# Elm Grove Primary School Supporting Pupils with Medical Conditions



Written by: Jennifer Smyth (Office Manager)

Approval date: May 2025

Frequency of review: 3 yearly

Next review date: May 2028

## **Elm Grove Primary School**

#### Policy for supporting pupils with medical conditions

This policy relates to all staff employed at the school, including management team members, teachers, support staff, mid-day supervisors, clerical and administrative staff, caretaking and cleaning staff.

This policy is written in line with the requirements of:

- Children and Families Act 2014 section 10 Supporting pupils at school with medical conditions: statutory guidance for governing bodies of maintained schools and proprietors of academies in England, DfE Sept 2014 0-25
- SEND Code of Practice, DfE 2015
- Mental Health and behaviour in schools: departmental advice for school staff, DfE June 2014
- Equalities Act 2010 Schools Admissions Code, DfE 1 Feb 2010

This policy should be read in conjunction with the following school policies: SEN and Disability Policy/SEN Information Report, Safeguarding Policy, Health and Safety Policy, Complaints Procedure, Behaviour Policy and Accessibility Plan.

#### **Definitions of medical conditions**

Pupils' medical needs may be broadly summarised as being of two types: **Short-term** affecting their participation at school because they are on a course of medication.

**Long-term** potentially limiting access to education and requiring on-going support, medicines or care while at school to help them to manage their condition and keep them well, including monitoring and intervention in emergency circumstances. It is important that parents feel confident that the school will provide effective support for their child's medical condition and that pupils feel safe.

Additionally, we recognise that some pupils may have medical conditions (e.g. asthma, allergies) that rarely require medication and are unlikely to affect their participation at school. Medication may be kept in school for such circumstances where these conditions may occur (e.g. inhalers kept as a precaution(e.g. inhalers kept as a precaution). In such cases, an Individual Health Care Plan will not always be necessary.

#### Supporting pupils with medical conditions policy

Some children with medical conditions may be considered disabled. Where this is the case governing bodies **must** comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEN) and may have a Statement of Special Educational Needs or an Education, Health and Care Plan (EHCP). Where this is the case this policy should be read in conjunction with the 0-25 SEND Code of Practice and the school's SEN policy / SEN Information Report and the individual healthcare plan will become part of the EHCP.

#### The statutory duty of the governing body

The governing body remains legally responsible and accountable for fulfilling its statutory duty for supporting pupils at school with medical conditions. The governing body of Elm Grove Primary School fulfils this by:

- Ensuring that arrangements are in place to support pupils with medical conditions.
   In doing so we will ensure that such children can access and enjoy the same opportunities at school as any other child
- Taking into account that many medical conditions that require support at school will
  affect quality of life and may be life-threatening. Some will be more obvious than
  others and therefore the focus is on the needs of each individual child and how their
  medical condition impacts on their school life
- Ensuring that the arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions, should show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care. We will ensure that staff are properly trained to provide the support that pupils need.
- Ensuring that no child with a medical condition is denied admission, or prevented from taking up a place in school because arrangements for their medical condition have not been made. However, in line with safeguarding duties, we will ensure that pupils' health is not put at unnecessary risk from, for example, infectious diseases, and reserve the right to refuse admittance to a child at times where it would be detrimental to the health of that child or others to do so
- Ensuring that the arrangements put in place are sufficient to meet our statutory duties and ensure that policies, plans, procedures and systems are properly and effectively implemented
- Developing a policy for supporting pupils with medical conditions that is reviewed regularly and accessible to parents and school staff
- Ensuring that the policy includes details on how the policy will be implemented
  effectively, including a named person who has overall responsibility for policy
  implementation (see section below on policy implementation)
- Ensuring that the policy sets out the procedures to be followed whenever the school is notified that a pupil has a medical condition
- Ensuring that the policy covers the role of individual healthcare plans and who is responsible for their development, in supporting pupils at school with medical conditions (see section below on individual healthcare plans)
- Ensuring that the school policy clearly identifies the roles and responsibilities of all
  those involved in arrangements for supporting pupils at school with medical
  conditions and how they will be supported, how their training needs will be
  assessed and how and by whom training will be commissioned and provided (see
  section below on staff training and support)
- Ensuring that the school policy covers arrangements for children who are competent to manage their own health needs and medicines (see section below on the child's role in managing their own medical needs)
- Ensuring that the policy is clear about the procedures to be followed for managing medicines including the completion of written records (see section below on managing medicines on school premises)
- Ensuring that the policy sets out what should happen in an emergency situation (see section below on emergency procedures)

