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Registered in England & Wales

THE BLESSED EDWARD BAMBER CATHOLIC MULTI ACADEMY TRUST SUPPORTING PUPILS AT SCHOOL WITH MEDICAL CONDITIONS

Introduction

Section 100 of the Children and Families Act 2014 places a duty on the Blessed Edward Bamber Catholic Multi Academy Trust to make arrangements for supporting pupils at their academies with medical conditions. This policy applies to all academies within and staff employed by the Trust.

Our aim is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in the life of their academy, remain healthy and achieve their academic potential.

Parents of children with medical conditions are often concerned that their child's health will deteriorate when they attend school. This is because pupils with long-term and complex medical conditions may require on-going support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. It is therefore important that parents feel confident that all our academies will provide effective support for their child's medical condition and that pupils feel safe. In making decisions about the support they provide, schools should establish relationships with relevant local health services to help them. It is crucial that schools receive and fully consider advice from healthcare professionals and listen to and value the views of parents and pupils.

In addition to the educational impacts, there are social and emotional implications associated with medical conditions. Children may be self-conscious about their condition and some may be bullied or develop emotional disorders such as anxiety or depression around their medical condition. In particular, long-term absences due to health problems affect children's educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health. Reintegration back into school should be properly supported so that children with medical conditions fully engage with learning and do not fall behind when they are unable to attend. Short-term and frequent absences, including those for appointments connected with a pupil's medical condition (which can often be lengthy), also need to be effectively managed and appropriate support put in place to limit the impact on the child's educational attainment and emotional and general wellbeing.

Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Some may also have Special Educational Needs and Disabilities (SEND) and may have a statement, or an Individual Health and Care (IHCP) plan which brings together health and social care needs, as well as their special educational provision. For children with SEND, this guidance should be read in conjunction with the Special Educational Needs and Disability (SEND) code of practice. For pupils who have medical conditions that require EHC plans, compliance with the SEND code of practice will ensure compliance with the statutory elements of this guidance with respect to those children.

The implementation of this policy will ensure that arrangements are in place in the Trust's academies to support pupils with medical conditions. Pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.

Admissions

Children and young people with medical conditions are entitled to a full education and have the same rights of admission to school as other children. This means that no child with a medical condition will be denied admission to one of the Trust's academies or prevented from taking up a place because arrangements for their medical condition have not yet been made.

However, in line with their safeguarding duties, the Trust will ensure that pupils' health is not put at unnecessary risk from, for example, infectious diseases. They therefore do not have to accept a child at times where it would be detrimental to the health of that child or others to do so.

Liability and indemnity

The Trust's Business Manager will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk to be managed.

The Trust's insurance policies will provide liability cover relating to the administration of medication. Individual cover may need to be arranged for other healthcare procedures. The level and ambit of cover required will be ascertained directly from the relevant insurers. Any requirements of the insurance, such as the need for staff to be trained, will be made clear and complied with.

Insurance policies are available to staff providing support to pupils with medical conditions to view, on request.

Policy Implementation

Headteachers should ensure that the arrangements are in place to effectively implement this policy in the academy for which they have responsibility and lead, including a named person who has overall responsibility for policy implementation, including:

- Naming who is responsible for the management of the policy at the academy.
- Ensuring that staff are suitably trained,
- A commitment that all relevant staff will be made aware of the child's condition,
- Cover arrangements in case of staff absence or staff turnover to ensure someone is always available,
- Briefing for supply teachers,
- Risk assessments for visits, holidays, and other activities outside of the normal timetable, and
- Monitoring of individual healthcare plans and reviewing at least annually or more frequently if appropriate.

