

# Huntington

## **Community Primary School**

# **Supporting Pupils with Medical Conditions Policy**

2022

Signed by:

29.06.22

Headteacher Date:

Chair of Governors Date: 29.06.22

Next review Summer 2025

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#### Statement of intent

The Governing Board of Huntington Community Primary School has a duty to ensure arrangements are in place to support pupils with medical conditions. The aim of this policy is to ensure that all pupils with medical conditions, in terms of both physical and mental health, receive appropriate support to allow them to play a full and active role in school life, remain healthy, have full access to education (including school trips and PE), and achieve their academic potential.

The school believes it is important that parents of pupils with medical conditions feel confident that the school provides effective support for their children's medical conditions, and that pupils feel safe in the school environment.

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

Some pupils with medical conditions may be classed as disabled under the definition set out in the Equality Act 2010. The school has a duty to comply with the Act in all such cases.

In addition, some pupils with medical conditions may also have SEND and have an EHC plan collating their health, social and SEND provision. For these pupils, the school's compliance with the DfE's 'Special educational needs and disability code of practice: 0 to 25 years' and the school's *Special Educational Needs and Disabilities (SEND) Policy* will ensure compliance with legal duties.

To ensure that the needs of our pupils with medical conditions are fully understood and effectively supported, we consult with health and social care professionals, pupils and their parents.

### Legal framework

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Children and Families Act 2014
- Education Act 2002
- Education Act 1996 (as amended)
- Children Act 1989
- National Health Service Act 2006 (as amended)
- Equality Act 2010
- Health and Safety at Work etc. Act 1974
- Misuse of Drugs Act 1971
- Medicines Act 1968
- The School Premises (England) Regulations 2012 (as amended)
- The Special Educational Needs and Disability Regulations 2014 (as amended)
- The Human Medicines (Amendment) Regulations 2017
- The Food Information (Amendment) (England) Regulations 2019 (Natasha's Law)
- DfE (2015) 'Special educational needs and disability code of practice: 0-25 years'
- DfE (2021) 'School Admissions Code'
- DfE (2017) 'Supporting pupils at school with medical conditions'
- DfE (2000) 'Guidance on first aid for schools'
- Department of Health (2017) 'Guidance on the use of adrenaline auto-injectors in schools'

This policy operates in conjunction with the following school policies:

- Policy for the Administration of Medicines
- Special Educational Needs and Disabilities (SEND) Policy
- Asthma Policy
- Allergen and Anaphylaxis Policy
- Complaints Procedures Policy
- Pupil Equality, Equity, Diversity and Inclusion Policy
- Attendance Policy
- Nursery Admissions Policy

## Roles and responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. Huntington School will work in partnership with pupils, parents, school staff, healthcare professionals (and social care professionals where appropriate) and the local authority.

The Governing Board is responsible for:

- Fulfilling its statutory duties under legislation.
- Ensuring that arrangements are in place to support pupils with medical conditions.

- Ensuring that pupils with medical conditions can access and enjoy the same opportunities as any other pupil at the school.
- Working with the LA, health professionals, commissioners and support services to ensure that pupils with medical conditions receive a full education.
- Ensuring that, following long-term or frequent absence, pupils with medical conditions are reintegrated effectively.
- Ensuring that the focus is on the needs of each pupil and what support is required to support their individual needs.
- Instilling confidence in parents and pupils in the school's ability to provide effective support.
- Ensuring that sufficient members of staff are properly trained to provide the necessary support and are able to access information and other teaching support materials as needed.
- Ensuring that no prospective pupils are denied admission to the school because arrangements for their medical conditions have not been made.
- Ensuring that pupils' health is not put at unnecessary risk. As a result, the board holds
  the right to not accept a pupil into school at times where it would be detrimental to the
  health of that pupil or others to do so, such as where the child has an infectious
  disease.
- Ensuring that policies, plans, procedures and systems are properly and effectively implemented.