- Ensuring that the arrangements are clear and unambiguous about the need to support actively pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so (see section on day trips, residential trips and sporting activities)
- Ensure that school-owned asthma inhalers are available for emergency use

#### Considering whether to

- Develop transport healthcare plans in conjunction with the LA for pupils with lifethreatening conditions who use home- to- school transport
- Purchase and train staff in the use of defibrillators
- Ensuring that the policy is explicit about what practice is not acceptable (see section on unacceptable practice);
- Ensuring that the appropriate level of insurance is in place and appropriate to the level of risk (see section on Liability and Indemnity);
- Ensuring that the policy sets out how complaints may be made and will be handled concerning the support to pupils with medical conditions (see section on complaints).

#### **Policy implementation**

Whilst the Governing Body remains legally responsible and accountable, it has conferred the following functions of the implementation of this policy to the staff below: The overall responsibility for the implementation of this policy is given to **Ben Massey**, **Headteacher**. He will also be responsible for ensuring that sufficient staff are suitably trained and will ensure cover arrangements in cases of staff absences or staff turnover to ensure that someone is always available and on-site with an appropriate level of training.

Class teachers will be responsible for briefing supply teachers, preparing risk assessments for school visits and other school activities outside of the normal timetable. Jen Smyth, Office Manager, will be responsible, in conjunction with parents/carers, for drawing up, implementing, monitoring and keeping under review the individual healthcare plan for each pupil and making sure relevant staff are aware of these plans. All members of staff are expected to show a commitment and awareness of children's medical conditions and the expectations of this policy. All new staff will be inducted into the arrangements and guidelines in this policy upon taking up their post.

#### **Procedure**

This covers notification prior to admission, procedures to cover transitional arrangements between schools or alternative providers, and the process to be followed upon reintegration after a period of absence or when a pupil's needs change. For children being admitted to Elm Grove Primary School for the first time, with notification given, the arrangements will be in place for the start of the relevant school term. In other cases, such as a new diagnosis or a child moving to Elm Grove Primary School mid-term, we will make every effort to ensure that arrangements are put in place within two weeks.

In making the arrangements, we will take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. We also acknowledge that some may be more obvious than others. We will, therefore, ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life. We aim to ensure that parents/carers and pupils can have confidence in our ability to provide effective support for medical

conditions in school, so the arrangements will show an understanding of how medical conditions impact on the child's ability to learn, as well as increase their confidence and promote self-care.

We will ensure that staff are properly trained and supervised to support pupils' medical conditions and will be clear and unambiguous about the need to support actively pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them in doing so. We will 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. We will make sure that no child with a medical condition is denied admission or prevented from attending the school because arrangements for supporting their medical condition have not been made. However, in line with our safeguarding duties, we will ensure that all pupils' health is not put at unnecessary risk from, for example infectious disease. We will therefore not accept a child in school at times where it would be detrimental to the health of that child or others in the school community.

Elm Grove Primary School does not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on available evidence. This would normally involve some form of medical evidence and consultation with parents/carers. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place. These discussions will be led by Jen Smyth (Office Manager) and/or Ben Massey (Head Teacher), and following these discussions, an individual healthcare plan may be written in conjunction with the parent/carers/medical providers and be put in place.

#### **Individual healthcare plans (IHP)**

Individual healthcare plans will help to ensure that Elm Grove Primary School effectively supports pupils with medical conditions. They will provide clarity about what needs to be done, when and by whom (see appendix C). They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. They are likely to be helpful in other cases where medical conditions are long-term and complex. However, not all children will require one. If it is felt by school staff or parents that an IHP would be beneficial, the school and parents will consult together with relevant professionals to produce one. If consensus cannot be reached the Head Teacher is best placed to take a final view. A flow chart for identifying and agreeing the support a child needs and developing an individual healthcare plan is provided at **Appendix A**.

Individual healthcare plans will be easily accessible (in the school office medical cupboard) to all who need to refer to them, while preserving confidentiality. Plans will capture the key information and actions that are required to support the child effectively. The level of detail within the required to support the child effectively. The level of detail within the plan 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. Where a child has SEN but does not have a statement or EHC plan, his/her special educational needs should be mentioned in the individual healthcare plan.

