**St John’s and St Paul’s Whitechapel CE Primary School**

**SUPPORTING PUPILS WITH MEDICAL CONDITIONS POLICY**

This policy has been written taking into account the statutory guidance, *Supporting Pupils at School with Medical Conditions,* September 2014, Section 100 of the Children and Families Act 2014 & the Statutory Framework for the Early Years Foundation Stage.

The named person for overall responsibility for the implementation of this policy is Terry Bennett, Executive Headteacher who will ensure that:

* Sufficient staff are suitably trained
* All relevant staff are made aware of pupil’s medical conditions
* Cover arrangements are in place in case of staff absence or staff turnover, so that cover is available
* Briefing supply teachers
* Risk assessments are carried out for school visits and activities outside of the normal timetable
* Individual healthcare plans are monitored
* All staff understand their duty of care to children and young people in the event of an emergency.
* All staff feel confident in knowing what to do in an emergency.
* Parents\* of pupils with medical conditions feel secure in the care their children receive at this school.

**1. Statement:**

Our schools are inclusive communities that support and welcome pupils with medical conditions. We aim to provide pupils with medical conditions the same opportunities as others.

Pupils with medical conditions are encouraged to take control of their condition, as appropriate for their age and abilities. Pupils feel confident in the support they receive from the school to help them do this.

We understand that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood. We also understand the importance of medication being taken as prescribed.

Although school staff should use their discretion and judge each case on its merits with reference to the child’s individual healthcare plan, 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; 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 individual healthcare plans;
* 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 eg 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;
* prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, eg by requiring parents to accompany the child.

**2. The medical conditions policy is supported by a clear communication plan for staff, parents and other key stakeholders to ensure its full implementation**

a. Pupils are informed about the medical conditions policy:

* through the School Council
* in personal, social and health education (PSHE) classes
* through school-wide communication about results of the monitoring and evaluation of the policy.

b. Parents are informed and regularly reminded about the medical conditions policy:

* by including the policy statement in the school’s prospectus and signposting access to the policy
* at the start of the school year when communication is sent out about Healthcare Plans
* in the school newsletter at several intervals in the school year
* when their child is enrolled as a new pupil
* via the school’s website, where it is available all year round
* through school-wide communication about results of the monitoring and evaluation of the policy.

c. School staff are informed and regularly reminded about the medical conditions policy:

* through copies handed out at the first staff meeting of the school year and at scheduled medical conditions training
* through school-wide communication about results of the monitoring and evaluation of the policy
* all supply and temporary staff are informed of the policy and their responsibilities.

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

a. All staff at this school are aware of the most common serious medical conditions at this school.

b. Staff at this school 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.

c. All staff who work with groups of pupils at this school receive training and know what to do in an emergency for the pupils in their care with medical conditions.

d. Training is refreshed for all staff.

e. Action for staff to take in an emergency for the common serious conditions at this school is located in all classrooms and the school office.

f. This school uses Healthcare Plans to inform the appropriate staff (including supply teachers and support staff) of pupils in their care who may need emergency help.

g. This school has procedures in place so that a copy of the pupil’s 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.

**4. All staff understand and are trained in the school’s general emergency procedures**

a. 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
* who to contact within the school.

b. Training is refreshed for all staff.

c. If a pupil needs to be taken to hospital, a member of staff will always accompany them and will stay with them until a parent arrives. The school tries to ensure that the staff member will be one the pupil knows.

**5. The school has clear guidance on the administration of medication at school**

**Administration – emergency medication**

a. All pupils at this school with medical conditions have **easy access to their emergency medication**.

b. All pupils are encouraged to carry and administer their own emergency medication, when their parents and health specialists determine they are able to start taking responsibility for their condition. These pupils carry their emergency medication with them at all times, except if they are controlled drugs as defined in the Misuse of Drugs Act 1971. This is also the arrangement on any off-site or residential visits.

c. Pupils who do not carry and administer their own emergency medication know where their medication is stored and how to access it.

d. Pupils who do not carry and administer their own emergency medication understand the arrangements for a member of staff (and the reserve member of staff) to assist in helping them take their medication safely.