#### The Headteacher is responsible for:

- The overall implementation of this policy.
- Ensuring that this policy is effectively implemented with stakeholders.
- Ensuring that all staff are aware of this policy and understand their role in its implementation.
- Ensuring all staff who need to know are aware of a child's medical condition.
- Ensuring that a sufficient number of staff are trained and available to implement this policy and deliver against all IHPs, including in contingency and emergency situations.
- Considering recruitment needs for the specific purpose of ensuring pupils with medical conditions are properly supported.
- Having overall responsibility for the development of IHPs.
- Ensuring that staff are appropriately insured and aware of the insurance arrangements.
- Contacting the school nursing service where a pupil with a medical condition requires support that has not yet been identified.

#### The First Aid Lead is responsible for:

- In conjunction with parents, drawing up, implementing and keeping under review the individual healthcare plan for each pupil, and making sure relevant staff are aware of these plans.
- In the class teacher's absence, briefing supply teachers, preparing risk assessments for school visits and other school activities outside of the normal timetable and for the monitoring of individual healthcare plans.

#### Parents are responsible for:

- Notifying the school if their child has a medical condition.
- Providing the school with sufficient and up-to-date information about their child's medical needs.
- Being involved in the development and review of their child's IHP.
- Carrying out any agreed actions contained in the IHP.
- Ensuring that they, or another nominated adult, are contactable at all times.

#### Pupils are responsible for:

- Being fully involved in discussions about their medical support needs, where applicable.
- Contributing as much as possible to the development of their IHP, and complying with
- Being sensitive to the needs of pupils with medical conditions (for example, alerting staff to the deteriorating condition or emergency need of pupils with medical conditions).

#### The pupil's class teacher is responsible for:

 Briefing supply teachers, preparing risk assessments for school visits and other school activities outside of the normal timetable and for the monitoring of individual healthcare plans.

#### All school staff are responsible for:

- If requested, providing support to pupils with medical conditions, including the administering of medicines (although they cannot be required to do so).
- Taking into account the needs of pupils with medical conditions that they teach.
- Accepting sufficient training to achieve the required level of competency before taking responsibility for supporting pupils with medical conditions.
- Knowing what to do and responding accordingly when they become aware that a pupil with a medical condition needs help.

#### Additionally, they are responsible for:

- Being aware of and following the procedures outlined in this policy, and using the appropriate forms
- Retaining confidentiality within policy guidelines
- Contacting parents and/or emergency services when necessary and without delay
- Storing medicines and first aid equipment within policy guidelines
- If they have a child with a medical condition in their class or group, understanding the nature of the child's needs in order to adequately support them. This information will be provided to them

The school nursing service is responsible for:

- Notifying the school at the earliest opportunity when a pupil has been identified as having a medical condition which requires support in school.
- Supporting staff to implement IHPs and providing advice and training.
- Liaising with lead clinicians locally on appropriate support for pupils with medical conditions.

Clinical commissioning groups (CCGs) are responsible for:

- Ensuring that commissioning is responsive to pupils' needs, and that health services are able to cooperate with schools supporting pupils with medical conditions.
- Making joint commissioning arrangements for EHC provision for pupils with SEND.
- Being responsive to LAs and schools looking to improve links between health services and schools.
- Providing clinical support for pupils who have long-term conditions and disabilities.
- Ensuring that commissioning arrangements provide the necessary ongoing support essential to ensuring the safety of vulnerable pupils.

Other healthcare professionals, including GPs and paediatricians, are responsible for:

- Notifying the school nursing service when a child has been identified as having a medical condition that will require support at school.
- Providing advice on developing IHPs.
- Providing support in the school for children with particular conditions, e.g. asthma, diabetes and epilepsy, where required.

Providers of health services are responsible for cooperating with the school, including ensuring communication takes place, liaising with the school nursing service and other healthcare professionals, and participating in local outreach training.

#### The LA is responsible for:

- Commissioning school nurses for local schools.
- Promoting cooperation between relevant partners.
- Making joint commissioning arrangements for EHC provision for pupils with SEND.
- Providing support, advice, guidance, and suitable training for school staff, ensuring that IHPs can be effectively delivered.
- Working with the school to ensure that pupils with medical conditions can attend school full-time.