Individual healthcare plans (and their review) should be drawn up in partnership between the school, parents/carers and a relevant healthcare professional e.g. school, specialist or children's community nurse, who can best advice on the particular needs of the child. Pupils should also be involved whenever appropriate. The aim should be to capture the steps which Elm Grove Primary School should take to help 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 school. Elm Grove Primary School will ensure that individual healthcare plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed. They will be developed and reviewed with the child's best interests in mind and ensure that we manage risks to the child's education, health and social wellbeing, and minimises disruption. Where a child is returning to school following a period of hospital education or alternative provision, we will work with the local authority and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively. The format of an Individual Healthcare Plan may be varied to suit the specific needs of each pupil. They should, however, all include the following information:

- 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, travel time between lessons
- Specific support for the pupil's educational, social and emotional needs linked to their health condition if necessary
- 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
- 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
- Who in the school needs to be aware of the child's condition and the support required
- Arrangements for written permission from parents/carer and the Head Teacher 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 child can participate e.g. risk assessment
- Where confidentiality issues are raised by the parent/child, the designated individual to be entrusted with information about the child'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 individual healthcare plan

#### Roles and responsibilities

Please refer to the section on policy implementation for the functions that have been delegated to different, named members of staff at Elm Grove Primary School. In addition we can refer to the **Community Nursing Team** for support with drawing up Individual Healthcare Plans, to provide or commission specialist medical training, liaison with lead clinicians and advice or support in relation to pupils with medical conditions. Other **healthcare professionals, including GPs and paediatricians** should notify the Community Nursing Team when a child has been identified as having a medical condition that will require support at school. Specialist local health teams may be able to provide support, and training to staff, for children with particular conditions (e.g. asthma,

diabetes, epilepsy). The school's **SENCO Carla Kemp**, will also be involved where there is concern around a pupil's mental health and wellbeing.

**Pupils** with medical conditions will often be best placed to provide information about how their condition affects them. At an appropriate age, 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.

**Parents/carers** should provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents are key partners and should be involved in the development and review of their child's individual healthcare plan, 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.

Brighton and Hove Council (the Council) is the commissioning body for school nurses for maintained schools and academies in Brighton and Hove. Under Section 10 of the Children Act 2004, they have a duty to promote co-operation between relevant partners, such as governing bodies of maintained schools, proprietors of academies, clinical commissioning groups and NHS England, with a view to improving the well-being of children with regard to their physical and mental health, and their education, training and recreation. 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. The Council will work with us to support pupils with medical conditions to attend full time. Where pupils 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 the Council 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 year).

**Providers of health services** should co-operate with schools that are supporting children with medical conditions. They can provide valuable support, information, advice and guidance to schools, and their staff, to support children with medical conditions at school.

Clinical commissioning groups (CCGs) commission other healthcare professionals such as specialist nurses. They have a reciprocal duty to co-operate under Section 10 of the Children Act 2004 (as described above for the Council The local Health and Wellbeing Board provides a forum for the Council and CCGs to consider with other partners, including locally elected representatives, how to strengthen links between education, health and care settings.

Ofsted's new common inspection framework came into effect on 1 September 2015, aimed at promoting greater consistency across inspection remits. Inspectors must consider how well a school meets the needs of the full range of pupils, including those with medical conditions. Key judgements will be informed by the progress and achievement of these children alongside those of pupils with special educational needs and disabilities, and also by pupils' spiritual, moral, social and cultural development.

Staff training and support

Paediatric first aiders are:

Sam Barfoot

Katherine Barnes Carrie Bowen Kelly Haisell Dina Cameroo

#### **Emergency First Aid at Work (three day):**

Stephanie Maloney Emily Webbon Jen Smyth Phil Dancer Hannah Collacott

#### **Emergency First Aid at Work (one day):**

Lucie Ahmed
Geddy Ashcroft
Shelley Bassett
Carrie Bowen
Leah Carr
Christina Dewdney
Julie Fawcett
Jo Flippance
Sadie Mockford
Jamees Waring
Afroza Bilkis
Louise Cole
Karen Travis
Michiko Dunford

#### **Basic First Aid:**

All Teaching Assistants, Individual Needs Assistants and office staff

#### **Epi Pen Training:**

All staff – teaching and support staff

All staff who are required to provide support to pupils for medical conditions will be trained by healthcare professional qualified to do so. The training need will be identified by the healthcare professional during the development or review of the individual healthcare plan. We may choose to arrange training ourselves and will ensure that it remains up-to-date.