**Administration – general**

The school keeps an up to date staff training log for the care of pupils with specific medical conditions.

e. All use of medication defined as a controlled drug, even if the pupil can administer the medication themselves, is done under the supervision of a named member of staff at this school.

f. This school understands the importance of medication being taken as prescribed.

g. All staff are aware that there is no legal or contractual duty for any member of staff to administer medication or supervise a pupil taking medication unless they have been specifically contracted to do so.

h. This school is an inclusive community that aims to support and welcome pupils with medical conditions which means that we will ensure wherever possible, that medication is administered.

i. Many members of staff are happy to take on the voluntary role of administering medication. For medication where no specific training is necessary, any member of staff may administer prescribed medication to pupils, but only with the written consent of the pupil’s parent.

j. 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.

k. All school staff have been informed through training that they are required, under common law duty of care, to act like any reasonably prudent parent in an emergency situation. This may include taking action such as administering medication.

l. In some circumstances medication is only administered by an adult of the same gender as the pupil, and preferably witnessed by a second adult as agreed by the Senior Leadership team.

m. Parents 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.

n. If a pupil at this school refuses their medication, staff record this and follow procedures. Parents are informed as soon as possible.

o. If a pupil at this school needs supervision or access to medication during home to school transport organised by the local authority, properly trained escorts are provided. All drivers and escorts have the same training as school staff, know what to do in a medical emergency and are aware of any pupils in their care who have specific needs. If they are expected to supervise or administer emergency medication they are properly trained and have access to the relevant Healthcare Plans.

p. All staff attending off-site visits are aware of any pupils with medical conditions on the visit. They receive information about the type of condition, what to do in an emergency and any other additional support necessary, including any additional medication or equipment needed.

q. If a trained member of staff, who is usually responsible for administering medication, is not available this school makes alternative arrangements to provide the service. This is always addressed in the risk assessment for off-site activities.

r. If a pupil misuses medication, either their own or another pupil’s, their parents are informed as soon as possible. These pupils are subject to the school’s usual disciplinary procedures.

**7. This school has clear guidance on the storage of medication at school**

**Safe storage – emergency medication**

a. Emergency medication is readily available to pupils 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 locked up, the keys are readily available and not held personally by members of staff.

Medication is kept in cabinets in classrooms or in the school office.

b. Some pupils at this school carry their emergency medication on them at all times. Pupils keep their own emergency medication securely.

c. Pupils at this school are reminded to carry their emergency medication with them.

d. Pupils, whose healthcare professionals and parents advise the school that their child is not yet able or old enough to self manage and carry their own emergency medication, know exactly where to access their emergency medication.

**Safe storage – non-emergency medication**

e. All non-emergency medication is kept in a secure place. Pupils with medical conditions know where their medication is stored and how to access it. This is kept in the school office.

**Safe storage – general**

f. There is an identified member of staff who ensures the correct storage of medication at school - Lisa Potten (St Johns) Tina Grundy (St Pauls)

g. All controlled drugs are kept in a locked cupboard and only named staff have access, even if pupils normally administer the medication themselves.

h. The identified member of staff (Lisa Potten (St Johns) Tina Grundy (St Pauls) ), along with the parents of pupils with medical conditions, ensures that all emergency and non-emergency medication brought in to school is clearly labelled with the pupil’s name. This includes all medication that pupils carry themselves.

i. All medication is supplied and stored, wherever possible, in its original containers.

j. Medication is stored in accordance with instructions, paying particular note to temperature.

k. 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, inaccessible to unsupervised pupils. (School Office)

l. All medication is sent home with pupils at the end of the school year. Medication is not stored in summer holidays.

m. It is the parent’s responsibility to ensure new and in date medication comes into school on the first day of the new academic year.