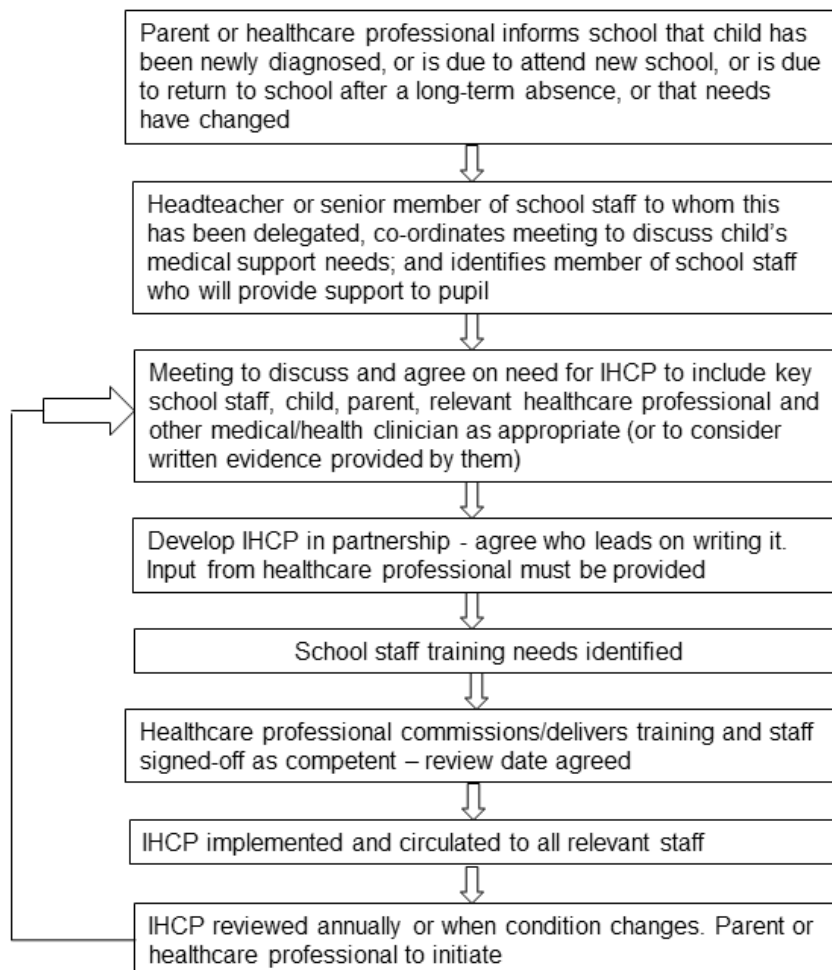
It should be noted, supporting a child with a medical condition during academy hours is not the sole responsibility of one person. The provision of effective support will require working co-operatively with other agencies. Partnership working between school staff, healthcare professionals (and, where appropriate, social care professionals), local authorities, and parents and pupils will be critical to the successful implementation of this policy.

This policy should be ready in conjunction with the Academy's Asthma Policy.

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Procedure to be Followed when Notification is received that a Pupil has a Medical Condition

The academy (headteacher or nominated senior member of staff), healthcare professional and parent should agree, based on evidence, when a healthcare plan would be appropriate or disproportionate. If consensus cannot be reached, the headteacher will make a final determination.



Individual Health Care Plans (and their review) may be initiated, in consultation with the parent, by a member of staff or a healthcare professional involved in providing care to the child.

Plans should be drawn up in partnership between the school, parents, and a relevant healthcare professional, e.g. school, specialist or children’s community nurse, who can best advise on the particular needs of the child.

Pupils should also be involved whenever appropriate. The aim should be to capture the steps which the academy should take to help the child manage their condition and overcome any potential barriers to getting the most from their education.

Partners should agree who will take the lead in writing the plan, but responsibility for ensuring it is finalised and implemented rests with the headteacher.

Where the child has a special educational need identified in a statement or IHCP plan, the individual healthcare plan should be linked to or become part of that statement or IHCP plan.

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Individual Health Care Plans

Where it is determined that a child's education would benefit from the implementation of an Individual Health Care Plan (IHCP) the template attached to this policy should be completed in partnership with the child, child's parents and health care professionals. The IHCP should include:

1. The medical condition, its triggers, signs, symptoms and treatments;
2. 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;
3. 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;
4. 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;
5. 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;
6. Who in the school needs to be aware of the child's condition and the support required;
7. Arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours;
8. Clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other pupils in the academy should know what to do in general terms, such as informing a teacher immediately if they think help is needed;
9. Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments;
10. Where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition;
11. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their Individual Health Care Plan.