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 set out in the 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 proficiency of staff in a medical procedure, or in providing medication All staff will receive induction training and regular whole school awareness training so that all staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing the policy. Ben Massey, Head Teacher and Jen Smyth (office manager) will seek advice from relevant healthcare professions about training needs, including preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.

The family of a child will often be key in providing relevant information to school staff about how their child's needs can be met, and parents will be asked for their views. They should provide specific advice, but should not be the sole trainer.

#### The child's role in managing their own medical needs

If, after discussion with the parent/carer, it is agreed that the child is competent to manage his/her own medication and procedures, s/he will be encouraged to do so. This will be reflected in the individual healthcare plan. Wherever possible children will be allowed to carry their own medicines and relevant devices or should be able to access their medication for self-medication quickly and easily; these will be stored in the cupboard in the main office to ensure that the safeguarding of other children is not compromised and they are easily accessible.

At Elm Grove Primary School we recognise that children who take their medicines themselves and/or manage procedures may require an appropriate level of supervision. If it is not appropriate for a child to self-manage, then relevant staff will help to administer medicines and manage procedures for them.

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 will be informed so that alternative options can be considered.

#### Managing medicines on school premises and record keeping

At Elm Grove Primary School the following procedures are to be followed:

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so;
- No child under 16 should be given prescription or non-prescription medicines without their parents/carers written consent (see appendix B);
- With parental written consent we will administer non-prescription medicines (except aspirin or those containing aspirin unless prescribed by a doctor).
   Medication, e.g. for pain relief, should never be administered without first checking maximum dosage and when previous dose was taken. Parents should be informed;
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours;
- Elm Grove Primary will only accept prescribed medicines, with written permission from parent/carer 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 be in-date, but will generally be available to schools inside an insulin pen or a pump, rather that its original container;
- All medicines will be stored safely in the school office. Staff should know where
  pupils medicines are at all times and be able to access them immediately. All
  medicines should be marked with the child's name;

 During school trips the first aid trained member of staff will carry all medical devices and medicines required; Where children separate into groups, the lead adult will hold any specific medication.

#### **Controlled drugs**

- We will keep all controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff will have access.
- They should be easily accessible in an emergency. A record should be kept of any doses used and the amount of the controlled drug held in the school;
- Staff administering medicines should do so in accordance with the prescriber's instructions. Elm Grove Primary School will 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 at school should be noted.
   Written records are kept of all medicines administered to children. These records offer protection to staff and children and provide evidence that agreed procedures have been followed:
- When no longer required, medicines should be returned to the parent/carer to arrange safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps

#### **Emergency procedures**

Ben Massey, Head Teacher will ensure that arrangements are in place for dealing with emergencies for all school activities wherever they take place, including school trips within and outside the UK, as part of the general risk management process. Where a child has an individual healthcare plan, this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures (see appendix C). Other pupils in the school should know what to do in general terms, such as informing a teacher immediately if they think help is needed.

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. **See appendix D.** 

#### Day trips and sporting activities

We will actively support pupils with medical conditions to participate in day trips and sporting activities by being flexible and making reasonable adjustments unless there is evidence from a clinician, such as a GP, that this is not possible.

We will always conduct a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions can be included safely. This will involve consultation with parents\carers and relevant healthcare professions and will be informed by Health and Safety Executive (HSE) guidance on school trips.

#### Other issues for consideration

Where a pupil uses home-to-school transport arranged by the Council and they also have a medical condition which is life-threatening, we will share the pupil's individual healthcare plan with the Council.

#### **Unacceptable practice**

Although staff at Elm Grove Primary School should use their discretion and judge each case on its merit 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\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 individual healthcare plans
- If the child becomes ill, send them to the first aider or school office 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 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 should have to give up working because the school is failing to support their child's medical needs
- Prevent children from participating, or creating unnecessary barriers to children participating in any aspect of school

#### Liability and indemnity

The Council provides insurance for the school through its Public Liability Insurance Scheme.

#### **Complaints**

Should parents\carers be unhappy with any aspect of their child's care at Elm Grove Primary School, they must discuss their concerns with the school. This will be with the child's class teacher in the first instance, with whom any issues should be addressed. If this does not resolve the problem or allay the concern, the problem should be brought to a member of leadership team, who will, where necessary, bring concerns to the attention of the Head Teacher. In the unlikely event of this not resolving the issue, the parent\ carer must make a formal complaint using the Elm Grove Primary School Complaints Procedure

#### Appendix A

Developing individual healthcare plans

Parent or healthcare professional informs school that child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed Headteacher or senior member of school staff to whom this has been delegated, co-ordinates meeting to discuss child's medical support needs; and identifies member of school staff who will provide support to pupil Meeting to discuss and agree on need for IHCP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them) Develop IHCP in partnership - agree who leads on writing it. Input from healthcare professional must be provided School staff training needs identified Healthcare professional commissions/delivers training and staff signed-off as competent - review date agreed IHCP implemented and circulated to all relevant staff IHCP reviewed annually or when condition changes. Parent or healthcare professional to initiate



#### C PARENTAL CONSENT FORM – MEDICINE IN SCHOOL

## TO BE COMPLETED BY THE PARENT/GUARDIAN OF ANY CHILD TO WHOM DRUGS MAY BE ADMINISTERED UNDER THE SUPERVISION OF SCHOOL STAFF.

If you need help to complete this form, please contact the School or the Health Visitor attached to your doctor's surgery. Please complete in block letters.

Name of Child		Doctor's Name	
Class			
Date of Birth		Doctor's Phone No.	
School		Doctor's 24hour contact No.	
Home Address		Doctor's Address	

#### The Doctor has prescribed (as follows) for my child:

#### a) Regularly:

Name of Drug/Medicine to be given	Start and end dates (if applicable)	How Often (e.g lunchtime, after food?)	How much (e.g. half a teaspoon? 1 tablet?)

I undertake to supply the school with the drugs, medicines or foods in properly labelled containers and keep the school informed of any material facts or information which may affect medication being given to the child.

I accept that whilst my child is in the care of the School, the School staff stand in the position of the parent and that the school staff may therefore need to arrange any medical aid considered necessary in an emergency, but I will be told of any such action as soon as possible.

Signed (Parent/Guardian):	Alternative contact: Name:	
Home telephone number:	Relationship to child:	
Daytime telephone number	Phone number:	
Date:		

I undertake to provide advice if any changes in medication/medical procedures are necessary.

Name of Doctor/Consultant Paediatrician:	
Signature:	
Date:	

# Administration of Medicines in Schools and Early Years Settings





IHCP (HEALTH CARE PLAN) - 2024

Name of Child		
Date of Birth		
Condition		
Date		
Class/Form		
Review Date		
Name	Name	
Phone:	Phone:	
Relationship	Relationship	
PHOTO OF CHILD		
Contact Information		
Family Contact 1	Family Contact 2	

### **Family Contact 3**

Name	
Phone	
Relationship	

Clinic/Ho	ospital	Contact
-----------	---------	---------

Name	
Tel. No	

Ŀ	ıŀ

Name	
Tel. No.	

# Administration of Medicines in Schools and Early Years Settings – Appendices

HS-S-32

Describe condition and give details of pupil's individual symptoms:
Daily care requirements (e.g., before sport/at lunchtime):
Describe what constitutes an emergency for the pupil and the action to take
if this occurs:
If the following symptoms are present:
CALL 999 – FOR AMBULANCE

## Follow-up Care:

• Family contacted in an emergency situation or for advice if a concern.

- Training of staff members, awareness
- Regular updates through meetings and verbal contact with the family following any medical incident / emergency / concern.

#### Who is responsible in an emergency: (state if differ on off-site activities):

Trained first aiders in school/ key adults

Class teacher or Teacher in Charge of the class

Class teacher and class teaching assistants.

Head teacher / SENCO

Offsite provision – identified adult

School Nursing team

Annual first aid training – 1 day or 2 yearly training

#### Form copied to:

Class teacher / Teaching assistants

Parents/ Carers

First Aid folder – for access by First Aiders

Head teacher / SENCO

Copy CPOMS

#### **Appendix D - Contacting the Emergency Services Request for an Ambulance**

Dial 999, ask for ambulance and be ready with the following information

- 1. Your telephone number
- 2. Give your location as follows ELM GROVE PRIMARY SCHOOL . ELM GROVE, BRIGHTON
- 3. State that the post code is BN2 3ES
- 4. Give exact location in the school/setting (insert brief description)
- **5. Give your name**
- 6. Give name of child and a brief description of the child's symptoms and if parents are present
- 7. Inform Ambulance Control of the best entrance and state that the crew will be met and taken to... (eg School Office, Playground)