**Safe disposal**

o. Parents at this school are asked to collect out-of-date medication.

p. If parents 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.

q. A named member of staff (Lisa Potten (St Johns) Tina Grundy (St Pauls) ) is responsible for checking the dates of medication and arranging for the disposal of any that have expired. This check is done at least three times a year and is always documented.

r. Sharps boxes are used for the disposal of needles. Parents obtain sharps boxes from the child’s GP or paediatrician on prescription. All sharps boxes in this school are stored safely and securely.

s. 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 return to a local pharmacy or to school or the pupil’s parent.

t. Collection and disposal of sharps boxes is arranged with the parents.

**8. This school has clear guidance about record keeping**

**Contact forms**

Parents at this school are asked if their child has any health conditions or health issues on the contact form, which is filled out at the start of each school year. Parents of new pupils starting at other times during the year are also asked to provide this information on contact forms.

**Healthcare Plans**

**Drawing up Healthcare Plans**

This school uses a Healthcare Plan to record important details about individual children’s medical needs at school, their triggers, signs, symptoms, medication and other treatments. Where a child has special educational needs (SEN) but does not have a statement or EHC plan, their needs are mentioned on their individual healthcare plan. Further documentation can be attached to the Healthcare Plan if required.

A 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 review of the plan
* at enrolment
* when a diagnosis is first communicated to the school.

If a pupil has a short-term medical condition that requires medication during school hours, an administration of medicine form is given to the pupil’s parents to complete.

The parents, healthcare professional/school nurse and pupil with a medical condition, are asked to fill out the pupil’s Healthcare Plan together. Parents then return these completed forms to the school.

This school ensures that a relevant member of school staff is also present, if required to help draw up a Healthcare Plan for pupils with complex healthcare or educational needs.

**School Healthcare Plan register**

Healthcare Plans are used to create a centralised register of pupils with medical needs. An identified member of staff has responsibility for the register at this school –Lisa Potten (St Johns) Tina Grundy (St Pauls)

The responsible member of staff follows up with the parents any further details on a pupil’s Healthcare Plan required or if permission for administration of medication is unclear or incomplete.

**Ongoing communication and review of Healthcare Plans**

Parents at this school are regularly reminded to update their child’s 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 and treatments change.

Every pupil with a Healthcare Plan at this school has their plan discussed and reviewed at least once a year.

**Storage and access to Healthcare Plans**

Parents of pupils at this school are provided with a copy of the pupil’s current agreed Healthcare Plan.

Healthcare Plans are kept in a secure central location at school.

Apart from the central copy, specified members of staff (agreed by the pupil and parents) securely hold copies of pupils’ Healthcare Plans. These copies are updated at the same time as the central copy.

All members of staff who work with groups of pupils have access to the Healthcare Plans of pupils in their care.

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 Healthcare Plans of pupils in their care.

This school ensures that all staff protect pupil confidentiality.

This school seeks permission from parents to allow the 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 school seeks permission from the pupil and parents before sharing any medical information with any other party, such as when a pupil takes part in an out of school activity.

**Consent to administer medicines**

If a pupil requires regular prescribed medication at school, parents are asked to provide consent on their child’s 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 for pupils taking short courses of medication.

All parents of pupils with a medical condition who may require medication in an emergency are asked to provide consent on the Healthcare Plan for staff to administer medication.

If a pupil requires regular/daily help in administering their medication then the school outlines the school’s agreement to administer this medication on the pupil’s Healthcare Plan. The school and parents keep a copy of this agreement.

Parents of pupils with medical conditions at this school are all asked at the start of the school year on the Healthcare Plan if they and their child’s healthcare professional believe the child is able to manage, carry and administer their own emergency medication.

**Residential visits**

Parents are sent a residential visit form to be completed and returned to school shortly before their child leaves for an overnight or extended day visit. This form requests up-to-date information about the pupil’s current condition and their overall health. This provides essential and up-to-date information to relevant staff and school supervisors to help the pupil manage their condition while they are away. This includes information about medication not normally taken during school hours.

All residential visit forms are taken by the relevant staff member on visits and for all out-of-school hours activities where medication is required. These are accompanied by a copy of the pupil’s Healthcare Plan.

All parents of pupils with a medical condition attending a school trip or overnight visit are asked for consent, giving staff permission to administer medication at night or in the morning if required.

**Other record keeping**

This 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.

**9. This school 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**

**Physical environment**

This school is committed to providing a physical environment that is accessible to pupils with medical conditions.

Pupils with medical conditions are included in the consultation process to ensure the physical environment at this school is accessible.

This school’s commitment to an accessible physical environment includes out-of-school visits. The school recognises that this sometimes means changing activities or locations.

**Social interactions**

This school ensures the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured social activities, including during breaks and before and after school.

This school ensures the needs of pupils with medical conditions are adequately considered to ensure they have full access to extended school activities such as, after school clubs and residential visits.

All staff at this school are aware of the potential social problems that pupils with medical conditions may experience. Staff use this knowledge to try to prevent and deal with problems in accordance with the school’s anti-bullying and behaviour policies.

Staff use opportunities such as personal, social and health education (PSHE) lessons to raise awareness of medical conditions amongst pupils and to help create a positive social environment.

**Exercise and physical activity**

This school understands the importance of all pupils taking part in sports, games and activities.

This school ensures all classroom teachers, PE teachers and sports coaches make appropriate adjustments to sports, games and other activities to make physical activity accessible to all pupils.

This school ensures all classroom teachers, PE teachers and sports coaches understand that pupils should not be forced to take part in an activity if they feel unwell.

Teachers and sports coaches are aware of pupils in their care who have been advised to avoid or to take special precautions with particular activities.

This school ensures all PE teachers, classroom teachers and school sports coaches are aware of the potential triggers for pupils’ medical conditions when exercising and how to minimize these triggers.

This school ensures all pupils have the appropriate medication or food with them during physical activity and that pupils take them when needed.

This school ensures all pupils with medical conditions are actively encouraged to take part in out-of-school clubs and team sports.

**Education and learning**

This school ensures that pupils with medical conditions can participate fully in all aspects of the curriculum and ensures that appropriate adjustments and extra support are provided.

If a pupil is missing a lot of time at school, they have limited concentration or they are frequently tired, all teachers at this school understand that this may be due to their medical condition.

Teachers at this school are aware of the potential for pupils with medical conditions to have SEN. Pupils with medical conditions who are finding it difficult to keep up with their studies are referred to the SEN coordinator. The school’s SEN coordinator consults the pupil, parents and the pupil’s healthcare professional to ensure the effect of the pupil’s condition on their schoolwork is properly considered.

This school ensures that lessons about common medical conditions are incorporated into PSHE lessons and other parts of the curriculum.

Pupils at this school learn about what to do in the event of a medical emergency.

**Residential visits**

Risk assessments are carried out by this school prior to any out-of-school visit and medical conditions are considered during this process. Factors this school considers include: how all pupils will be able to access the activities proposed, how routine and emergency medication will be stored and administered, and where help can be obtained in an emergency.

This school understands that there may be additional medication, equipment or other factors to consider when planning residential visits. This school considers additional medication and facilities that are normally available at school.

Risk assessments are carried out before pupils start any work experience or off-site educational placement. It is this school’s responsibility to ensure that the placement is suitable, including travel to and from the venue for the pupil. Permission is sought from the pupil and their parents before any medical information is shared with an employer or other education provider.

**10. Each member of the school and health community knows their roles and responsibilities in maintaining an effective medical conditions policy**

a. This school works in partnership with all interested and relevant parties including the school’s governing body, all school staff, parents, community healthcare professionals and pupils to ensure the policy is planned, implemented and maintained successfully.

b. The following roles and responsibilities are used for the medical conditions policy at this school. These roles are understood and communicated regularly.

**Employer**

**This school’s employer has a responsibility to:**

* ensure the health and safety of their employees and anyone else on the premises or taking part in school activities (this includes all pupils). This responsibility extends to those staff and others leading activities taking place off-site, such as visits, outings or field trips
* ensure health and safety policies and risk assessments are inclusive of the needs of pupils with medical conditions
* make sure the medical conditions policy is effectively monitored and evaluated and regularly updated
* report to parents, pupils, school staff and the local authority about the successes and areas for improvement of this school’s medical conditions policy
* provide indemnity for staff who volunteer to administer medication to pupils with medical conditions.

**Head teacher**

**This school’s head teacher has a responsibility to:**

* ensure the school is inclusive and welcoming and that the medical conditions policy is in line with local and national guidance and policy frameworks
* liaise between interested parties including pupils, school staff, SEN coordinators, pastoral support/welfare officers, teaching assistants, school nurses, parents, governors, the school health service, the local authority transport service, and local emergency care services
* ensure the policy is put into action, with good communication of the policy to all
* ensure every aspect of the policy is maintained
* ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place using pupils’ Healthcare Plans
* ensure pupil confidentiality
* assess the training and development needs of staff and arrange for them to be met
* 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 conditions register
* monitor and review the policy at least once a year
* update the policy at least once a year according to review recommendations and recent local and national guidance and legislation
* report back to all key stakeholders about implementation of the medical conditions policy.

**All school staff**

**All staff at this 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
* understand the school’s medical conditions policy
* know which pupils in their care have a medical condition and be familiar with the content of the pupil’s Healthcare Plan
* allow all pupils to have immediate access to their emergency medication
* maintain effective communication with parents including informing them if their child has been unwell at school
* ensure pupils who carry their medication with them have it when they go on a school visit or out of the classroom
* be aware of pupils 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 pupils (pupils should not be forced to take part in any activity if they feel unwell)
* ensure all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in
* ensure pupils have the appropriate medication or food with them during any exercise and are allowed to take it when needed.

**Teaching staff**

**Teachers at this school have a responsibility to:**

* be aware that medical conditions can affect a pupil’s learning
* liaise with parents, the pupil’s healthcare professionals, SEN coordinator and welfare officers if a child is falling behind with their work because of their condition
* use opportunities such as PSHE and other areas of the curriculum to raise pupil awareness about medical conditions.

**School nurse**

**The school nurse at this school has a responsibility to:**

* help update the school’s medical conditions policy
* help provide regular training for school staff in managing the most common medical conditions at school
* provide information about where the school can access other specialist training.

**First aider**

**First aiders at this 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 (SENCos)**

**Special educational needs coordinators at this school have the responsibility to:**

* help update the school’s medical condition policy
* know which pupils have a medical condition and which have SEN because of their condition
* ensure teachers make the necessary arrangements if a pupil needs special consideration or access arrangements in exams or course work.

**Inclusion Team**

**The Inclusion Team at this school has the responsibility to:**

* help update the school’s medical conditions policy
* know which pupils have a medical condition and which have SEN because of their condition
* ensure all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in.

**Local doctors and specialist healthcare professionals**

**Individual doctors and specialist healthcare professionals caring for pupils who attend this school, have a responsibility to:**

* complete the pupil’s Healthcare Plans provided by parents
* where possible, and without compromising the best interests of the child, try to prescribe medication that can be taken outside of school hours
* offer every child or young person (and their parents) a written care/self-management plan to ensure children and young people know how to self manage their condition
* ensure the child or young person knows how to take their medication effectively
* ensure children and young people have regular reviews of their condition and their medication
* provide the school with information and advice regarding individual children and young people with medical conditions (with the consent of the pupil and their parents)
* understand and provide input in to the school’s medical conditions policy.

**Emergency care services**

**Emergency care service personnel in this area have a responsibility to:**

* have an agreed system for receiving information held by the school about children and young people’s medical conditions, to ensure best possible care

**Pupils**

**The pupils at this school have a responsibility to:**

* treat other pupils with and without a medical condition equally
* tell their parents, teacher or nearest staff member when they are not feeling well
* let a member of staff know if another pupil is feeling unwell
* let any pupil take their medication when they need it, and ensure a member of staff is called
* treat all medication with respect
* know how to gain access to their medication in an emergency
* if mature and old enough, know how to take their own medication and to take it when they need it
* ensure a member of staff is called in an emergency situation.