Where it is clear that a pupil will be away from school for 15 days or more because of health needs (whether consecutively or across a school year), the LA has a duty to make alternative arrangements, as the pupil is unlikely to receive a suitable education in a mainstream school.

#### **Admissions**

Admissions will be managed in line with the LA's *Admissions Policy* and the school's *Nursery Admissions Policy*.

No child will be denied admission to the school or prevented from taking up a school place because arrangements for their medical condition have not been made; a child may only be refused admission if it would be detrimental to the health of the child to admit them into the school setting.

The school will not ask, or use any supplementary forms that ask, for details about a child's medical condition during the admission application process.

### **Notification procedure**

When the school is notified that a pupil has a medical condition that requires support in school, the admin staff will inform the Headteacher and First Aid Lead. Following this, the school will arrange a meeting with parents, healthcare professionals and the pupil, with a view to discussing the support needed and whether an IHP is required (outlined in detail in the <a href="IHPs">IHPs</a> section of this policy).

The school will not wait for a formal diagnosis before providing support to pupils. Where a pupil's medical condition is unclear, or where there is a difference of opinion concerning what support is required, a judgement will be made by the Headteacher based on all available evidence (including medical evidence and consultation with parents), in liaison with the First Aid Lead and SENDCo.

For a pupil starting at the school in a September uptake, arrangements will be put in place prior to their introduction and informed by their previous institution. Where a pupil joins the school mid-term or a new diagnosis is received, arrangements will be put in place within two weeks.

## Staff training and support

Any staff member providing support to a pupil with medical conditions will receive suitable training. Staff will not undertake healthcare procedures or administer medication without appropriate training. Training needs will be assessed by the First Aid Lead and Headteacher through the development and review of IHPs, on a yearly basis for all school staff, and when a new staff member arrives. A healthcare professional will confirm the proficiency of staff in performing medical procedures or providing medication.

A first-aid certificate will not constitute appropriate training for supporting pupils with medical conditions.

Through training, staff will have the requisite competency and confidence to support pupils with medical conditions and fulfil the requirements set out in IHPs. Staff will understand the medical conditions they are asked to support, their implications, and any preventative measures that must be taken.

Whole-school awareness training will be carried out on a three-yearly basis for all staff, and included in the induction of new staff members.

The First Aid Lead and Headteacher will identify suitable training opportunities that ensure all medical conditions affecting pupils in the school are fully understood, and that staff can recognise difficulties and act quickly in emergency situations.

Training will be commissioned by the SBM and may be provided by the following:

- Commercial training provider
- The school nursing service, or a specialist nurse
- GP consultant
- The parents of pupils with medical conditions

The parents of pupils with medical conditions will be consulted for specific advice and their views are sought where necessary, but they will not be used as a sole trainer.

The Governing Board will provide details of further CPD opportunities for staff regarding supporting pupils with medical conditions.

Appendix F will be used to record staff training for administration of medicines and /or medical procedures.

### Self-management

Following discussion with parents, pupils who are competent to manage their own health needs and medicines will be encouraged to take responsibility for self-managing their medicines and procedures. This will be reflected in their IHP.

Pupils medicines will be held in the MI Room so that the safeguarding of other children is not compromised (other than asthma inhalers and AAI devices, which will be stored in the classroom First Aid box). If a pupil refuses to take medicine or carry out a necessary procedure, staff will not force them to do so. Instead, the procedure agreed in the pupil's IHP will be followed. Following such an event, parents will be informed so that alternative options can be considered.

## **Supply teachers**

Supply teachers will be:

- Provided with access to this policy.
- Informed of all relevant medical conditions of pupils in the class they are providing cover for.
- Covered under the school's insurance arrangements.

## **Individual Healthcare Plans (IHPs)**

Generally, an IHP will be written for each child who:

- has long-term medical needs (excluding asthma in routine/non-acute cases)
- has a medical condition that requires support to access the same opportunities as any other child in school

A flow chart for identifying and agreeing the support a child needs, and developing an IHP, is provided in <u>Appendix A</u> (and see also <u>Appendix H</u>, <u>Letter to Parents</u>).

The school, healthcare professionals and parents will agree, based on evidence, whether an IHP will be required for a pupil, or whether it would be inappropriate or disproportionate to their level of need. If no consensus can be reached, the Headteacher will make the final decision.

The school, parents and a relevant healthcare professional will work in partnership to create and review IHPs. Where appropriate, the pupil will also be involved in the process.

IHPs will include the following information:

- The medical condition, along with its triggers, symptoms, signs and treatments
- The pupil's needs, including medication (dosages, side effects and storage), other treatments, facilities, equipment, access to food and drink (where this is used to manage a condition), dietary requirements, and environmental issues
- Specific support needed for the pupil's educational, social and emotional needs (e.g. how absences will be managed, catch-up support)
- The level of support needed, including in emergencies
- Whether a child can self-manage their medication (and if so, appropriate monitoring arrangements)
- Who will provide the necessary support, including details of the expectations of the role and the training needs required, as well as who will confirm the supporting staff member's proficiency to carry out the role effectively
- Cover arrangements for when the named supporting staff member is unavailable
- Who needs to be made aware of the pupil's condition and the support required
- Arrangements for obtaining written permission from parents and the Headteacher for medicine to be administered by school staff or self-administered by the pupil
- Separate arrangements or procedures required during educational visits and other activities outside the normal school timetable
- Where confidentiality issues are raised by the parents or pupil, the designated individual to be entrusted with information about the pupil's medical condition
- What to do in an emergency, including contact details and contingency arrangements

Where a pupil has an emergency healthcare plan prepared by their lead clinician, this will be used to inform the IHP.

IHPs will be easily accessible to those who need to refer to them, but confidentiality will be preserved.

**IHPs will be reviewed on at least an annual basis**, or when a child's medical circumstances change, whichever is sooner.

Where a pupil has an EHC plan, the IHP will be linked to it or become part of it. Where a child has SEND but does not have a statement or EHC plan, their SEND will be mentioned in their IHP.

Where a child is returning from a period of hospital education, alternative provision or home tuition, the school will work with the LA and education provider to ensure that their IHP identifies the support the child will need to reintegrate.

## Managing medicines

In accordance with the school's *Policy for the Administration of Medicines*, medicines will only be administered at school when it would be detrimental to a pupil's health or school attendance not to do so.

Staff administering prescribed medicines should always do so in accordance with the prescriber's instructions.

Pupils under 16 years old will not be given prescription or non-prescription medicines without their parents' written consent, except where the medicine has been prescribed to the pupil without the parents' knowledge. In such cases, the school will make every effort to encourage the pupil to involve their parents, while respecting their right to confidentially.

Non-prescription medicines may be administered, with written parental consent, in the following situations:

- When it would be detrimental to the pupil's health not to do so
- When instructed by a medical professional

No pupil under the age of 16 will be given medicine containing aspirin unless prescribed by a doctor.

Pain relief medicines will not be administered without first checking when the previous dose was taken and the maximum dosage allowed. Parents will always be informed.

Parents will be informed any time medication is administered that is not agreed in an IHP.

The school will only accept medicines that are in-date, labelled, in their original container, and contain instructions for administration, dosage and storage. The only exception to this is insulin, which must still be in-date, but is available in an insulin pen or pump, rather than its original container.

All medicines will be stored safely in the MI Room (other than asthma inhalers and AAIs, which will be stored in the classroom First Aid box). Pupils will be informed where their medicines are at all times and will be able to access them immediately, whether in school or attending an educational visit.

During educational visits, a member of staff will carry all medical devices and medicines required (in the case of a visit involving a child with an individual health plan, this will be the staff member trained to support the child).

When medicines are no longer required, they will be returned to parents for safe disposal. Sharps boxes will be used for the disposal of needles and other sharps.

Controlled drugs (e.g. Ritalin) will be stored in a non-portable container and only named staff members will have access; however, these drugs can be easily accessed in an emergency. A record will be kept of the amount of controlled drugs held and any doses administered. Staff may administer a controlled drug to a pupil for whom it has been prescribed, in accordance with the prescriber's instructions.

The school will hold asthma inhalers for emergency use. The inhalers will be stored in the MI Room and their use will be recorded. Inhalers will be used in line with the school's Asthma Policy.

Records will be kept of all medicines administered to individual pupils, stating what, how and how much medicine was administered, when, and by whom. A record of side effects presented will also be held.

### Allergens, anaphylaxis and adrenaline auto-injectors (AAIs)

The school's *Allergen and Anaphylaxis Policy* is implemented consistently to ensure the safety of those with allergies.

Parents are required to provide the school with up-to-date information relating to their children's allergies, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication required.

Staff members receive appropriate training and support relevant to their level of responsibility, in order to assist pupils with managing their allergies.

The administration of adrenaline auto-injectors (AAIs) and the treatment of anaphylaxis will be carried out in accordance with the school's *Allergen and Anaphylaxis Policy*. Where a pupil has been prescribed an AAI, this will be written into their IHP.

Further information relating to the school's policies and procedures addressing allergens and anaphylaxis can be found in the *Allergen and Anaphylaxis Policy*.

## Record keeping

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. The school's forms for record keeping can be found in <a href="Appendix D">Appendix D</a> and <a href="Appendix D">Appendix D</a> and <a href="Appendix D">Appendix D</a> of this policy.

### **Emergency procedures**

Medical emergencies will be dealt with under the school's emergency procedures.

All staff know what action to take in the event of a medical emergency (see <u>Appendix G</u>). This includes:

- how to contact emergency services and what information to give
- who to contact within the school.

Training is refreshed for all staff at least once a year.

Action to take in a general medical emergency (see <u>Appendix G</u>) is displayed in prominent locations for staff.

Where an IHP is in place, it should detail:

- What constitutes an emergency.
- What to do in an emergency.

Pupils will be informed in general terms of what to do in an emergency, e.g. telling a teacher.

If a pupil needs to be taken to hospital, a member of staff will remain with the pupil until their parents arrive, or accompany a pupil taken to hospital by ambulance.

(Staff will only take pupils to hospital in their own car if two staff can accompany the pupil, and if the advice from the 999 controller indicates such action could be considered (e.g. regarding a confirmed lengthy wait for an ambulance to arrive). Parents will be contacted for permission to transport the pupil in a staff car).

When transporting pupils with medical conditions to medical facilities, staff members will be informed of the correct postcode and address for use in navigation systems.

## Educational/residential visits and sporting activities

Pupils with medical conditions will be supported to participate in educational visits, sporting activities and residential visits.

Prior to an activity taking place, the school will conduct a risk assessment to identify what reasonable adjustments should be taken to enable pupils with medical conditions to participate. In addition to a risk assessment, advice will be sought from pupils, parents and relevant medical professionals. The school will arrange for adjustments to be made for all pupils to participate, except where evidence from a clinician, e.g. a GP, indicates that this is not possible.

### Unacceptable practice

The school will not:

- Assume that pupils with the same condition require the same treatment.
- Prevent pupils from easily accessing their inhalers and medication.
- Ignore the views of the pupil or their parents.
- Ignore medical evidence or opinion.
- Send pupils home frequently for reasons associated with their medical condition, or prevent them from taking part in activities at school, including lunch times, unless this is specified in their IHP.
- Send an unwell pupil to the MI Room or school office alone or with an unsuitable escort.
- Penalise pupils with medical conditions for their attendance record, where the absences relate to their condition.
- Make parents feel obliged or forced to visit the school to administer medication or provide medical support, including for toilet issues. The school will ensure that no parent is made to feel that they have to give up working because the school is unable to support their child's needs.
- Create barriers to pupils participating in school life, including educational visits.
- Refuse to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

## Liability and indemnity

The Governing Board will ensure that appropriate insurance is in place to cover staff providing support to pupils with medical conditions.

The school holds an insurance policy with Zurich Insurance covering liability relating to the administration of medication. Any requirements of the insurance, such as the need for staff to be trained, will be complied with.

All staff providing such support will be provided with access to the insurance policies.

In the event of a claim alleging negligence by a member of staff, civil actions are most likely to be brought against the school, not the individual.

## Complaints

Parents or pupils wishing to make a complaint concerning the support provided to pupils with medical conditions are required to discuss their concerns with the school in the first instance. This should be with the child's class teacher in the first instance. If this does not resolve the problem or allay the concern, the problem should be brought to the attention of the Headteacher. In the event of this not resolving the issue, the parent/carer may make a formal complaint using the Huntington School Complaints Procedure.

Parents and pupils are free to take independent legal advice and bring formal proceedings if they consider they have legitimate grounds to do so.

### **Home-to-school transport**

Arranging home-to-school transport for pupils with medical conditions is the responsibility of the LA. Where appropriate, the school will share relevant information to allow the LA to develop appropriate transport plans for pupils with life-threatening conditions.

#### **Defibrillators**

The school has an automated external defibrillator (AED). The AED is stored in the MI Room.

All staff members are aware of the AED's location and what to do in an emergency. A risk assessment regarding the storage and use of AEDs at the school will be carried out and reviewed annually

No training will be needed to use the AED, as voice and/or visual prompts guide the rescuer through the entire process from when the device is first switched on or opened; however, staff members will be trained in cardiopulmonary resuscitation (CPR), as this is an essential part of first-aid and AED use. This training will take place every three years.

The emergency services will always be called where an AED is used or requires using.

Where possible, AEDs will be used in paediatric mode or with paediatric pads for pupils under the age of eight.

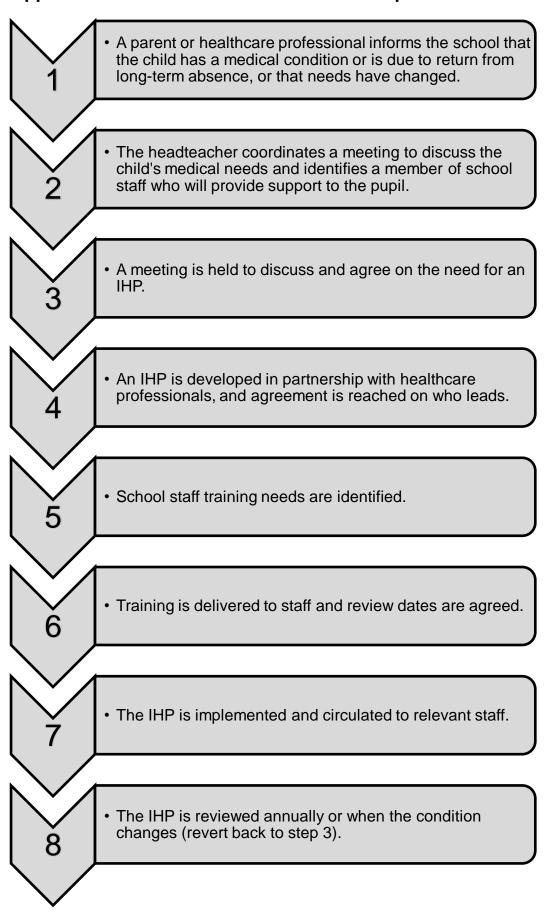
Maintenance checks will be undertaken on the AED on a monthly basis by the First Aid Lead, who will also keep an up-to-date record of all checks and maintenance work.

## Monitoring and review

This policy is reviewed on a three-yearly basis by the Governing Board, Premises and Health & Safety Committee, First Aid Lead and Headteacher. Any changes to this policy will be communicated to all staff, parents and relevant stakeholders.

The next scheduled review date for this policy is Summer 2025.

## Appendix A Individual Healthcare Plan Implementation Procedure



## Appendix B Individual Healthcare Plan

Pupil's name	
Year group & class	
Date of birth	
Pupil's address	
Medical diagnosis or condition	
Date	
Review date	
1	
Family contact information	
Name 1	
Relationship to pupil	
Phone number (work)	
(home)	
(mobile)	
Name 2	
Relationship to pupil	
Phone number (work)	
(home)	
(mobile)	
! 	

Clinic/hospital contact	
•	
Name	
Phone number	
Pupil's GP	
Name	
Name	
Phone number	
Name of person responsible	
providing support in sch	ool
Health Information	
Pupil's medical needs and details	s of symptoms, signs, triggers, treatments, facilities, equipment
or devices, environmental issues	s, etc
	thod of administration, when it should be taken, side effects, by staff member/self-administered with/without supervision
Daily care requirements	
Specific support for the pupil's ed	ducational, social and emotional needs

Arrangements for educational visits
Other information
Describe what constitutes an emergency, and the action to take if this occurs
Describe what constitutes are emergency, and the action to take it this occurs
Name of the responsible person in an emergency (state if different for off-site activities)
Name of the responsible person in an emergency (state if different for off-site activities)
Dian developed with
Plan developed with
Staff training needed or undertaken – who, what, when
Form copied to

## Appendix C REQUEST FOR HUNTINGTON PRIMARY SCHOOL TO GIVE MEDICATION

Dear Headteacher,

I request that (full name of pupil) be given the medicine outlined below while at school.
Date of birth Year group/class
Medical condition or illness
MEDICINE
Name/type of Medicine  (as described on the container)
Expiry date Duration of course
Dosage and method Time(s) to be given
Special precautions/other instructions
Are there any side effects that the school needs to know about?
Can your child self-administer? Yes/No (delete as required)
Procedures to take in an emergency
NB Medicines MUST be in the original container as dispensed by the pharmacy, and must be delivered personally to the school office staff.
CONTACT DETAILS
Your name Relationship to child (print)
Daytime telephone number
Address
The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school's 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 Date

# Appendix D Record of Medicine Administered to an Individual Pupil

Name of	pupil	
Year group &	class	
Date medicine provided by pa	rents	
Quantity rec	eived	
Name and strength of med	dicine	
Expiry	date	
Quantity retu	urned	
Dose and frequency of med	licine	
Stoff aignature		
Staff signature		
Parent signature		
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Date		
Time given		
Dose given		
Name of member of staff		
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## Appendix E Record of medicines administered to all children

Date	Time	Pupil's Name	Name of Medicine	Dose given	Any reactions	Staff name (print)	Signature

## Appendix F Staff Training Record – Administration of Medication

Name of school	Huntington Commu	nity Primary School
Name of staff member		
Type of training received		
Date of training complete		
Training provided by		
Profession and title of provider		
I confirm that the staff membe carry out any necessary treatm I recommend that the training i	nent pertaining to this t	•
Т	rainer's signature	
F	Print name	
	Date	
	I confirm that I have	e received the training detailed above
S	Staff signature	
F	Print name	
	Date	
	Sugge	sted review date

## **Appendix G Contacting Emergency Services**

#### To be stored by the phones in the school office

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 (Huntington School office: 01244 506450)
- 2. Your name
- 3. Your location (Huntington Community Primary School, Aldford Road, Chester)
- 4. Your postcode (CH3 6EA if at Huntington School)
- 5. Provide the exact location of the patient within the school
- 6. Provide the name of the patient 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. Record the information you have provided and pass it to the school office staff, so that it can be accessed readily

## **Appendix H**

### **Letter Inviting Parents to Contribute to IHP Development**

Huntington Community Primary School,
Aldford Road,
Huntington,
Chester,
CH3 6EA.
Date

#### RE: Developing an individual healthcare plan (IHP) for your child

Dear Parent/Carer,

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 IHP to be prepared, setting out what support each pupil needs and how this will be provided. IHPs are developed in partnership with the school, parents, pupils (where appropriate), and the relevant healthcare professionals 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 IHPs are likely to be helpful in the majority of cases, it is possible that not all pupils will require one. We will need to make judgements about how your child's medical condition impacts their ability to participate fully in school life, and the level of detail within IHPs 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 IHP has been scheduled for date. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend or whether rescheduling is required. The meeting will include me (the Headteacher), a relevant healthcare professional and the school nurse. 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 IHP template and return it to the school office, together with any relevant evidence, for consideration at the meeting.

#### [Attach Appendix B, Individual Healthcare Plan, to this letter]

I would be happy for you contact me via <a href="head@huntington.cheshire.sch.uk">head@huntington.cheshire.sch.uk</a> or 01244 506450 if this would be helpful.

Yours sincerely,

Mr Duncan Rose, Headteacher