Supporting Children with Medical Conditions Policy

St Dunstan's RC Primary School

May 2026

Date Policy Approved:	**24/06/2026**
Date Endorsed by Governors:	**24/06/2026**
Date of Next Review:	**24/06/2028**

INTRODUCTION

At St Dunstan's we want all children to have successful and fulfilling lives. Section 100 of the Children and Families Act 2014 places a statutory duty on all schools to effectively manage and meet the needs of pupils with medical conditions, medical needs and physical disabilities. The aim is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school. The outcome should be that they can play a full and active role in all aspects of school life including trips, educational visits, residential and extended school activities, whilst remaining healthy and achieving their full potential.

This policy is written with regard to all other relevant duties, policies and guidance, for example, Health and Safety legislation, the SEND code of practice and the Equality Act 2010 that may impact on support/provision for pupils with medical conditions.

Some children with medical conditions may be disabled. Where this is the case the governing body must comply with the duties under the Equality Act 2010. At St Dunstan's we will make reasonable adjustments to minimise or remove barriers to access and participation to ensure that individuals are not subject to less favourable treatment because of their disability. Some children may also have special educational needs (SEN) and may have a statement or Education, Health and Care Plan (EHC Plan) which brings together health and social care needs as well as their special educational provision. For children with SEN this policy should be read in conjunction with the school SEN policy.

Supporting a child with a medical condition during school hours is not the sole responsibility of one person and our ability to provide effective support will depend on co-operative working with other agencies including healthcare professionals, the local authority, parents/carers, the child and where appropriate, social care or other outreach professionals. This type of partnership working aims to ensure that the needs of pupils with medical conditions are met effectively.

Medical conditions can sometimes result in short term, frequent or long term absence from school, which can impact on educational attainment. At St Dunstan's we want to recognise and consider the potential social and emotional implications associated with a medical condition, as well as the educational impact, when planning to meet the pupil's needs.

PURPOSE OF DOCUMENT

The purpose of this policy is to put in place effective arrangements and practices to support children with medical conditions to attend school.

This policy also aims to give confidence to parents/carers that St Dunstan's will provide effective support for their child's medical condition and support their child to feel safe.

This policy clarifies the range of medical needs that may result in a child requiring support, namely:

- children with long term and/or complex medical conditions who require support to manage their medical needs on a day to day basis to keep them healthy;
- children requiring monitoring and/or intervention in emergency circumstances;
- children whose health needs may change over time in ways that cannot always be predicted.

All staff in school have a duty to maintain professional standards of care and to ensure that children are safe. St Dunstan's will consider and review pupils needs individually and actively support pupils with medical conditions, including administering medicines or medical interventions in order to meet the all round needs of the child. However, there is no legal duty requiring individual staff to administer medication, carry out medical interventions or to supervise a child when taking medicines. Any member of staff may be asked to administer medicines or medical interventions but they cannot be required to do so. This is a voluntary role.

This policy aims to ensure that appropriate support is put in place to limit the impact on educational attainment in the event of a short or long term absence from school. Refer to school policy on managing attendance.

1. ROLES AND RESPONSIBILITIES

The Governing Body

The governing body is responsible for:

- Ensuring the Head Teacher develops and effectively implements policy with partners and school staff, including regular policy review;

- Ensuring the Head Teacher makes all staff aware of this policy on supporting pupils with medical conditions and all staff understand their role in its implementation;

- Designating named individuals who are responsible for effective implementation of this policy. The designated person responsible for effective implementation of this policy is our SENCo Mrs Gina Baker.

- Ensuring this policy clearly identifies how the roles and responsibilities of staff who are involved in the arrangements to support pupils at school with medical conditions are made clear to both staff, parents/carers and the child;

- Ensuring that all relevant staff are aware of an individual child's medical condition and needs;

- Ensuring that sufficient numbers of staff receive appropriate training to fulfil the roles and responsibilities of supporting children with medical conditions i.e. school is able to deliver against all Individual Healthcare Plans (IHCPs) and implement policy, including for example in contingency or emergency situations and management of staff absence;

- Ensuring that a system is in place which identifies procedures to be followed on receipt of notification of a pupil's medical needs; procedures should cover any transitional arrangements or when pupil needs change (see Appendix 1);

- Ensuring that cover arrangements are always available in the event of staff absence or staffing changes including briefing for volunteers, supply teachers and appropriate induction for new members of staff;

- Ensuring that individual healthcare plans (IHCPs) are in place, where appropriate, and developed in consultation with parents/carers, healthcare professionals, relevant staff and (if appropriate) the child or young person;

- Ensuring that individual healthcare plans (IHCPs) are monitored and are subject to review, at least annually, or sooner if needs change;

- Ensuring that risk assessments relating to the school environment are in place, as appropriate, including consideration for actions to take in the event of emergency situations;

- Ensuring that risk assessments relating to off-site visits, residential trips and extended school opportunities offered outside the normal timetable are in place, as appropriate, including consideration for actions to take in the event of emergency situations;

- Ensuring that appropriate insurance is in place to support staff to undertake this role;

- Ensuring that a complaints procedure is in place and is accessible.

The Head Teacher

The Head Teacher is responsible for:

- Ensuring that the notification procedure is followed when information about a child's medical needs are received (Appendix 1);

- Ensuring that parents/carers provide full and up to date information about their child's medical needs by completion of 'Medical Details' form. (Template A)

- Deciding, on receipt of a 'Request to administer medication' form, (Template B) on a case by case basis, whether any medication or medical intervention will be administered, following consultation with staff;

- Deciding, on receipt of a 'Parent/Carer Request for the Child's Self–administration of Medication/Medical Intervention (Template C and Template Ci in the case of a child having asthma), on a case by case basis, whether any medication will be carried by the child, will be self-administered by the child or any medical intervention will be self-administered by the child, following consultation with staff, if appropriate;

- Ensuring that procedures are understood and implemented by all staff, volunteers and pupils.

Staff

Any member of staff may be asked to provide support for a child with a medical condition, including the administration of medicine(s) and medical intervention(s) although they cannot be required to do so; this is a voluntary role.

St Dunstan's staff will receive sufficient and suitable training and achieve competency before they take on responsibility for supporting children with medical conditions.

Where children have an Individual Healthcare Plan (IHCP) the roles and responsibilities of staff will be clearly recorded and agreed.

Parents/Carers Responsibilities

Parents/carers are required to:

- Provide the school with sufficient and up to date information about their child's medical needs and to update it at the start of each school year or, if needs change, by completion of 'Medical Details' form (Template A);

- Complete, if appropriate, a 'Request to administer medication' form (Template B) to gain consent for medicines/ interventions to be administered at school;

- Complete, if appropriate, a 'Parent/Carer Request for the Child's Self–administration of Medication/Medical Intervention' form (Template C and Template Ci in the case of a child having asthma) to gain consent for medicines medical interventions to be administered by the child;

- Provide up to date contact information so that parents/carers or other nominated adults are contactable at all times;

- Carry out any action they have agreed to as part of the implementation of an Individual Healthcare Plan (IHCP);

- Provide medication in its original packaging and with a suitable spoon/administering syringe, where required to administer the medication, with the pharmacy label stating the following:

  a) Child's name
  b) Child's date of birth
  c) Name of medicine
  d) Frequency/time medication administered
  e) Dosage and method of administration

f) Special storage arrangements

- Ensure that medicines or resources associated with delivery of a medical intervention have not passed the expiry date;

- Collect and dispose of any medicines held in school at the end of each term or as agreed;

- Provide any equipment required to carry out a medical intervention e.g. catheter tubes;

- Collect and dispose of any equipment used to carry out a medical intervention e.g. sharps box.

PUPIL INFORMATION

Parents/carers are required to give the following information about their child's medical condition and to update it at the start of each school year or sooner, if needs change, by completion of 'Medical Details' form (Template A):

a) Details of pupil's medical conditions and associated support needed at school
b) Medicine(s), including any side effects
c) Medical intervention(s)
d) Name of GP/Hospital and Community Consultants/Other Healthcare Professionals
e) Special requirements e.g. dietary needs
f) Who to contact in an emergency
g) Cultural and religious views regarding medical care
h) Details of any allergies

MANAGING MEDICINES/MEDICAL INTERVENTIONS ON SCHOOL PREMISES

Administration of Medicines/Medical Interventions

Medicine/medical interventions will only be administered at school when it would be detrimental to pupil's health or attendance not to do so. For example: we would only administer antibiotics requiring 4 doses per day. Pain relief unless prescribed by a doctor specifically requiring it to be administered every 4 hours will not be administered in school.

It is expected that parents/carers will normally administer medication/medical interventions to their children during their time at home, where at all possible.

No medication/medical intervention will be administered without prior written permission from the parents/carers on a 'Request to administer medication' form (Template B)

The Head Teacher will decide whether, and by whom, any medication or medical intervention will be administered in school, following receipt of the above form and after consultation with staff.

No changes to administration method or dosage of medication or changes in procedures relating to medical interventions will carried out without written authority from parents/carers and recorded amendment to the 'Request to administer Medication' form. This must also be updated on the prescription label on the medication (Template B)

The Head Teacher in will decide whether a child is able to carry and self-administer any medication or self-administer any medical intervention, following consultation with staff as appropriate 'Parent/Carer Request for the Child's Self–Administration of Medication/Medical Intervention' (Template C);

All medicines/medical interventions will normally be administered during school breaks and/or lunchtime.

If, for medical reasons, medicine has to be taken at other times during the day or a medical intervention delivered at a different time, arrangements will be made for the medicine/medical intervention to be administered at other prescribed times.

Pupils will be told where their medication/medical intervention equipment and resources are kept and who will administer them.

Any member of staff, on each occasion, giving medicine/medical intervention to a pupil should check:

a) Name of pupil
b) Written instructions provided by the parents/carers or healthcare professional or as agreed in an Individual Healthcare Plan (IHCP)
c) Prescribed dose, if appropriate
d) Expiry date, if appropriate

Any member of staff, on each occasion, will make a written record of medication/medical interventions administered on the 'Medical Form 1(Template D)

No child will be given medicine containing **aspirin** unless prescribed by a doctor.

Child's Role in Managing their own Medical Needs

After discussion with parents/carers, children who are competent will be encouraged to take responsibility for managing their own medicines and medical interventions.

Written permission from the parents/carers will be required for pupils to self-administer medicine(s)/medical intervention(s). The school's 'Parent/Carer Request for the Child's Self–administration of Medication/Medical Intervention (Template C & Template Ci for a child with Asthma) must be completed by parents/carers.

Written permission from the parents/carers will be required for pupils to carry medicine(s) or resources associated with a medical intervention(s). The school's 'Parent/Carer Request

for the Child's self–administration of Medication/Medical Intervention (Template C) must be completed by parents/carers.

Children who can take medicines or manage medical interventions independently may still require a level of adult support e.g. in the event of an emergency. In this situation agreed procedures will be documented in an IHCP.

Refusing Medication / Medical Intervention

If a child refuses to take their medication/medical intervention, staff will not force them to do so.
Refusal to take medication will be recorded and dated on the child's record sheet. Reasons for refusal to take medications/medical intervention must also be recorded as well as the action then taken by the member of staff.

Parents/carers will be informed as soon as possible. Where the child is potentially placing themselves at risk by refusal, parents/carers will be informed immediately.

Storage of Medicines/Medical Intervention Equipment and Resources

All children will know where their medicines/medical intervention equipment/resources are at all times and will be readily available as required.

Controlled drugs
Where controlled drugs are not an individual child's responsibility, they will be kept in a non-portable locked cabinet in a secure cupboard in the main office.

Controlled drugs will be easily accessible in an emergency as agreed with parents/carers or described in the child's IHCP.

Where controlled drugs are administered, records will be kept of any doses used and the amount kept on the premises.

Non-controlled drugs and medical resources
All medicines and medical equipment/resources will be stored safely as agreed with parents/carers or described in the child's IHCP.

Records

School will keep a record of all medicines/medical interventions administered to individual children on each occasion, including the following:

a) Name of pupil
b) Date and time of administration
c) Who supervised the administration
d) Name of medication
e) Dosage
f) A note of any side effects/reactions observed

g) If authority to change protocol has been received and agreed.

Record of Administration to an Individual Child (Template D) and Record of Medicine Administered to All Children (Template E).

TRAINING

Staff must not give prescription medicines or undertake healthcare procedures without appropriate training. A First Aid Certificate does NOT constitute appropriate training in supporting children with medical conditions.

All staff will be made aware of St Dunstan's policy for supporting pupils with medical conditions and their role in implementing that policy through for example whole school awareness training, involvement in development of IHCPs, staff briefing sessions etc.

Specialist training and advice will be provided by appropriate healthcare professionals, e.g. specialist epilepsy nurse, asthma training by school nurse etc, for staff involved in supporting pupils with medical conditions including the administration of relevant medicines/medical interventions.

Training for all staff will be provided on a range of medical needs, including any resultant learning needs, as and when appropriate.

Supporting a child with a medical condition during school hours is not the sole responsibility of one person.

Training will ensure that sufficient numbers of staff are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual healthcare plans. Induction training will raise awareness of St Dunstan's policy and practice on supporting pupils with medical condition(s).

Training will be sufficient to ensure staff are competent and have confidence in their ability to care for the child.
School will make every effort to ensure that specialist training will be completed as quickly as possible to ensure that the child is able to attend school safely.

A record of staff training carried out will be kept, identifying the date review or refresher training will be required where appropriate. 'Record of Staff Training' (Template F)

INDIVIDUAL HEALTH CARE PLANS (IHCP)

Where appropriate, an Individual Health Care Plan (IHCP) will be drawn up in consultation with the school, parents/carers, health professionals and any other relevant professionals.

The content of an individual child's IHCP will be dependent on the complexity of their needs and may include the following:

a) An overview (Pen Portrait/One Page Profile) of the child's needs and provision in place in school to manage those needs;
b) A description of the medical condition, its presentation (signs, symptoms, triggers etc) and impact on access to the school environment and learning opportunities;
c) Arrangements around administration of medication(s)/medical intervention(s);
d) Arrangements around management of medical emergency situations;
e) Arrangements around management and support for personal care needs, including intimate and invasive care e.g. catheterisation, toileting support, gastro-tube feeding etc;
f) Risk assessment for access to the school environment and curriculum;
g) Arrangements for evacuation in the event of an emergency;
h) The level of support required in school, who will provide this support, their training needs and cover arrangements for when they are unavailable;
i) How, if agreed, the child is taking responsibility for their own health needs;
j) A reference to staff confidentiality.

Appendix 2 is a Flow Chart to guide schools through deciding which elements of the IHCP are relevant to an individual child.

Individual Health Care Plans will be reviewed annually or sooner if needs change.

Intimate and Invasive Care

Cases where intimate or invasive care is required will be agreed on an individual basis. Decisions made about procedure and practice will be recorded within the pupils Individual Healthcare Plan IHCP and take account of safeguarding issues for both staff and pupils. (Please see intimate care policy)

OFF-SITE AND EXTENDED SCHOOL ACTIVITIES

Pupils with medical conditions will be actively supported in accessing all activities on offer including school trips, sporting activities, clubs and residential/holidays.

Preparation and forward planning for all off-site and extended school activities will take place in good time to ensure that arrangements can be put in place to support a child with a medical condition to participate fully.

St Dunstan's will consider what reasonable adjustments need to be put in place to enable children with medical conditions to participate safely and fully.

St Dunstan's will carry out a thorough risk assessment to ensure the safety of all pupils and staff. In the case of pupils with medical needs the risk assessment process will involve consultation with child, parents/carers and relevant healthcare professionals to ensure the pupil can participate safely. Please refer to Health and Safety Executive (HSE) Guidance on School Trips.

In some circumstances evidence from a clinician, such as a hospital consultant, may state that participation in some aspects offered is not possible. Where this happens school will make alternative arrangements for the child.

Arrangements will be in place to ensure that an IHCP can be implemented fully and safely when out of school. Risk assessment will identify how IHCPs will be implemented effectively off-site and where additional supervision or resources are required.

MANAGING EMERGENCIES AND EMERGENCY PROCEDURES

The Head Teacher will ensure that all staff are aware of the school's general risk management processes and planned emergency procedures.

Where a child has an IHCP this will clearly define what constitutes an emergency and describes what to do. This may include:

a) an Emergency Medical Protocol that details the actions to be taken by staff and supported by specialist training where relevant e.g. seizure management and administration of rescue medication;
b) a Personal Emergency Evacuation Plan (PEEP) that details the actions to be taken by staff to support the child's evacuation from the building, supported by specialist training where relevant e.g. use of an Evac chair; the Personal Emergency Evacuation Plan should also detail the actions to be taken by staff to support how staff will manage the child's medical needs during the evacuation e.g. ensuring appropriate medication is taken outside and is available whilst at the assembly point.

School has a procedure for contacting emergencies services (Template G) which is displayed in the appropriate places e.g. office, staff room etc.

CONFIDENTIALITY AND SHARING OF INFORMATION WITHIN SCHOOL

St Dunstan's is aware of the need to manage confidential information sensitively and respectfully, maintaining the dignity of the child and family at all time.

School will disseminate information to key members of staff involved in the child's care on a need-to-know basis, as agreed with parents/carers.

Where the child has an Individual Healthcare Plan (IHCP) this will be shared with key staff with regular briefings.

School will ensure that arrangements are in place to inform new members of staff of the child's medical needs.

School will ensure that arrangements are in place to transfer information on a child's medical needs to staff during any transition.

LIABILITY AND INDEMNITY

School insurance policies provide liability cover relating to the administration of medicines.

In the case of medical interventions, individual cover may be arranged for any specific healthcare procedures, including information about appropriate staff training and other defined requirements of the insurance policy.

The expectation is that only appropriately trained and insured staff will be involved in supporting medical interventions.

The school's insurance arrangements are displayed in the office reception area.

COMPLAINTS PROCEDURE

In the first instance parents/carers dissatisfied with the support provided should discuss their concerns directly with the Head Teacher or SENCo.

If, for whatever reason, this does not resolve the issue then a formal complaint can be made in writing to the school's governing body.

A copy of the school complaints procedure is available on the school website or from the school office.

11. UNACCEPTABLE PRACTICE

St Dunstan's considers that the **following constitute unacceptable practice**:

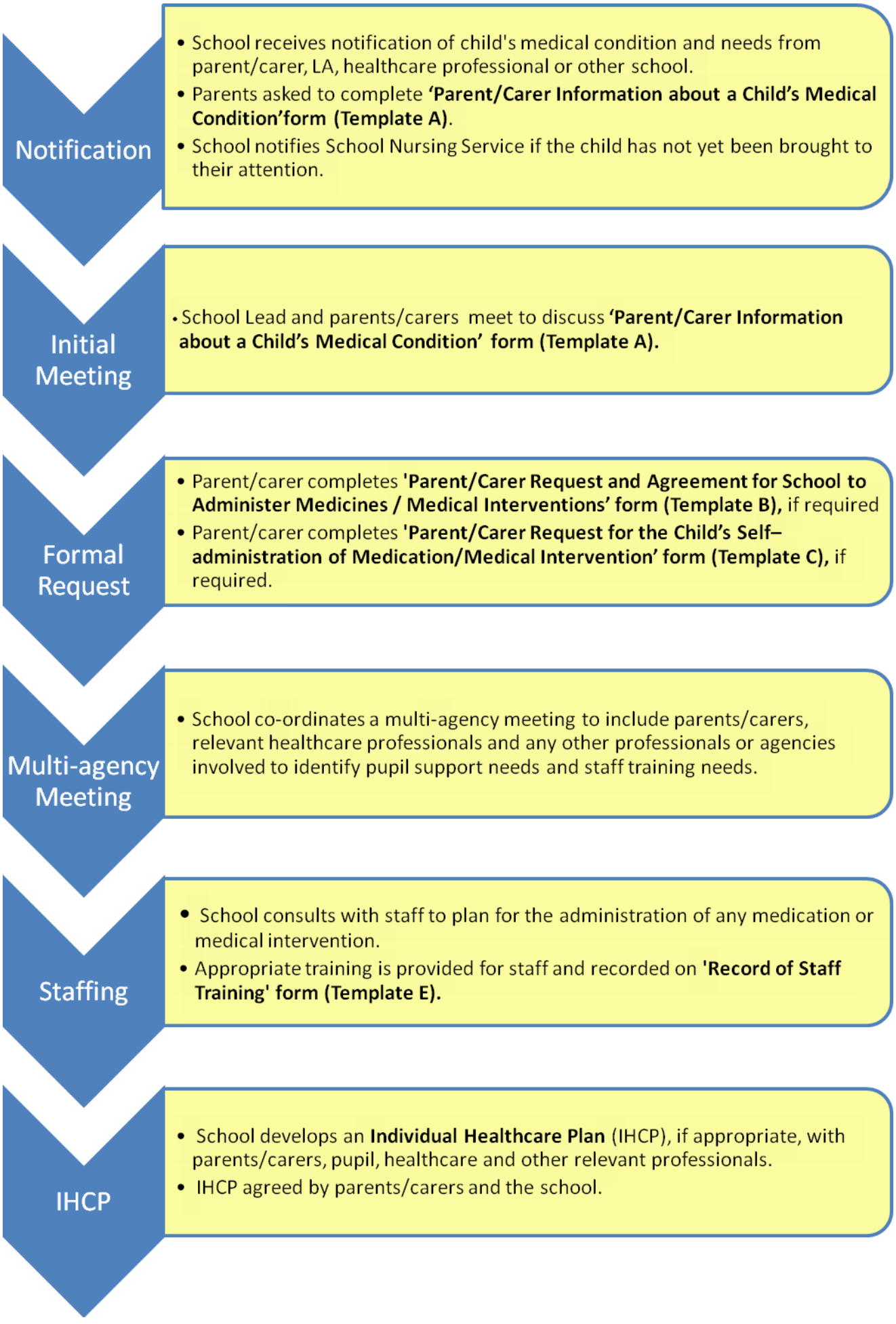
- Requiring parent/carers or otherwise making them feel obliged to attend school to administer medicines/medical interventions or provide medical support to their child, including around toileting issues – no parent/carer should have to give up working because the school is failing to support their child's medical needs;
- Preventing children from participating or creating unnecessary barriers to children participating in any aspect of school life, including trips, e.g. by requiring parents/carers to accompany the child.
- Preventing children from easily accessing and administering their medicines as and where necessary;
- Assuming that every child with the same condition requires the same treatment;
- Ignoring the views of the child and/or their parents/carers (although this may be challenged);
- Ignoring medical evidence or opinion (although this may be challenged);
- Sending children with medical conditions home frequently;
- Preventing children with medical conditions from staying at school for normal school activities, including lunch, unless this is specified in their IHCP;

- If the child becomes ill, sending them to the school office unaccompanied or with someone unsuitable;
- Penalising children for their attendance record if their absences are related to their medical condition e.g. hospital appointments;
- Preventing children from eating, drinking or taking toilet / other breaks whenever they need to in order to manage their medical condition effectively.

Appendices

Appendix 1

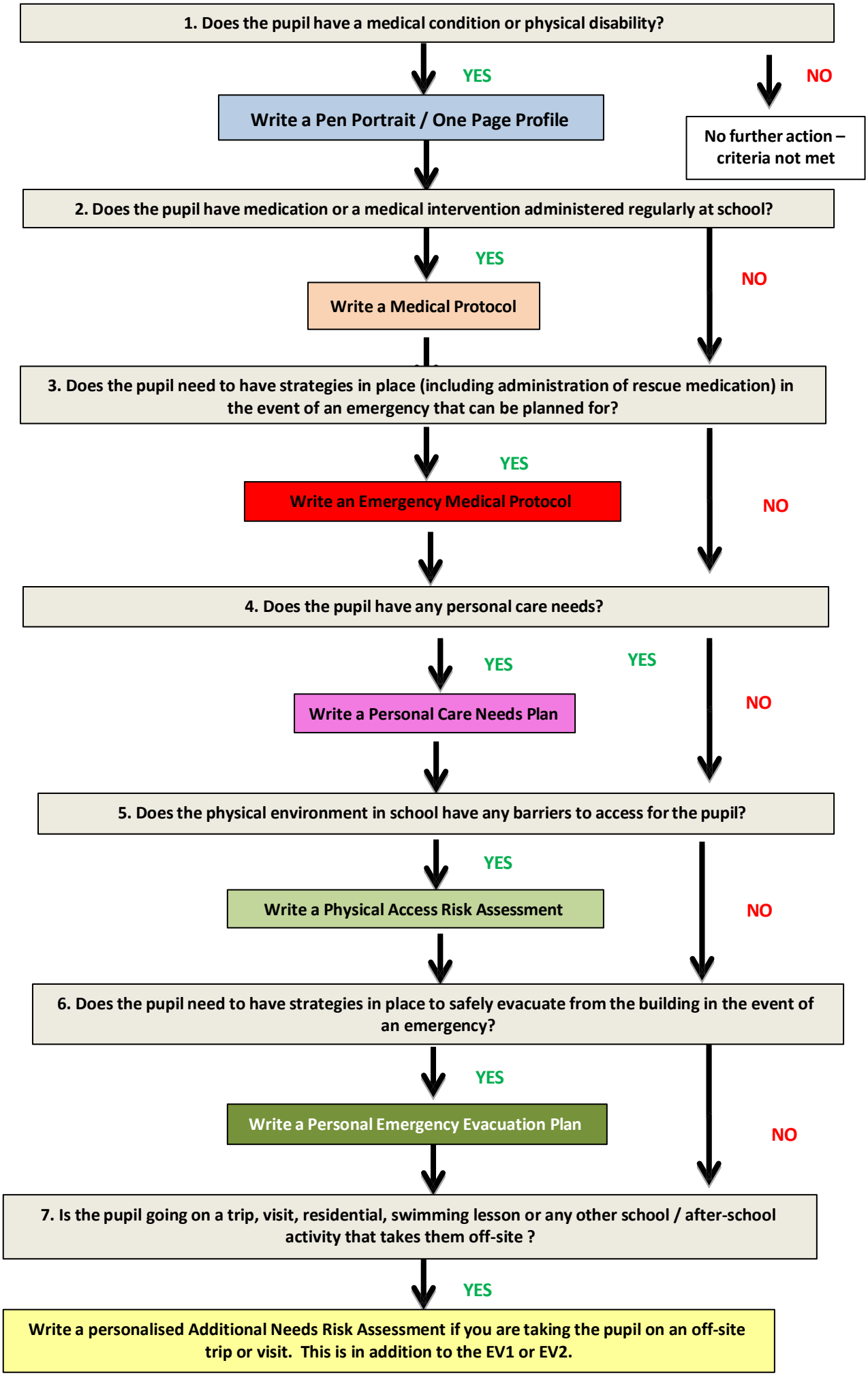
St Dunstan's Procedure following Notification of a Pupil's Medical Needs



Appendix 2

Individual Healthcare Planning (IHCP) Flow Chart

Flow Chart courtesy of Lancasterian Outreach and Inclusion Service (LOIS)



Templates

Template A

St Dunstan's RC Primary School
Parent/Carer Information about a Child's Medical Condition

Date	
Child's Full Name	
Group / Class / Form	
Date of Birth	
Child's Address	

Family Contact Information

1. Name	
Relationship to Child	
Phone no. (work)	
Phone no. (home)	
Phone no. (mobile)	

2. Name	
Relationship to Child	
Phone no. (work)	
Phone no. (home)	
Phone no. (mobile)	

Healthcare Professional Contact Information

GP (General Practitioner)

Name	
Medical Practice / Health Centre	
Phone no.	

Hospital / Clinic Consultant / Specialist Nurse

1. Name	
Position / Job	
Based at	
Phone no	
2. Name	
Position / Job	
Based at	
Phone no	

Community Health e.g. paediatrician, physiotherapist, occupational therapist

1. Name	
Position / Job	
Based at	
Phone no	
2. Name	
Position / Job	
Based at	
Phone no	

Child's Medical Information

Diagnosis / Condition(s)	

Regular Medicine

1. Name	
Time administered	
Side – effects	
Contra-indications	

Does the child require this medicine to be administered regularly e.g. every day during the school day? Y / N (please circle)

2. Name	
Time administered	
Side – effects	
Contra-indications	

Does the child require this medicine to be administered regularly e.g. every day during the school day? Y / N (please circle)

Medicine Administered in a Medical Emergency

Name	
Side - effects	
Contra-indications	

Does the child require this medicine to be administered in school?
Y / N (please circle)

Regular Medical Intervention e.g. catheterisation, suction/tracheostomy care

Name of intervention	
Time administered	
Equipment used	

Does the child require a medical intervention to be administered regularly e.g. every day during the school day? Y / N (please circle)

Mobility – movement and walking

Walking aids used	
Support needs	
Physiotherapy needs / programmes	

Personal Care

Dressing needs	
Eating / drinking needs	
Bathroom / Toilet needs	

Other Information

Parent / Carer Declaration and Signature

I agree that this is, to the best of my knowledge, up to date and accurate information about my child's current medical needs.

I agree to school informing the School Nursing Service about my child's needs, if this service is not already aware.

I agree to **inform school of any changes in medical needs or medication**, **immediately** and **in writing**.

Parent/ Carer's Full Name (Please print)

_____

Signature _____

Date _____

School Use Only	
Date Received	
Action(s)	
School Nursing Service	Service aware Y / N If no, date that School Nursing Service informed
Date Review Due	

St Dunstan's RC Primary School
Parent/Carer Request and Agreement for School to Administer Medicine(s) / Medical Intervention(s)

The school will not give your child medicine or carry out a medical intervention unless you complete this form to make a formal request to the Head Teacher / Principal. By signing this form you are also consenting to staff administering medicine or carrying out the medical intervention and sharing relevant information with staff, if the request is granted.

Child's Name	
Group / Class / Form	
Date of Birth	
Medical Condition(s)	
Date	

Medicine

1. Name of Medicine	
Dosage	
Method of Administration	
Timing(s)	
Side-effects	
Other information	
Potential Emergency Situations	

Self – administration Y / N (Please circle)

Note: if self – administration of medicine required then a separate form 'Parent/Carer Request for the Child's Self–administration of Medication/Medical Intervention' must *also* be completed.

2. Name of Medicine	
Dosage	
Method of Administration	
Timing(s)	
Side-effects	
Other information	
Potential Emergency Situations	

Self – administration Y / N (Please circle)

Note: if self – administration of medicine required then a separate form 'Parent/Carer Request for the Child's Self–administration of Medication/Medical Intervention' must *also* be completed.

Medical Intervention e.g. catheterisation, tracheostomy care

Type of Intervention	
Procedure	
Timing(s)	
Other Information	
Potential Emergency Situations	

Self – administration Y / N (Please circle)

Note: if self – administration of medicine required then a separate form 'Parent/Carer Request for the Child's Self–administration of Medication/Medical Intervention' must *also* be completed.

Parent/ Carer Contact Details

Name	
Relationship to Child	
Daytime contact no.	
Address	

Parents/Carers Declaration and Signature

The above information is, to the best of my knowledge, accurate at the time of writing.

If agreed by the Head Teacher / Principal, I give consent to school staff to administer medicine / medical intervention in accordance with the school policy and following specialist training, where appropriate.

I will **inform the school immediately**, **in writing**, if there is any **change in dosage** or **frequency of the medication**, if the **medicine is stopped** or if there are any **changes to the procedure** for the delivery of a medical intervention.

Parent/Carer's Full Name (Please print)

_____

Signature _____

Date _____

School Use Only	
Date Received	
Action(s)	
Date Agreed by Head Teacher / Principal	
Date Review Due	

Template C

St Dunstan's RC Primary School
Parent/Carer Request for the Child's Self–Administration of Medication/Medical Intervention

Child's Details

Child's Name	
Group / Class / Form	
Date of Birth	

Parent/Carer's Contact Details

Parent/ Carer Full Name	
Phone no. (home)	
Phone no. (work)	
Phone no. (mobile)	

GP

Name of GP	
Medical Practice / Health Centre	
Phone no.	

Parent/Carer Declaration and Signature

I confirm that I have completed the Parent/Carer Request and Agreement for School to Administer Medicine(s) / Medical Intervention(s) (Template B) form.

I request and agree to the following medicine(s) or medical intervention(s) being self-administered in school by my child: (please add the names of the medicines or type of intervention)

1. _____
2. _____
3. _____

I request and agree to: (please tick from the following)

☐ my child carrying the stated medicine(s) independently and safely

☐ school holding the stated medicine(s) safely for my child to collect and administer independently

☐ school holding the stated medicine(s) safely for my child to collect and administer independently under the supervision of a member of staff

☐ my child carrying any equipment or resources required for the stated medical intervention independently and safely

☐ school holding the equipment or resources required for the stated medical intervention safely for my child to collect and administer independently

☐ school holding the equipment or resources required for the stated medical intervention safely for my child to collect and administer independently under the supervision of a member of staff

I undertake to ensure that the school has adequate supplies of stated medicines(s) or resources required to administer the stated medical intervention(s).

I undertake to ensure that stated medicine(s) or resources: are in the original container as dispensed by the pharmacy; have the pharmacy label stating the child's name, dosage and timing of administration; have not passed the expiry date; have details of storage instructions, if appropriate.

I undertake to inform the school **in writing** if there are any **changes to medicine(s) or medical intervention(s)** e.g. change of dose, change of timings or frequency or if administration is stopped.

Parent/ Carer's Full Name (Please print)

_____

Signature _____

Date _____

School Use Only	
Date Received	
Action(s)	
Date Review Due	

Template Ci

St Dunstan's Primary School Asthma/Inhaler Care Plan

Child's Name		
DOB		
Address		
Class		
Parent / Guardians name (1st contact)		(2nd contact)
Telephone:	Home:	
	Work:	
	Mobile:	
GP	Name:	
	Surgery:	
	Telephone:	

Does your child tell you when he needs their inhaler? Yes /No/ Not always

Does your child need help taking their inhaler? Yes/ No

Does your child need to take their inhaler **before physical activity?** Yes/No

If only required during a common cold please circle: With colds only

Medication:	**Strength**	**Dose**	**When to be taken**

My child's asthma/wheeze triggers: (*please tick the appropriate boxes of your child's triggers)*

Cold air		Colds / viral infections		Pollen		Stress/anxiety	
Changes in weather		Exercise		Dust		Emotion/ Excitement	
Damp / mould		Night		Pets		Cigarette smoke	

Relief treatment when needed

For cough, wheeze breathlessness or sudden chest tightness, give or allow the child to take the inhaler below. After 5-10 minutes the child should feel better & be able to return to normal activities.

Medication	**Strength**	**Dose**	**When to be taken**
Inhaler Expiry date			

In an Emergency

An emergency is when any of the following happen:

1) The reliever inhaler doesn't help.
2) Symptoms of cough, wheeze, breathlessness or tight chest get worse.
3) The child is too breathless or exhausted to speak or is usually quiet.
4) The child lips are blue.

What to do

Continue to give the child 1 puff of reliever inhaler (blue) every minute for 4 minutes (4 puffs). Children under 2 years 2 puffs

After 5-10 minutes the child should feel better & be able to return to normal activities.

If the reliever inhaler has no effect after 5-10 minutes, call 999 for an ambulance

Continue to give the reliever inhaler 1 puff every minute until the ambulance arrives. Inform the child's parents.School hold a generic salbutamol reliever inhaler, in unforeseen circumstances this may be administered if required. **This would only happen in an emergency situation**

Parent/Guardian name _____

Signiture_____Date_____

_____

Template D

St Dunstan's RC Primary School

Record of Administration of Medicines/Medical Intervention to an Individual Child e.g. under an IHCP

Child's Name _____ Date of Birth _____ Group / Class / Form

Date of Administration	Name of Medicine / Medical Intervention	Dose Given (if appropriate)	Time	Observations e.g. side effects, reactions	Name of Staff Administrating / Supervising	Signature

Template E

St Dunstan's RC Primary School

Record of Administration of Medicine(s) to Children without an IHCP

Date	Name of Child	Group / Class / Form	Name of Medicine	Dose Given	Time	Observations e.g. side effects, reactions	Name of Staff	Signature

Template F

St Dunstan's RC Primary School
Record of Staff Training

Name of Staff Member	
Type of Training Received	
Date Training Completed	
Training Provider	
Name of Trainer	
Profession and Title	

Trainer Declaration

I confirm that _____(name of member of staff) has received the training detailed above.

I recommend that this updated annually / every two years / other _____ (please delete as appropriate).

Trainer's Signature _____

Date _____

Member of Staff Declaration

I confirm that I have received the training detailed above.

Staff Signature _____

Date _____

School Use Only	
Date Review Due	

St Dunstan's RC Primary School
Procedure for Contacting Emergencies Services

Requesting an Ambulance

Dial 999.
Speak clearly and slowly.
Be ready to repeat information if asked.

You will be asked for three key pieces of information:

1. your telephone number
2. the location you want the ambulance to be sent to
3. the reason for the call

1. School's telephone number is _____

2. School Name _____

   School Address _____

   School Postcode for SAT NAV _____

   Best entrance to the school site _____

   Exact location of the patient within the school

   STATE THAT THE AMBULANCE WILL BE MET BY A MEMBER OF STAFF WHO WILL TAKE THE CREW TO THE PATIENT

3. Name of Child

   Age of Child

   Description of Child's Symptoms

   Inform if underlying Medical Condition

   Inform if any emergency rescue medication has been administered *e.g. midazolam - epilepsy, epipen - allergies, glucose – diabetes*

   Inform if any emergency procedures have been carried out *e.g. suction/trache tube replacement – tracheostomy, button replacement – gastro feed*

On Arrival of the Ambulance

- Member of staff to meet crew and escort crew to the patient
- Member of staff to pass over empty packaging of any rescue medication administered, if appropriate.
- In the case of a child with complex needs, member of staff to pass over the child's IHCP or summary letter stating child's medical condition and medication
- Member of staff to travel in the ambulance with the patient