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Roles & Responsibilities

Trust staff

Any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. 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. 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. Any member of staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents should be informed so that alternative options can be considered.

School nurses

Every school has access to school nursing services. They are responsible for notifying the academy 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 academy. They would not usually have an extensive role in ensuring that the academy is taking appropriate steps to support children with medical conditions, but may support staff on implementing a child's Individual Health Care Plan 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. Community nursing teams will also be a valuable potential resource for a school seeking advice and support in relation to children with a medical condition.

Other healthcare professionals, including GPs and paediatricians

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 health care plans. Specialist local health teams may be able to provide support in schools for children with particular conditions (e.g. asthma, diabetes, epilepsy).

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 individual healthcare plan.

Following discussions with parents and healthcare professions, where a pupil is considered competent to manage his/her own health needs and medicines s/he should be allowed to carry them and relevant devices or should be able to access their medicines for self-medication quickly and easily. Pupils who can take their medicines themselves or manage procedures may require an appropriate level of supervision. If it is not appropriate for a child to self-manage, then relevant staff should help to administer medicines and manage procedures for them. Other pupils will often be sensitive to the needs of those with medical conditions.

Parents

Parents should provide the academy with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the academy 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.

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Staff Training and Support

- The headteacher of each academy should make arrangements for whole staff awareness training so that all staff are aware of the Trust policy for supporting pupils with medical conditions and their role in implementing that policy. Arrangements for new staff should be included within the induction programme.
- The headteacher of each academy should ensure that there are sufficiently trained first aiders to meet the needs of the academy.
- During the development or review of Individual Health Care Plans the support to be provided by a member of staff, to a pupil with medical needs, should be identified. The IHCP should record what training is required, who will provide it and by when. Staff who provide support to pupils with medical conditions should be included in meetings where this is discussed. The relevant healthcare professional should normally lead on identifying and agreeing with the academy the type and level of training required, and how this can be obtained.
- Training should be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual healthcare plans. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.
- Staff must not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect any individual healthcare plans). In some cases, written instructions from the parent or on the medication container dispensed by the pharmacist may be considered sufficient, but ultimately this is for the school to decide, having taken into consideration the training requirements as specified in pupils' individual health care plans. A first-aid certificate does not constitute appropriate training in supporting children with medical conditions.
- Healthcare professionals, including the school nurse, can provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.
- The relevant healthcare professional should be able to advise on training that will help ensure that all medical conditions affecting pupils in the school are understood fully. This includes preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.

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Managing Medicines on Academy Premises

The Trust's academies will only administer medicines on any of the academy's premises following completion of the "Parental Agreement for Academy to Administer Medicine". No child under 16 will be given prescription or non-prescription medicines without their parent's written consent. Parents must not send in prescription or non-prescription medicines without agreement of the Academy. In addition:

- Medicines will only be administered on academy premises when it would be detrimental to a child's health or school attendance not to do so.
- In exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents, every effort will be made to encourage the child or young person to involve their parents while respecting their right to confidentiality.
- A child under 16 must never be given medicine containing aspirin or paracetamol unless prescribed by a doctor. Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents should be informed.
- An exception may be made where a parent gives written permission for his/her child to take aspirin or paracetamol, available without prescription, at the specified dosage, for a short period of time at the discretion of the headteacher.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- The Trust's academies will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container.
- All medicines will be stored safely.
- Children should know where their medicines are at all times and be able to access them immediately. Where relevant, they should know who holds the key to the storage facility. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to children and not locked away. This is particularly important to consider when outside of school premises, e.g. on school trips
- A child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence and will be dealt with using the Academy's Behaviour Policy. Otherwise controlled drugs that have been prescribed for a pupil will be securely stored in a non-portable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency.
- Staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines should do so in accordance with the prescriber's instructions.
- When no longer required, medicines should be returned to the parent to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps

Record Keeping

Schools should keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered must be noted

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All the Trust's academies must use the "Record of Medicine Administered to an Individual Child" and "Record of Medicine Administered to all Children" proformas contained within this policy.

Emergency Procedures

In an emergency the Trust's Critical Incident Policy should be implemented.

If a child needs to be taken to hospital, staff should stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.

Day Trips, Residential Visits and Sporting Activities

Staff should make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible.

Trip/visit leaders and teachers should consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on trips, visits or in sporting activities. In carrying out a risk assessment or during planning arrangements staff should take account of any steps needed to ensure that pupils with medical conditions are included. This will require consultation with parents and pupils and advice from the relevant healthcare professional to ensure that pupils can participate safely.

Unacceptable practice

Although 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, 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, 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 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, e.g. by requiring parents to accompany the child.

Complaints

If a concern is raised regarding the support provided to pupils with medical conditions a meeting between all relevant parties should be called to address and resolve the issue. This approach will ensure enhanced communication and discussion of concerns at an early stage which is most likely to lead to a successful resolution in favour of ensuring the child has full, fair and equal access to a high quality education.

If the matter is not resolved the Trust's Complaints Policy & Procedures should be used.

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Asthma Policy - Christ the King Catholic & St. Cuthbert's Catholic Academies

Christ the King Catholic & St. Cuthbert's Catholic Academies recognise that asthma is a widespread, serious but controllable condition and our Academies welcome all pupils with asthma. Within our Academies we ensure that pupils with asthma can, and do, participate fully in all aspects of school life, including art lessons, PE, science, educational visits, outings or field trips and other out-of-hours school activities.

This is achieved through:

- Ensuring that children have access to asthma inhalers as needed.
- Keeping a record of all pupils with asthma and the medicines they take.
- Creating a whole school environment, including the physical, social, sporting and educational environment, that is favourable to pupils with asthma.
- Helping all pupils to understand asthma as a medical condition.
- Making sure that all staff (including supply teachers and support staff) who come into contact with pupils with asthma, know what to do in the event of an asthma attack.
- Working in partnership with all interested parties, including the Trust's Directors, all school staff, school nurses, parents/carers, Local Authority, doctors, nurses and pupils to ensure the policy is planned, implemented and maintained successfully.

Asthma medicines

- Immediate access to 'reliever' medicines is essential. The reliever inhalers of children of primary age are kept in each classroom in a carry bag – this bag is carried out to the playground in the event of fire.
- School staff are not required to administer asthma medicines to pupils (except in an emergency or if the child is too young to administer the medicine correctly his/herself). All staff will let pupils take their own medicine when they need to. This is supervised either by qualified First Aiders, the Head teacher, Senior Leaders or Special Education Needs Coordinator.

Record keeping

- At the beginning of each academic year or when a child joins the school, parents/carers are asked if their child has any medical conditions including asthma on their enrolment form.
- All parents/carers of children with asthma are consequently sent an **Asthma UK School Asthma Card** to give to their child's doctor or asthma nurse to complete. Parents/carers are asked to return the asthma card to the school to ensure the asthma register is available to school staff.
- A record of when the child takes their asthma relief is kept. Any irregularities are reported to parents, for example a child needing to take asthma relief more than is usual for that child.
- Asthma Cards are then sent to parents/carers of children with asthma on an annual basis to update by the school SENCO. Parents/carers are also asked to update or exchange the card for a new one if their child's medicines, or how much they take, changes during the year.

Exercise and activity – PE and games

- Taking part in sports, games and activities is an essential part of school life for all pupils. All teachers know which children in their class have asthma; their photo is displayed in the classroom and in other rooms around school. We encourage children as they get older to try to remember this themselves and to take more control in remembering their medication.
- Pupils with asthma are encouraged to participate fully in all PE lessons. Teachers will remind pupils whose asthma is triggered by exercise to take their reliever inhaler before the lesson, and to thoroughly warm up and down before and after the lesson. If a pupil needs to use their inhaler during a lesson they will be encouraged to do so.

Off-site sport and swimming and Educational Visits

- The health benefits of exercise are well documented. Asthma relievers are taken off site and are kept by the leader of the group when the child participates in swimming, sports activities and educational visits. A copy of the school asthma card is kept in the bag with the asthma reliever.

