when, and how much
- Inform us of any changes to your child's condition
- Ensure your child's medication and medical devices are labelled with their full name and date of birth and supply a spare provided with the same information
- Ensure that your child's medication is within expiry dates
- Inform us if your child is feeling unwell
- In partnership with your child's class teacher, ensure your child catches up on any school work they have missed
- Ensure your child has regular reviews about their condition with their doctor or specialist healthcare professional. Make sure any information that will require us to support your child is passed on ASAP
- Ensure your child has a written care/self-management plan from their doctor or specialist healthcare professional to help them manage their condition.

Annex I: Quick Guide for schools

Storage and Access

- All non-emergency medication is kept in a secure place and controlled drugs are kept in a locked cupboard and only named staff have access.
- All pupils with medical conditions have easy access to their medication.

Administering any Medication

- The members of staff at the school who have been specifically contracted to administer medication are:
 - Kirsty Palmer
 - Alison McLeod
 - Anne Pimblett
 - Rachael Donnelly
- If a trained member of staff, who is usually responsible for administering medication, is not available the school makes alternative arrangements to continue to provide this support.
- For medication where no specific training is necessary, any member of staff may administer prescribed and non-prescribed medication to children/young people under the age of 16, but only with the written consent of their parent.

Record Keeping

- All medications that are administered should be recorded with the date, child's name, time, name of medicine, dose given, any reactions, signature and print name of supervising staff member.
- Staff will follow the guidance within the Individual Healthcare Plan and follow the instructions found on the prescribed medication.
- Only supply medication to children/young people where written consent has been received but all staff need to act as any reasonably prudent parent.

Review Date:
10/01/16
27/03/17
30/01/24