**Parents** (‘Parent’ implies any person or body with parental responsibility such as foster parent, carer, guardian or local authority).

**The parents of a child at this 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 visits, outings or field trips and other out-of-school activities
* 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
* provide the school with appropriate spare medication labelled with their child’s name
* ensure that their child’s medication is within expiry dates
* keep their child at home if they are not well enough to attend school
* 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
* ensure their child has a written care/self-management plan from their doctor or specialist healthcare professional to help their child manage their condition.

**Complaints Procedures:**

Should parents or pupils be dissatisfied with the support 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. 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.

**Further advice and resources**

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| **The Anaphylaxis Campaign**  PO Box 275  Farnborough  Hampshire GU14 6SX  **Phone 01252 546100**  **Fax 01252 377140**  **info@anaphylaxis.org.uk**  **www.anaphylaxis.org.uk** | **Asthma UK**  Summit House  70 Wilson Street  London EC2A 2DB  **Phone 020 7786 4900**  **Fax 020 7256 6075**  **info@asthma.org.uk**  **www.asthma.org.uk** | **Council for Disabled Children**  National Children’s Bureau  8 Wakley Street  London EC1V 7QE  **Phone 020 7843 1900**  **Fax 020 7843 6313**  **cdc@ncb.org.uk**  **www.ncb.org.uk/cdc** |
| **Diabetes UK**  Macleod House  10 Parkway  London NW1 7AA  **Phone 020 7424 1000**  **Fax 020 7424 1001**  **info@diabetes.org.uk**  **www.diabetes.org.uk** | **Long-Term**  **Conditions Alliance**  202 Hatton Square  16 Baldwins Gardens  London EC1N 7RJ  **Phone 020 7813 3637**  **Fax 020 7813 3640**  **info@ltca.org.uk**  **www.ltca.org.uk** | **National Children’s Bureau**  National Children’s Bureau  8 Wakley Street  London EC1V 7QE  **Phone 020 7843 6000**  **Fax 020 7278 9512**  **www.ncb.org.uk** |
| **Epilepsy Action**  New Anstey House  Gate Way Drive  Yeadon  Leeds LS19 7XY  **Phone 0113 210 8800**  **Fax 0113 391 0300**  **epilepsy@epilepsy.org.uk**  **www.epilepsy.org.uk** | **Department for Education**  Sanctuary Buildings  Great Smith Street  London SW1P 3BT  **Phone 0870 000 2288**  **Textphone/Minicom 01928 794274**  **Fax 01928 794248**  **info@dcsf.gsi.gov.uk**  **www.dcsf.gov.uk** |  |

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| File name | Federation Supporting Pupils with Medical Conditions Policy 2015 |
| Date of latest revision | March 2016 |
| Date ratified by governors | 17th March 2016 |
| Date of Review | Spring 2021 |

**Appendix 1**



# 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

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| --- |
|  |

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

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|  |

Daily care requirements

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|  |

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

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| --- |
|  |

Arrangements for school visits/trips etc

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| --- |
|  |

Other information

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| --- |
|  |

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

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|  |

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

|  |
| --- |
|  |

Plan developed with

|  |
| --- |
|  |

Staff training needed/undertaken – who, what, when

|  |
| --- |
|  |

# St Johns and St Pauls Federated Schools: Parental agreement for setting to administer medicine

The school/setting will not give your child medicine unless you complete and sign this form,

and the school or setting 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 |  | | | |

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

**St Johns and St Pauls Federated Schools: 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 |  | | |  | | |  | | |

# St Johns and St Pauls Federated Schools:

# Staff training record for 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 [name of member of staff].

Trainer’s signature

Date

**I confirm that I have received the training detailed above.**

Staff signature

Date

Suggested review date