

Supporting Students with Medical Conditions

**Review Timetable**

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| --- |
| The Policy will be reviewed every year, as set out below: |
| Policy reviewed centrally | n/a  |
| Policy tailored by individual schools | May 2023 |
| Policy ratified by Local Governing Bodies | n/a  |
| Renewal Date | May 2024 |
| Author | Jon Rutland |

**Chilmington Green School Supporting Students with Medical Conditions**

This policy is in line with our equal opportunities statement and aims to support inclusion for all of our students. The policy covers all statutory elements and focuses on maintaining the highest expectations for all students and bringing out the ‘best from everyone’.

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| **Context** |
| This policy was developed in consultation with parents/carers, staff and students and has regard to:* Statutory Guidance: Supporting students at school with medical conditions – DfE – August 17
* Section 100 of the Children and Families Act 2014 and associated regulations
* The Equality Act 2010
* The SEND Code of Practice 2015 (Updated 2020)
* Health Conditions in Schools Alliance – this site has Individual Healthcare Plan information for specific conditions

<http://medicalconditionsatschool.org.uk/> |
| **Principal:** Jon Rutland |
| **Governor with responsibility for Medical Needs: n/a** |
| **SENCo:** Lydia McCorriston |
| **Agreed by Governing Body:** |
| **Reviewed:**  |
| **Next Review:** |

**RATIONALE**

The number of students attending mainstream schools who have specific medical needs is increasing. Many children and young people have their participation in school affected by illness or a specific medical condition. This may result in a minor disruption, or it may cause regular or permanent limitation to their access to education. Most children with medical needs are able to attend school regularly and with appropriate support from family and school, can take part in the normal school activities. However, some children with long term, complex or individualised medical needs will need to have them carefully planned and monitored by school, parents/carers, medical and other professionals and where appropriate for the child, to maximise curriculum access, their inclusion and to safeguard the child’s health and safety. It is crucial that all involved have an understanding of the policy and procedures the school is operating.

**INTRODUCTION**

[Section 100 of The Children and Families Act 2014](https://www.legislation.gov.uk/ukpga/2014/6/contents/enacted) places a duty on the governing body of each school to make arrangements for supporting children with medical conditions. The Department of Education have produced statutory guidance [‘Supporting Students with Medical Conditions](https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3)’ and we will have regard to this guidance when meeting this requirement.

Where children have a disability, the requirements of the Equality Act 2010 will apply. Where children have an identified special need, the SEND Code of Practice will also apply.

The United Learning Trust is committed to ensuring that the necessary provision is made for every student within their schools’ communities. The Trust celebrates the inclusive nature of their schools and strives to meet the needs of all students including those with medical needs and conditions. All children have a right to access the full curriculum, adapted to their medical needs and to receive the on-going support, medicines or care that they require at school to help them manage their condition and keep them well.

Chilmington Green School endeavours to build relationships with healthcare professionals and other agencies in order to support all students with medical conditions effectively. Chilmington Green School endeavours to ensure that children with medical conditions are properly supported so that they have full access to education, including school trips and physical education. We recognise that medical conditions may impact social and emotional development as well as having educational implications. Chilmington Green School will ensure that all medical information will be treated confidentially by the Principal and staff. All staff have a duty of care to follow and co-operate with the requirements of this policy. All administration of medicines is arranged and managed in accordance with the Supporting Students with Medical Needs policy.

**Aims and Objectives**

**Aim**

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

**Objectives**

* To establish a positive relationship with parents and carers, so that the needs of the child can be fully met
* To work in close partnership with health care professionals, staff, parents and students to meet the needs of each child
* To ensure any social and emotional needs are met for children with medical conditions
* To minimise the impact of any medical condition on a child’s educational achievement
* To ensure that an Individual Health Care Plan is in place for each child with a serious medical condition and for some children who may be disabled or have special educational needs, that their Education, Health and Care Plan is managed effectively
* To ensure as little disruption to our students’ education as possible
* To develop staff knowledge and training in all areas necessary for our students
* To ensure safe storage and administration of agreed medication
* To provide a fully inclusive school.

**Roles and Responsibilities**

**The Governing Body**

* The overall implementation of the Supporting Students with Medical Conditions Policy and procedures of Chilmington Green School.
* Ensuring that the Supporting Students with Medical Conditions Policy, as written, does not discriminate on any grounds including, but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation.
* Handling complaints regarding this policy as outlined in the school’s Complaints Policy.
* Ensuring that all students with medical conditions are able to participate fully in all aspects of school life.
* Ensuring that relevant training provided by specialists is delivered to staff members who take on responsibility to support children with medical conditions.
* Guaranteeing that information and teaching support materials regarding supporting students with medical conditions are available to members of staff with responsibilities under this policy.
* Monitoring written records of any and all medicines administered to individual students and across the school population.
* Ensuring the level of insurance in place reflects the level of risk.

**The Principal**

* The day-to-day implementation and management of the Supporting Students with Medical Conditions Policy and procedures of Chilmington Green School.
* Ensuring the policy is developed effectively with partner agencies.
* Making staff aware of this policy.
* Ensure that all supply staff are aware of the policy and are briefed on individual student needs where appropriate
* Liaising with healthcare professionals regarding the training required for staff.
* Making staff who need to know aware of a child’s medical condition.
* Developing Individual Healthcare Plans (IHCPs) are in place for students with a serious medical condition who do not have an Education and Health Care Plan (EHCP). General health information is recorded on Arbor, the school IT system, with more detailed plans for those that need it included in an IHCP or EHCP.
* Ensuring that there are sufficient staff who have agreed to have supporting medical conditions as part of their job description and contract.
* Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHCPs in normal, contingency and emergency situations.
* If necessary, facilitating the recruitment of a member of staff for the purpose of delivering the promises made in this policy.
* Ensuring the correct level of insurance is in place for teachers who support students in line with this policy.
* Contacting the school nursing service in the case of any child who has a medical condition.
* Ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place using students’ individual healthcare plans.
* Ensure student confidentiality.
* Assess the training and development needs of staff and arrange for them to be met.
* Ensure all 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.

**SENCO**

* Contribute to the school’s medical condition policy.
* Know which students have a medical condition and which have special educational needs because of their condition.
* Ensure teachers make the necessary recommendations to SENCO if they feel a student needs special consideration or access arrangements in exams.
* Liaise with student services and first aiders in order to ensure that all staff are aware of any children who have been identified as having a medical condition which requires support.
* Provide support for staff on implementing an individual healthcare plan and advise on how to access training where this is required.

**Staff Members**

* Taking appropriate steps to support children with medical conditions.
* Where necessary, making reasonable adjustments to include students with medical conditions into lessons.
* Administering medication if they have agreed to undertake that responsibility.
* Undertaking training to achieve the necessary competency for supporting students with medical conditions if they have agreed to undertake that responsibility.
* Familiarising themselves with procedures detailing how to respond when they become aware that a student with a medical condition needs help.
* Fully aware of who is a named staff member responsible for administering injections.
* Know which students in their care have a medical condition and be familiar with the content of the student’s healthcare plan.
* Allow all students to have immediate access to their emergency medication.
* Ensure students who carry their medication with them have it when they go on a school visit or out of the classroom.
* Ensure all students with medical conditions are not excluded unnecessarily from activities they wish to take part in.

**There is no legal duty which requires staff members to administer medication. This is a voluntary role.**

**Teaching staff**

* Enable students who have been unwell catch up on missed schoolwork.
* Be aware that medical conditions can affect a student’s learning and provide extra help when students need it.
* Use opportunities such as PSHE and other areas of the curriculum to raise student awareness about medical conditions.

**Parents/Carers/Guardians**

* Parents have prime responsibility for their child’s health and should provide the school with up to date information about their child’s medical conditions, treatment and/or any special care needed.
* Completing a parental agreement for school to administer medicine form before bringing medication into school.
* Providing the school with the medication their child requires and keeping it up to date.
* Collecting any leftover medicine at the end of the course or year.
* Discussing medications with their child/children prior to requesting that a staff member administers the medication.
* If their child has a more complex medical condition, they should work with the school or health professionals to develop an individual healthcare plan, which will

include an agreement on the role of the school in managing any medical needs and potential emergencies.

* It is the parent/carers responsibility to make sure that their child is well enough to attend school.
* Ensure their child catches up on any schoolwork they have missed.
* Ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional.

**The Student**

* Students are often best placed to provide information about how their condition affects them.
* Students should be fully involved in discussions about their medical needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan.
* Students who are competent will be encouraged to take responsibility for managing their own medicines and procedures.
* Where possible, students will be allowed to carry their own medicines and devices. Where this is not possible, their medicines will be located in an easily accessible location.
* If students refuse to take medication or to carry out a necessary procedure, parents will be informed so that alternative options can be explored.
* Where appropriate, students will be encouraged to take their own medication under the supervision of a first aider.

**Other Students**

* Treat other students with and without a medical condition equally.
* Let a member of staff know if another student is feeling unwell.
* Treat all medication with respect.
* Ensure a member of staff is called in an emergency situation.

**Local Authorities**

* Local authorities and clinical commissioning groups (CCGs) must make joint commissioning arrangements for education, health and care provision for children and young people with SEN or disabilities (Section 26 of the Children and Families Act 2014).
* Local authorities should provide support, advice, and guidance, including suitable training for school staff, to ensure that the support specified within individual healthcare plans can be delivered effectively.
* Local authorities should work with schools to support students with medical conditions to attend full-time.
* Where students would not receive a suitable education in a mainstream school because of their health needs, the local authority has a duty to make other arrangements.
* Statutory guidance for local authorities sets out that they should be ready to make arrangements under this duty when it is clear that a child will be away from school for 15 days or more because of health needs (whether consecutive or cumulative across the school year).

**Procedure when notification is received that a student has a medical condition**

* The SENCO will liaise with relevant individuals, including as appropriate parents, the individual student, health professionals and other agencies to decide on the support to be provided to the child.
* Where appropriate, an Individual Healthcare Plan will be drawn up.

**Individual Health Care Plans**

* An Individual Healthcare Plan will be written for students with a medical condition that is long term and complex.
* An Individual Healthcare Plan is a document that sets out the medical needs of a child, what support is needed within the school day and details actions that need to be taken within an emergency situation. They provide clarity about what needs to be done, when and by whom. The level of detail within the plans will depend on the complexity of the child’s condition and the degree of support needed. This is important because different children with the same health condition may require very different support.
* Individual healthcare plans may be initiated by a member of school staff or another healthcare professional involved in providing care to the child. Plans must be drawn up with input from such professionals e.g., a specialist nurse, who will be able to determine the level of detail needed in consultation with the school, the child and their parents.
* Plans should be reviewed at least annually or earlier if the child’s needs change. They should be developed in the context of assessing and managing risks to the child’s education, health and social well-being and to minimise disruption. Where the child has a special educational need, the individual healthcare plan should be linked to the child’s statement or EHC plan where they have one.
* Parents will receive a copy of the Health Care Plan with the originals kept by the School. Medical notices, including information on symptoms and treatment are placed in the medical room, together with details of what to do in an emergency.
* Where a child has SEN but does not have a Statement or Education Healthcare Plan, their special educational needs will be mentioned in their Individual Healthcare Plan.
* Healthcare Plans are used by Chilmington Green School to:
	+ Inform the appropriate staff and supply teachers about the individual needs of a student with a medical condition in their care.
	+ Remind students with medical conditions to take their medication when they need to and, if appropriate, remind them to keep their emergency medication with them at all times.
	+ Identify common or important individual triggers for students with medical conditions at school that bring on symptoms and can cause emergencies.
	+ Ensure Chilmington Green School’s local emergency care services have a timely and accurate summary of a student’s current medical management and healthcare in the event of an emergency.

**Medicines**

* Where possible, it is preferable for medicines to be prescribed in frequencies that allow the student to take them outside of school hours.
* If this is not possible, the parents/carers of the child must complete and sign a ‘**Parental Agreement for a School to Store Medicines**’ form, prior to staff members giving out any medication.
* School will only retain **prescription medication** – Medicines **must** be in date, labelled, and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered. Only the required amount of medication for each day should be brought to the office. (If the medication is liquid, it is understood that this will not be possible).
* Where a student requires painkillers, e.g., Paracetamol, the student should keep a day’s supply on them to administer themselves as instructed by their parent/carer. **The school will not keep painkillers for a student.** Should a student be unable to keep this medication on them, parents/carers will be called to provide the medication if required during the school day.
* Where a student is prescribed medication by a medical professional without their parents’/carers’ knowledge, every effort will be made to encourage the student to involve their parents while respecting their right to confidentiality.
* Controlled drugs may only be taken on school premises by the individual to whom they have been prescribed. Passing such drugs to others is an offence which will be dealt with under our Behaviour Policy.
* Medications will be stored in a locked cabinet in reception and students should be made aware they need to report to reception.
* Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenalin pens should be always readily available to students.
* Students with asthma are encouraged to carry their inhalers with them. However, a spare inhaler may also be kept in the school reception/medical room. Children with

Diabetes are encouraged to keep medication close to hand. They are able to take high energy snacks when needed and at any point in the day.

* Written records will be kept of when a child comes to collect their medicine.
* Students will never be prevented from accessing their medication.
* Sharps boxes should always be used for the disposal of needles and other sharps.
* A defibrillator is available for use by staff. This is located in the Business Manager’s Office.
* Chilmington Green School cannot be held responsible for side effects that occur when medication is taken as agreed with parents.

**Educational Visits**

* We actively support students with medical conditions to participate in school trips and visits, or in sporting activities but are mindful of how a child’s medical condition will impact on their participation. Arrangements will always be made to ensure students with medical needs are included in such activities where possible (sometimes it will be out of the school’s control if a location off-site or hired vehicle is accessible or has staff trained and willing to work with particular medical conditions) unless evidence from a clinician such as a GP or consultant states that this is not possible.
* A risk assessment will be completed at the planning stage to take account of any steps needed to ensure that students with medical conditions are included. This will require consultation with parents and students and advice from the school nurse or other healthcare professional that are responsible for ensuring that students can participate. A copy of the child’s health care plan should be taken with the child on an Educational Visit.
* Medication such as inhalers and epi-pens should be taken on all school trips and given to the responsible adult that works alongside the student throughout the day. A First Aid kit must be taken on all school trips. The Trip Leader must ensure that all adults have the telephone number of the school in case of an emergency.
* The party leader must ensure that all necessary medicines are taken on the trip. This will mean checking the medical requirements of the group and ensuring that any child with a specific medical condition has access to prescribed medicine whilst on the trip.

**Staff Training**

* The school provides regular whole-school awareness training to ensure that all staff are aware of this policy and their role in implementing the policy. This is also included in induction arrangements for new staff.
* Any member of staff providing support to a student with medical needs must have received suitable training. It is the responsibility of the Principal to lead on identifying with health specialists the type and level of training required and putting this in place.
* Training must be sufficient to ensure that staff are competent and have confidence in their ability to support students with medical conditions, and to fulfil the requirements as set out in individual healthcare plans. They will need to understand the specific medical conditions they are being asked to deal with, their implications and preventative measures.
* Staff should not give prescription medicines or undertake health care procedures without appropriate training (updated to reflect individual healthcare plans at all times) from a healthcare professional. A first-aid certificate does not constitute appropriate training in supporting children with medical conditions.
* It is important that all staff are aware of the school’s policy for supporting students with medical conditions and their role in implementing that policy. The school ensures that training on conditions which they know to be common within their school is provided (asthma, epi pen, sickle cell, diabetes for example).
* Parents can be asked for their views and may be able to support school staff by explaining how their child’s needs can be met but they should provide specific advice, not be the sole trainer.

**Emergency Procedures**

* Where an Individual Healthcare Plan (IHCP) is in place, it should detail
	+ What constitutes an emergency
	+ What to do in an emergency
	+ Ensure all members of staff of aware of emergency symptoms and procedures
	+ Other children in school should know to inform a teacher if they think help is needed
* If a student needs to be taken to hospital, a member of staff will remain with the child until a parent arrives.

**ACTION IN EMERGENCIES**

***A copy of this information will be displayed in reception.***

Request an ambulance – dial 999 and be ready with the information below. Speak slowly and clearly and be ready to repeat information if asked.

1. The school’s telephone number - TBC
2. Your name
3. The school location:

Chilmington Green School

Jemmett Road

Ashford

TN23 4QE

1. Provide the exact location of the patient within the school.
2. Provide the name of the child and a brief description of their symptoms.
3. Inform ambulance control of the best entrance to use and state that the crew will be met and taken to the patient.

Ask office staff to contact premises to open relevant gates for entry.

Contact the parents to inform them of the situation.

A member of staff should stay with the student until the parent/carer arrives. If a parent/carer does not arrive before the student is transported to hospital, a member of staff should accompany the child in the ambulance.

**Other Considerations**

**Defibrillators**

There is a defibrillator for use in school, located in the Business Manager’s Office. A member of school staff, visitors or students may be sent to obtain the defibrillator in an emergency.

**Emergency Inhalers**

From 1st October 2014 the Human Medicines (Amendment) (No. 2) Regulations 2014 will allow schools to buy salbutamol inhalers, without a prescription, for use in emergencies.

Schools are not required to hold an inhaler – this is a discretionary power enabling schools to do this if they wish. The protocol for the use of the emergency inhalers is based on - [*Guidance on the use of emergency salbutamol in schools (DoH, 2015)*](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/416468/emergency_inhalers_in_schools.pdf). The emergency salbutamol inhaler should only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication.

The inhaler can be used if the student’s prescribed inhaler is not available (for example, because it is broken, or empty).

**EQUALITY IMPACT STATEMENT**

We will do all we can to ensure that this policy does not discriminate, directly or indirectly. This will include, but not necessarily be limited to race, gender, sexual orientation, disability, ethnicity, religion, cultural beliefs, and pregnancy/maternity.

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| Principal | Jon Rutland |
| SENCO | Lydia McCorriston |
| Chair of Governors | Michael Hall |
| Student Reception | TBC |
| First Aiders | Jon RutlandRebecca WoodLydia McCorristonAdditional First Aid Qualified Staff TBC |

**Complaints**

Please refer to the school’s complaints policy.

**Relevant Documents**

Supporting students with medical conditions – DfE – August 2017

[https://www.gov.uk/government/publications/supporting-students-at-school-with-medical-conditions--3](https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3)

Section 100 – Children and Families Act 2014

<http://www.legislation.gov.uk/ukpga/2014/6/section/100/enacted>

The Equality Act 2010

<https://www.gov.uk/guidance/equality-act-2010-guidance>

The SEND Code of Practice – 2015

<https://www.gov.uk/government/publications/send-code-of-practice-0-to-25>

Health Conditions in Schools Alliance – this site has Individual Healthcare Plan information for specific conditions <http://medicalconditionsatschool.org.uk/>

**Annex 1: Parental Agreement for School to Store Medicines**

Chilmington Green School does not allow staff to administer medication to students; the school will only keep medicines on the premises for students to self-administer.  Do not return form or medication unless your child is able to self-administer their medication.

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| --- | --- |
| Name of child  |   |
| Date of birth  |   |   |   |   |
| 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 needs to know about?  |   |
| 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  | Harriett Ingman |

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school storing medicine in accordance with the school policy. I will inform the school 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 2: 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 student’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)*

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Plan developed with

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Staff training needed/undertaken – who, what, when

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Form copied to

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**Annex 3: record of medicine administered to an individual child**

|  |  |
| --- | --- |
| 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

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date |  |  |  |  |  |  |  |  |  |
| Time given |  |  |  |
| Dose given |  |  |  |
| Name of member of staff |  |  |  |
| Staff initials |  |  |  |
|  |  |  |  |
| Date |  |  |  |  |  |  |  |  |  |
| Time given |  |  |  |
| Dose given |  |  |  |
| Name of member of staff |  |  |  |
| Staff initials |  |  |  |

**C: Record of medicine administered to an individual child (Continued)**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date |  |  |  |  |  |  |  |  |  |
| Time given |  |  |  |
| Dose given |  |  |  |
| Name of member of staff |  |  |  |
| Staff initials |  |  |  |
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| Date |  |  |  |  |  |  |  |  |  |
| Time given |  |  |  |
| Dose given |  |  |  |
| Name of member of staff |  |  |  |
| Staff initials |  |  |  |
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| Date |  |  |  |  |  |  |  |  |  |
| Time given |  |  |  |
| Dose given |  |  |  |
| Name of member of staff |  |  |  |
| Staff initials |  |  |  |
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| Date |  |  |  |  |  |  |  |  |  |
| Time given |  |  |  |
| Dose given |  |  |  |
| Name of member of staff |  |  |  |
| Staff initials |  |  |  |

**Annex 4: Record of medicine administered to all children**

**Name of school/setting:**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Date | Child’s Name | Time | Name of Medicine | Dose Given | AnyReactions | Signature of staff | Print Name |
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# Annex 5: staff training record – administration of medicines

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| --- | --- |
| 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

**Annex 6: Model letter inviting parents to contribute to individual healthcare plan development**

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

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

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the student needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, students, 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 healthcare 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 student support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely