

Medical Conditions Policy



Review Date

February 2024

Ratified

March 2024

Next Review Date

February 2026

Responsible Directorate

Safeguarding

Our Trust

*These four critical questions make it clear who we are and what we do.
We ask ourselves these questions to guide our work and our improvement.*

Why do we exist?

To **transform life chances** by achieving the highest possible standards and preparing all our students to lead successful lives.

How do we behave?

- **Hard work**
We are determined to see things through to the end and are resilient when faced with challenges.
- **Integrity**
We do the right thing because it is the right thing to do.
- **Teamwork**
We work together to help everyone succeed.

What do we do?

- We educate, safeguard and champion all our learners.
- We set high standards for ourselves and our learners.
- We build the powerful knowledge and cultural capital which stimulate social mobility and lifelong learning.

How will we succeed?

1. Aligned autonomy
2. Keeping it simple
3. Talent development

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1 | Principles and Definitions

- 1.1 Academy Transformation Trust has a legal duty to make arrangements to support pupils at their academies with medical conditions. The board of Academy Transformation Trust has delegated this responsibility to their academies.
- 1.2 This academy has adopted this policy to set out the arrangements it has put in place for its pupils with medical conditions.
- 1.3 Children and young people with medical conditions are entitled to a full education. The academy is committed to ensuring that pupils with medical conditions 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. We want all pupils, as far as possible, to access and enjoy the same opportunities at school as any other child. This will include actively supporting pupils with medical conditions to participate in school trips/visits and/or in sporting activities.
- 1.4 For the purposes of this policy, a medical condition is any illness or disability which a pupil has. It can be:
- Physical or mental
 - A single episode or recurrent
 - Short-term or long-term
 - Relatively straightforward (e.g. the pupil can manage the condition themselves without support or monitoring) or complex (requiring on-going support, medicines or care whilst at school to help the pupil manage their condition and keep them well)
 - Involving medication or medical equipment
 - Affecting participation in school activities or limiting access to education
- 1.5 Medical conditions may change over time, in ways that cannot always be predicted.

2 | Policy Implementation

- 2.1 The person with overall responsibility for the successful administering and implementation of this policy is the Principal.
- 2.2 The Principal has overall responsibility for ensuring:

- That sufficient staff are suitably trained to meet the known medical conditions of pupils at the academy
- All relevant staff are made aware of the pupil's medical condition and supply teachers are properly briefed
- Cover arrangements are in place to cover staff absences/turnover to ensure that someone is always available and on site
- Risk assessments for school visits, holidays and other school activities outside of the normal timetable are completed
- Individual healthcare plans are prepared where appropriate and monitored

3 | Notification of Medical Conditions

3.1 Ordinarily, the pupil's parent/carer will notify the academy that their child has a medical condition. Parents/carers should ideally provide this information in writing addressed to the Principal. However, they may sometimes pass this information on to a class teacher or another member of staff. Any staff member receiving notification that a pupil has a medical condition should notify the Principal as soon as practicable.

3.2 A pupil themselves may disclose that they have a medical condition. The staff member to whom the disclosure is made should notify the Principal as soon as practicable.

3.3 Notification may also be received direct from the pupil's healthcare provider or from a school from which a child may be joining the academy. The academy may also instigate the procedure themselves where the pupil is returning to the academy after a long-term absence.

4 | Procedure Following Notification

4.1 Except in exceptional circumstances where the pupil does not wish their parent/carer to know about their medical condition, the pupil's parents/carers will be contacted by the Principal, or someone designated by them, as soon as practicable to discuss what, if any, arrangements need to be put into place to support the pupil. Every effort will be made to encourage the child to involve their parents while respecting their right to confidentiality.

4.2 Unless the medical condition is short-term and relatively straightforward (e.g. the pupil can manage the condition themselves without any support or monitoring), a meeting will normally be held to:

- Discuss the pupil's medical support needs
- Identify a member of school staff who will provide support to the pupil where appropriate
- Determine whether an individual healthcare plan (IHP) is needed and, if so, what information it should contain

4.3 Where possible, the pupil will be enabled and encouraged to attend the meeting and speak on his/her own behalf, considering the pupil's age and understanding. Where this is not appropriate, the pupil will be given the opportunity to feed in his/her views by other means, such as setting their views out in writing.

4.4 The healthcare professional(s) with responsibility for the pupil may be invited to the meeting or be asked to prepare written evidence about the pupil's medical condition for consideration. Where possible, their advice will be sought on the need for, and the contents of, an IHP.

4.5 In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, the Principal will exercise his/ her professional judgement based on the available evidence to determine whether an IHP is needed and/or what support to provide.

4.6 For children joining the academy at the start of the school year, any support arrangements will be made in time for the start of the school term where possible. In other cases, such as a new diagnosis or a child moving to the academy mid-term, every effort will be made to ensure that any support arrangements are put in place within two weeks.

4.7 In line with our safeguarding duties, the academy will ensure that pupil's health is not put at unnecessary risk from, for example, infectious diseases. The academy will not accept a pupil into the school at times where it will be detrimental to the health of that child or others.

5 | Pupils With Health Needs Who Cannot Attend

5.1 Where a pupil cannot attend school because of health needs, unless it is evident at the outset that the pupil will be absent for 15 or more days, the academy will initially follow the usual process around attendance and mark the pupil as ill for the purposes of the register.

5.2 The academy will provide support to pupils who are absent from school because of illness for a period shorter than 15 days. This may include providing pupils with relevant information, curriculum materials and resources.

- 5.3 In accordance with the Department for Education’s statutory guidance¹, where a pupil is unable to attend school for more than 15 days due to illness:
- The local authority should be ready to take responsibility for arranging suitable full-time education for that pupil; and
 - The local authority should arrange for this provision to be in place as soon as it is clear that the absence will last for more than 15 days.
- 5.4 The academy will work collaboratively with the local authority, relevant medical professionals, relevant education provider, parents and, where appropriate, the pupil, to identify and meet the pupil’s educational needs throughout the period of absence and to remain in touch with the pupil throughout.
- 5.5 When a pupil is considered well enough to return to full time education at the academy, the Principal or someone designated by them will develop a reintegration plan in partnership with the appropriate individuals/organisations.

6 | Individual Healthcare Plans (IHPs)

- 6.1 Where it is decided that an IHP should be developed for the pupil, this shall be developed in partnership between the academy, the pupil’s parents/carers, the pupil and the relevant healthcare professional(s) who can best advise on the particular needs of the pupil. This may include the school nursing service. The local authority will also be asked to contribute where the pupil accesses home-to-school transport to ensure that the authority’s own transport healthcare plans are consistent with the IHP.
- 6.2 The aim of the IHP is to capture the steps which the academy needs to take to help the pupil manage their condition and overcome any potential barriers to getting the most from their education. It will be developed with the pupil’s best interests in mind. In preparing the IHP the academy will need to assess and manage the risk to the pupil’s education, health and social well-being and minimise disruption.
- 6.3 IHPs may include:
- Details of the medical condition, its triggers, signs, symptoms and treatments
 - The pupil’s resulting needs, including medication (dose, side-effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues e.g. crowded corridors or travel time between lessons

¹ *Ensuring a good education for pupils who cannot attend school because of health needs (January 2013)*

- 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 or counselling sessions
- The level of support needed (some children will be able to take responsibility for their own health needs), including in emergencies; if a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil’s medical condition from a healthcare professional and cover arrangements for when they are unavailable
- Who in the academy needs to be aware of the pupil’s condition and the support required
- Arrangements for written permission from parents/carers and the Principal for medication to be administered by a member of staff, or self-administered by the pupil during school hours
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments
- Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil’s condition
- What to do in an emergency, including whom to contact, and contingency arrangements; some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their IHP

6.4 The IHP will also 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. If a pupil (regardless of whether they have an IHP) needs to be taken to hospital, staff will stay with the pupil until the parent/carer arrives, or accompany a pupil taken to hospital by ambulance.

6.5 Except in exceptional circumstances, or where the healthcare provider deems that they are better placed to do so, the academy will take the lead in writing the plan and ensuring that it is finalised and implemented.

6.6 Where a pupil is returning to the academy following a period of hospital education or alternative provision (including home tuition), the academy will work with the local authority and education provider to ensure that the IHP identifies the support the pupil will need to reintegrate effectively.

6.7 Where the pupil has a special educational need identified in an Education Health and Care Plan (EHCP), the IHP will be linked to or become part of that EHCP.

7 | Reviewing Individual Healthcare Plans

- 7.1 Every IHP shall be reviewed at least annually. The Principal (or someone designated by them) shall, as soon as practicable, contact the pupil's parents/carers and the relevant healthcare provider to ascertain whether the current IHP is still needed or needs to be changed. If the academy receives notification that the pupil's needs have changed, a review of the IHP will be undertaken as soon as practicable.
- 7.2 Where practicable, staff who provide support to the pupil with the medical condition shall be included in any meetings where the pupil's condition is discussed.

8 | Staff Training

- 8.1 The Principal is responsible for:
- Ensuring that all staff (including new staff) are aware of this policy for supporting pupils with medical conditions and understand their role in its implementation
 - Working with relevant healthcare professionals and other external agencies to identify staff training requirements and commission training required
 - Ensuring that there are sufficient numbers of trained staff available to implement the policy and deliver against all IHPs, including in contingency and emergency situations
- 8.2 In addition, all members of school staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.
- 8.3 The academy has in place appropriate levels of insurance regarding staff providing support to pupils with medical conditions, including the administration of medication. Copies of the academy's insurance policies can be made accessible to staff as required.

9 | Administering Medication

- 9.1 Written permission from parents/carers and the Principal is required for prescription or non-prescription medication to be administered by a member of staff or self-administered by the

pupil during school hours. Medicines will only be administered at the academy when it would be detrimental to a pupil's health or school attendance not to do so. Where clinically possible, medicines should be administered in dose frequencies which enable them to be taken outside of school hours.

- 9.2 If a pupil requires medicines or medical devices, such as asthma inhalers, blood glucose testing meters or adrenaline pens, in school it is vital that the parent/carer advises the academy accordingly, so that the process for storing and administering medication can be properly discussed.
- 9.3 The academy will only accept medicines that are in-date, labelled, provided in the original container 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 inside an insulin pen or a pump, rather than its original container.
- 9.4 The medication must be accompanied by a complete written instruction form signed by the pupil's parent/carer. The academy will not make changes to dosages labelled on the medicine or device on parental instructions.
- 9.5 The pupil and staff supporting the pupil with their medical condition should know where their medicines are at all times and be able to access them when needed. The most appropriate method for storing medicines and medical devices will be discussed with the pupil's parent/carer but the academy will ultimately decide the approach to be taken.
- 9.6 Wherever possible, pupils will be allowed to carry their own medicines and relevant devices or be able to access their medicines for self-medication quickly and easily. Where it is appropriate to do so, pupils will be encouraged to administer their own medication, under staff supervision if necessary. Staff administering medication should do so in accordance with the labelled instructions. Staff who volunteer to assist in the administration of medication will receive appropriate training and guidance before administering medication.
- 9.7 The academy will keep a record of all medicines administered to individual pupils, stating what, how and how much was administered, when and by whom. Any side effects of the medication will be noted.
- 9.8 If a pupil refuses to take their medication, staff will not force them to do so, and will inform the parent/carer of the refusal as a matter of urgency. If a refusal to take medicines results in an emergency, the school's emergency procedures will be followed.
- 9.9 It is the parent/carers' responsibility to renew the medication when supplies are running low and to ensure that the medication supplied is within its expiry date.
- 9.10 It is the responsibility of parents/carers to notify the academy in writing if the pupil's need for medication has ceased. When no longer required, medicines will be returned to the

parent/carer to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles.

10 | Unacceptable Practice

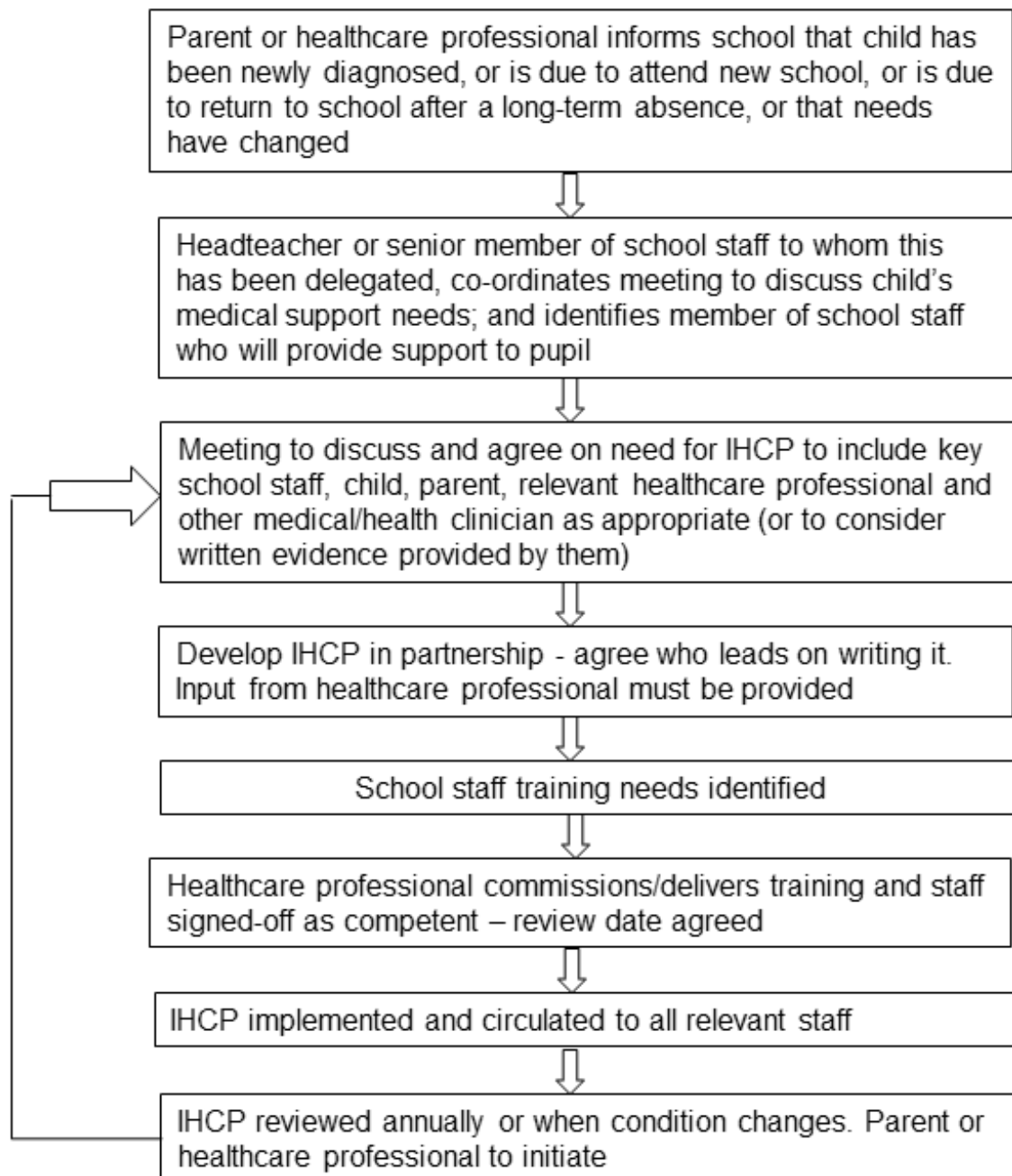
- 10.1 Although the Principal and other school staff should use their discretion and judge each case on its merits with reference to the pupil's IHP, it will not generally be acceptable practice to:
- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary
 - Assume that every pupil with the same condition requires the same treatment
 - Ignore the views of the pupil or their parents/carers or ignore medical evidence or opinion (although this may be challenged)
 - Send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHP
 - If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
 - Penalise children for their attendance record if their absences are related to their medical condition e.g. hospital appointments
 - Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
 - Require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues; no parent/carer should have to give up working because the academy 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/carers to accompany the child

11 | Complaints

- 11.1 Complaints regarding this policy or the support provided to pupils with medical conditions should be raised under the academy's usual complaints procedure.

Appendix 1- Process for Developing IHPs

Supporting pupils at school with medical conditions.



Appendix 2- Supporting Attendance

Supporting the attendance of pupils with additional health needs.

1. Definitions

Children who are unable to attend school because of their medical needs may include those with (list not exhaustive):

- Physical health issues
- Physical injuries
- Mental health problems, including anxiety issues
- Emotional difficulties or school refusal
- Progressive conditions
- Terminal illnesses
- Chronic illnesses.

Children who are unable to attend mainstream education for health reasons may attend any of the following:

- **Hospital school:** a special school within a hospital setting where education is provided to give continuity whilst the child is receiving treatment.
- **Home tuition:** many LAs have home tuition services that act as a communication channel between schools and pupils on occasions where pupils are too ill to attend school and are receiving specialist medical treatment.
- **Medical PRUs:** these are LA establishments that provide education for children unable to attend their registered school due to their medical needs.

2. Roles and Responsibilities

The governing board is responsible for:

- Ensuring arrangements for pupils who cannot attend school because of their medical needs are in place and are effectively implemented
- Ensuring robust systems are in place for dealing with health emergencies and critical incidents, for both on- and off-site activities.

The Principal is responsible for:

- Ensuring the termly (or more frequent) review of the arrangements made for pupils who cannot attend school due to their medical needs
- Ensuring the roles and responsibilities of those involved in the arrangements to support the needs of pupils are clear and understood by all

- Ensuring staff with responsibility for supporting pupils with additional health needs are appropriately trained
- Working with the governing committee to ensure compliance with the relevant statutory duties when supporting pupils with additional health needs
- Working collaboratively with parents and other professionals to develop arrangements to meet the best interests of pupils
- Ensuring the arrangements put in place to meet pupils' health needs are fully understood by all those involved and acted upon
- Appointing a named member of staff who is responsible for pupils with additional health needs and liaises with parents, pupils, the LA, key workers, and others involved in the pupil's care.

The SENDCO is responsible for:

- Ensuring the support put in place focusses on and meets the needs of individual pupils.
- Providing teachers who support pupils with additional health needs with suitable information relating to a pupil's health condition and the possible effect the condition and/or medication taken has on the pupil.
- Notifying the LA when a pupil is likely to be away from the school for a significant period due to their health needs.
- Dealing with pupils and their families who are unable to attend school because of their health needs
- Actively monitoring pupil progress and reintegration into school
- Supplying pupils' education providers with information about pupils' capabilities, progress, and outcomes
- Liaising with the LA, Principal, education providers and parents to determine pupils' programmes of study whilst they are absent from school
- Keeping pupils informed about school events and encouraging communication with their peers
- Providing a link between pupils and their parents, and the LA.

Teachers and support staff are responsible for:

- Understanding confidentiality in respect of pupils' health needs.
- Designing lessons and activities in a way that allows those with additional health needs to participate fully and ensuring pupils are not excluded from activities that they wish to take part in without a clear evidence-based reason.
- Understanding their role in supporting pupils with additional health needs and ensuring they attend the required training.
- Ensuring they are aware of the needs of their pupils through the appropriate and lawful sharing of individual pupils' health needs.
- Ensuring they are aware of the signs, symptoms and triggers of common life-threatening medical conditions and know what to do in an emergency.
- Keeping parents informed of how their child's health needs are affecting them whilst in school.

Parents are expected to:

- Ensure the regular and punctual attendance of their child at the school where possible.
- Work in partnership with the school to ensure the best possible outcomes for their child.
- Notify the school of the reason for any of their child's absences without delay.

- Provide the school with sufficient and up-to-date information about their child's medical needs.
- Attend meetings to discuss how support for their child should be planned.

3. Managing Absence

Parents are required to contact the school on the first day their child is unable to attend due to illness.

Absences due to illness will be authorised unless the school has genuine cause for concern about the authenticity of the illness.

We will provide support to pupils who are absent from school because of illness for a period of less than 15 school days by liaising with the pupil's parents to arrange schoolwork, as soon as the pupil is able to cope with it, or part-time education at school. We will give due consideration to which aspects of the curriculum are prioritised in consultation with the pupil, their parents, and relevant members of staff.

For periods of absence that are expected to last for 15 or more school days, either in one absence or over the course of a school year, the named member of staff with responsibility for pupils with additional health needs will notify the LA, who will take responsibility for the pupil and their education.

Where absences are anticipated or known in advance, the school will liaise with the LA to enable education provision to be provided from the start of the pupil's absence.

For hospital admissions, the appointed named member of staff will liaise with the LA regarding the programme that should be followed while the pupil is in hospital.

The LA will set up a personal education plan (PEP) for the pupil which will allow the school, the LA, and the provider of the pupil's education to work together.

We will monitor pupil attendance and mark registers to ensure it is clear whether a pupil is, or should be, receiving education other than at school.

We will only remove a pupil who is unable to attend school because of additional health needs from the school roll where:

- The pupil has been certified as unlikely to be in a fit state of health to attend school, before ceasing to be of compulsory school age; and
- Neither the pupil nor their parent has indicated to the school the intention to continue to attend the school, after ceasing to be of compulsory school age.

A pupil unable to attend school because of their health needs will not be removed from the school register without parental consent and certification from the school's medical officer, even if the LA has become responsible for the pupil's education.

4. Support for Pupils

Where a pupil has a complex or long-term health issue, we will discuss the pupil's needs and how these may be best met with the LA, relevant medical professionals, parents and, where appropriate, the pupil.

The LA expects the academy to support pupils with additional health needs to attend full-time education wherever possible, or for the academy to make reasonable adjustments to pupils' programmes of study where medical evidence supports the need for those adjustments.

We will make reasonable adjustments under pupils' Individual Health Plan (IHP).

Pupils admitted to hospital will receive education as determined appropriate by the medical professionals and hospital tuition team at the hospital concerned.

During a period of absence, we will work with the provider of the pupil's education to establish and maintain regular communication and effective outcomes.

Whilst a pupil is away from school, we will work with the LA to ensure the pupil can successfully remain in touch with their school using some of the following methods:

- School newsletters
- Safer School App
- Emails
- Invitations to school events
- Cards and letters from peers
- Weekly staying in touch calls

Where appropriate, we will provide the pupil's education provider with relevant information, curriculum materials and resources.

To help ensure a pupil with additional health needs can attend school following an extended period of absence, the following adaptations will be considered:

- A personalised or part-time timetable, drafted in consultation with the named staff member
- Access to additional support in school
- Online access to the curriculum from home
- Movement of lessons to more accessible rooms
- Places to rest at school
- Special exam arrangements to manage anxiety or fatigue

5. Reintegration of pupils

When a pupil is considered well enough to return to school, the school will develop a tailored reintegration plan in collaboration with the LA. We will work with the LA when reintegration into school is anticipated to plan for consistent provision during and after the period of education outside school.

As far as possible, the pupil will be able to access the curriculum and materials that they would have used in school. We will consider whether any reasonable adjustments need to be made to provide suitable access to the school and the curriculum for the pupil.

For longer absences, the reintegration plan will be developed near to the pupil's likely date of return, to avoid putting unnecessary pressure on an ill pupil or their parents in the early stages of their absence.

We are aware that some pupils will need gradual reintegration over a long period of time and will always consult with the pupil, their parents and key staff about concerns, medical issues, timing and the preferred pace of return.

The reintegration plan will include:

- The date for planned reintegration, once known.
- Details of regular meetings to discuss reintegration.

- Details of the named member of staff who has responsibility for the pupil.
- Clearly stated responsibilities and the rights of all those involved.
- Details of social contacts, including the involvement of peers and mentors during the transition period.
- A programme of small goals leading up to reintegration.
- Follow-up procedures.

We will ensure a welcoming environment is developed and encourage pupils and staff to be positive and proactive during the reintegration period.

Following reintegration, we will support the LA in seeking feedback from the pupil regarding the effectiveness of the process.

6. Sharing Information

It is essential that all information about pupils with additional health needs is kept up to date.

All colleagues, teachers, TAs, supply, and support staff will be provided with access to relevant information, including high-risk health needs, first aiders and emergency procedures, via the academies preferred communication of this.

Parents will be made aware of their own rights and responsibilities regarding confidentiality and information sharing. To help achieve this, we will:

- Ensure this policy and other relevant policies are easily available and accessible.
- Provide the pupil and their parents with a copy of the policy on information sharing.
- Ask parents to sign a consent form which clearly details the organisations and individuals that their child's health information will be shared with, and which methods of sharing will be used.
- Consider how friendship groups and peers may be able to assist pupils with additional health needs.

When a pupil is discharged from hospital or is returning from other education provision, we will ensure the appropriate information is received to allow for a smooth return to the school. The named member of staff will liaise with the hospital or other tuition service as appropriate.

7. Record keeping:

In accordance with the Supporting Pupils with Medical Conditions Policy, written records will be kept of all medicines administered to pupils.

Proper record keeping will protect both staff and pupils and provide evidence that agreed procedures have been followed.

All records will be maintained in a secure environment.

8. Training:

Colleagues will be trained in a timely manner to assist with a pupil's return to school.

Once a pupil's return date has been confirmed, colleagues will be provided with relevant training before the pupil's anticipated return.

Healthcare professionals should be involved in identifying and agreeing with the school the type and level of training required.

Training will be sufficient to ensure staff are confident in their ability to support pupils with additional health needs.

Parents of pupils with additional health needs may provide specific advice but will not be the sole trainer of staff.

9. Examinations and Assessment:

The named member of staff will liaise with the alternative provision provider over planning and examination course requirements where appropriate.

Relevant assessment information will be provided to the alternative provision provider if required.

Awarding bodies may make special arrangements for pupils with permanent or long-term disabilities and learning difficulties, or temporary disabilities and illnesses. Applications for such arrangements will be submitted by the school, or LA if more appropriate, as early as possible.

Appendix 3- DfE Templates



Department
for Education

Templates

Supporting pupils with medical conditions

May 2014

In response to requests from stakeholders during discussions about the development of the statutory guidance for supporting pupils with medical conditions, we have prepared the following templates. They are provided as an aid to schools and their use is entirely voluntary. Schools are free to adapt them as they wish to meet local needs, to design their own templates or to use templates from another source.

Template A: individual healthcare plan

Name of school/setting				
Child's name				
Group/class/form				
Date of birth				
Child's address				
Medical diagnosis or condition				
Date				
Review date				
Family Contact Information				
Name				
Phone no. (work)				
(home)				
(mobile)				
Name				
Relationship to child				
Phone no. (work)				
(home)				
(mobile)				
Clinic/Hospital Contact				
Name				

Phone no.	
G.P.	
Name	
Phone no.	

Who is responsible for providing support in school	
--	--

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

--

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

--

Daily care requirements

--

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

--

Arrangements for school visits/trips 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

Template B: 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 <i>(as described on the container)</i>				
Expiry date				
Dosage and method				
Timing				
Special precautions/other instructions				
Are there any side effects that the school/setting needs to know about?				
Self-administration – y/n				
Procedures to take in an emergency				
NB: Medicines must be in the original container as dispensed by the pharmacy				

Contact Details	
Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff]

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

Signature(s) _____ Date _____

Template C: 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)

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			

Template D: record of medicine administered to all children

Name of school or setting:

Date							
Child's name							
Time							
Name of Medicine							
Dose Given							
Any Reactions							
Signature of Staff							
Print Name							

Template E: staff training record – administration of medicines

Name of school/setting				
Name				
Type of training received				
Date of training completed				
Training provided by				
Profession and title				

I confirm that [name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated [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 _____

Template F: 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 as follows [insert school/setting address]
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. put a completed copy of this form by the phone

Template G: 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 pupils 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 each pupil needs and how this will be provided. Individual healthcare 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 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 pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely

[Name]