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School environment

- Our Academies work hard to ensure the school environment is favourable to pupils with asthma. The schools do not keep furry or feathered animals in class rooms and has a definitive no smoking policy. As far as possible the school does not use chemicals in science and art lessons that are potential triggers for pupils with asthma. Pupils with asthma are encouraged to leave the room and go and sit in the school office if particular fumes trigger their asthma.

Asthma attacks

- All staff who come into contact with pupils with asthma know what to do in the event of an asthma attack. Guidance is also clearly set out on each child's support card in the event of an attack.
- In the event of an asthma attack the school follows the procedure outlined by Asthma UK in its *School Asthma Pack*. This procedure is visibly displayed in the first aid station.

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Asthma Policy - St Mary's Catholic Academy

St. Mary's Catholic Academy recognises that asthma is a widespread, serious but controllable condition and our Academy welcomes all pupils with asthma. Within St. Mary's we ensure that pupils with asthma can, and do, participate fully in all aspects of school life, including art lessons, PE, science, educational visits, outings or field trips and other out-of-hours school activities.

This is achieved through:

- Ensuring that children have access to asthma inhalers as needed.
- Keeping a record of all pupils with asthma and the medicines they take.
- Creating a whole school environment, including the physical, social, sporting and educational environment, that is favourable to pupils with asthma.
- Helping all pupils to understand asthma as a medical condition.
- Making sure that all staff (including supply teachers and support staff) who come into contact with pupils with asthma, know what to do in the event of an asthma attack.
- Working in partnership with all interested parties, including the Trust's Directors, all school staff, school nurses, parents/carers, Local Authority, doctors, nurses and pupils to ensure the policy is planned, implemented and maintained successfully.

Asthma medicines

- Immediate access to 'reliever' medicines is essential. An emergency salbutamol inhaler will be available in the First Aid Kit used in the event of a fire drill, fire or critical incident.
- School staff are not required to administer asthma medicines to pupils (except in an emergency). All staff will let pupils take their own asthma medication when they need to.

Record keeping

- At the beginning of each school year or when a child joins the school, parents/carers are asked if their child has any medical conditions including asthma on their enrolment form.
- All parents/carers of children with asthma are consequently sent a consent form.

Exercise and activity – PE and games

- Taking part in sports, games and activities is an essential part of school life for all pupils. All teachers know which children in their class have asthma.
- Pupils who have asthma are indicated with an 'A' next to their name on the PARS register.
- Pupils with asthma are encouraged to participate fully in all PE lessons. If a pupil needs to use their inhaler during a lesson they will be encouraged to do so.

Off-site sport and swimming and Educational Visits

- Pupils are expected to carry their emergency asthma medication on all visits out of school.

School environment

- Schools within the Trust work hard to ensure the school environment is favourable to pupils with asthma.
- St Mary's Catholic Academy is a smoke free school.
- As far as possible the school does not use chemicals in science and art lessons that are potential triggers for pupils with asthma. Where such chemicals are used a risk assessment is in place.

Asthma attacks

- All staff who come into contact with pupils with asthma know what to do in the event of an asthma attack.
- In the event of an asthma attack the school follows the procedure outlined by Asthma UK.
- In the event of an emergency where an inhaler is not available or empty, school has access to administer an 'Emergency Salbutamol Inhaler' after parental consent is provided.

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Individual Health Care Plan

Name of academy

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 etc

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

Parental Agreement for Academy to Administer Medicine

The Academy will not give your child medicine unless you complete and sign this form.

Date for review to be initiated by

Name of Academy

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 the academy's staff administering medicine in accordance with the Trust's policy. I will inform the academy immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____

Date _____

Record of Medicine Administered to an Individual Child

Name of Academy	
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 _____

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			

Record of Medicine Administered to an Individual Child (Continued)

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			

Staff Training Record – Administration of Medicines

Name of Academy

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

Contacting 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
2. Your name
3. Your location
4. State what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code
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. Ask Ambulance Control to contact the Academy and inform them of the emergency call if you have not been able to do so already
9. Put a completed copy of this form by the phone

Model letter inviting Parents to contribute to Individual Health Care Plan Development

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTH CARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the Trust's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an Individual Health Care Plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual Health Care Plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although Individual Health Care Plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely