**ADAMSDOWN PRIMARY SCHOOL**



**Aim High Be Kind Show Respect**

**Healthcare Policy**

**Emma Thomas – Head Teacher**

**February 2018**

**Reviewed April 2021**

1. **Key Principles**

The staff and governors of Adamsdown Primary School are wholly committed to pursuing a policy of inclusive education that welcomes and supports pupils with healthcare needs. This policy is designed to ensure that all pupils are able to access their education in a supportive environment, which is sensitive to any healthcare needs. It supports the management of medication and healthcare needs in school, and to support individual with specific healthcare needs.

At Adamsdown Primary School we understand that healthcare needs should not be a barrier to learning, so we ensure that all staff understands their duty of care to children and young people in the event of an emergency and feel confident in knowing what to do in an emergency.

It identifies the roles and responsibilities of school, parents and pupils. Effective communication and cooperation between home and school will enable this to be achieved.

Our policy has been written in consultation with a wide range of local key stakeholders within school and complies with the Welsh Government Guidance ‘Supporting Pupils with Healthcare Needs’ which was published on 30th March 2017. We also acknowledge and can refer to Cardiff Local Authority toolkit entitled ‘Meeting the Healthcare Needs of Children and Young People in Cardiff – A toolkit for Early Years Setting and Schools’ (April 2017) for further information, in particular, the management of specific medical conditions.

* 1. Each child including pupils with healthcare needs is an individual developing in their own individual way; therefore, it is our aim to encourage the children to see for themselves their own talents, to foster self-confidence, and to develop a sense of personal adequacy, so that each child can cope with the environment, at a level appropriate to that child.
	2. We endeavour to ensure that each child will be well balanced, happy and able to develop sensible attitudes to learning, so that they are able to find enjoyment in all aspects of schoolwork, and gain satisfaction from their own achievements.
	3. Healthcare issues affect each pupil individually and support from the school may have an impact on their quality of life and future chances. Therefore, governing bodies and head teachers will ensure arrangements focus on meeting the needs specific to the pupils and consider how this impacts on their education, attainment and wellbeing. Arrangements will give pupils and parents’ confidence that provision is suitable and effective.
1. **School’s legal requirements**
	1. Section 175 of the Education Act 2002 places a duty on local authorities and governing bodies to make arrangements to ensure their functions are exercised with a view to safeguarding and promoting the welfare of children in school or another place of learning. This includes supporting pupils with healthcare needs.
	2. In meeting the duties under section, 175 of the Education Act 2002, local authorities and governing bodies must have regard to guidance issued by the Welsh Ministers under this section.
	3. Section 21 (5) of the Education Act 2002 places a duty on governing bodies to promote the wellbeing of learning at the school so far as related to the matters mentioned in section 25(2) of the Children Act 2004, which includes physical and mental health and emotional wellbeing, education, training and recreation, and social well being
	4. The non-statutory advice contained within the document is issued in exercise of the Welsh Ministers’ duty to promote the education of the people of Wales and their power in relation to the promotion or improvement of the economic, social and environmental wellbeing in Wales
	5. Being mindful of the Social Services and Wellbeing (Wales) Act 2014. Adamsdown Primary School will be fully aware of this approach and ensure assistance to pupils is provided using a holistic approach.
2. **Roles and responsibilities**
	1. **Schools**

 Adamsdown Primary School will develop and implement arrangements in line with legal requirements

3.2 **Governing Bodies**

Governing bodies will oversee the development and implementation of arrangements, which will include:

* Complying with applicable statutory duties, including those under the Equality Act 2010 (e.g. the duty to make reasonable adjustments in respect of pupils with healthcare needs if they are disabled)
* Having a statutory duty to promote the wellbeing of pupils. Schools will give consideration to how they can meet these needs, including providing pupils access to information and material aimed at promoting spiritual and moral wellbeing and physical and mental health (Article 17 of the UNCRC)
* Considering how they can support pupils to develop the skills, knowledge and emotional resilience required to uphold their rights, and the rights of others
* Ensuring the roles and responsibilities of all those involved in the arrangements to support the healthcare needs of pupils are clear and understood by all those involved, including any appropriate delegation of responsibilities or tasks to a head teacher, member of staff or professional as appropriate
* Working collaboratively with parents and other professionals to develop healthcare arrangements to meet the best interests if the pupils
* Developing and implementing effective arrangement to support pupils with healthcare needs. This will include a policy on healthcare needs and where appropriate, IHPs for particular pupils
* Ensuring arrangements are in place for the development, monitoring and review of the healthcare needs
* Ensuring the arrangements are in line with other relevant policies and procedures, such as health and safety, first aid, risk assessments, the Data Protection Act 1998, safeguarding measures and emergency procedures
* Ensuring robust systems are in place for dealing with healthcare emergencies and critical incidents, for both on and off site activities, including access to emergency medication such as inhalers or adrenaline pens
* Ensuring staff with responsibility for supporting pupils with healthcare needs are appropriately trained
* Ensuring appropriate insurance cover is in place, any conditions are complied with and staff are clear on what this means for them when supporting pupils
* Having an infection prevention policy that fully reflects the procedures laid out in current guidance
	1. **Head teacher/teacher in charge:**

The head teacher will ensure arrangements to meet the healthcare needs of their pupils are sufficiency developed and effectively implemented. To include:

* Working with the governing body to ensure compliance with applicable statutory duties when supporting pupils with healthcare needs, including duties under the Equality Act 2010
* Ensuring the arrangements in place to meet pupils healthcare needs are fully understood by all parties involved and acted upon and such actions maintained. Day to day pupils’ healthcare needs are managed by Office Manager and Deputy Head teacher. The head teacher directly supervise this arrangement as part of the regular reporting and supervision arrangements
* Ensuring the support put in place focuses on and meets the individual pupil’s needs, also known as person centred planning
* Extending awareness of healthcare needs across the school in line with the pupils’ right to privacy. This may include support, catering and supply staff, governors, parents and other pupils
* Appointing a named member of staff who’s responsible for pupils with healthcare needs, liaising with parents, pupils, the home tuition service, the local authority, the key worker and others involved in the pupils’ care
* Ensuring a sufficient number of trained staff are available to implement the arrangements set out in all IHPs, including contingency plans for emergency situations and staff absence
* Having the overall responsibility for the development of IHPs
* Ensuring that pupils have an appropriate and dignified environment to carry out their healthcare needs e.g. private toilet areas for catheterisation
* Checking with the local authority whether particular activities for supporting pupils with healthcare needs are appropriately covered by insurance and many staff aware of any limits to the activities that are covered
* Ensuring all pupils with healthcare needs are appropriately linked with the school’s health advice service (school nurse)
* Providing annual reports to the governing body on the effectiveness of the arrangements in place to meet the healthcare needs of pupils
* Ensuring all pupils with healthcare needs are not excluded from activities they would normally by entitled to take part in without a clear evidence based reason
* Notifying the local authority when a pupil is likely to be away from the school for a significant period, e.g. three weeks due to their healthcare needs. Ultimately, what qualifies a period of absence as ‘significant’ in this context depends upon the circumstances and whether the setting can provide suitable education for the pupils. Shorter periods of absence may be significant depending upon the circumstances
* Being mindful of the Social Services and Wellbeing (Wales) Act 2014. Adamsdown Primary Schools is fully aware of this approach and ensure assistance to pupils is provided using a holistic approach.
	1. **Teachers, Support Staff and all members of Staff (e.g. catering staff and reception staff);**

Any staff member within Adamsdown Primary School may be asked to provide support to pupils with healthcare needs, including assisting or supervising the administering of medicines. This role is voluntary. Staff members must receive sufficient and suitable training and achieve the necessary level of competence before they take on the responsibility.

In addition to the training provided to staff that have volunteered or are contracted to support pupils with healthcare needs, Adamsdown Primary School will ensure staff:

* Fully understand the school’s healthcare needs policy and arrangements
* Are aware of which pupils have more serious or chronic healthcare needs, and, where appropriate, are familiar with these pupils’ IHPs. This includes knowing how to communicate with parents and what the triggers for contacting them are, such as when the pupils is unwell, refuses to take medication or refuses certain activities because of their healthcare needs
* Are aware of the signs, symptoms and triggers of common life threatening medical conditions and know what to do in an emergency. This includes knowing who the first aiders are and seeking their assistance if a medical emergency takes place
* Fully understand Adamsdown Primary school’s emergency procedures and be prepared to act in an emergency
* Ask and listen to the views of pupils and their parents, which will be taken into consideration when putting support in place
* Ensure pupils (or their friends) know who to tell if they feel ill, need support or changes to support
* Listen to concerns of pupils if they feel ill at any point and consider the need for medical assistance (especially in the case of reported breathing difficulties)
* Make sure pupils with healthcare needs are not excluded from activities they to take part in without a clear evidence based reason, including any external trips/visits. This includes ensuring pupils have access to their medication and that an appropriately trained member of staff is present to assist where required
* Are aware if bullying issues and emotional wellbeing regarding pupils with healthcare needs, and are prepared to intervene in line with Adamsdown Primary School’s policy
* Are aware that healthcare needs can impact on a pupils’ ability to learn and provide extra help when needed
* Support pupils who have been absent and assist them with catching up on missed work – this may involve working with parents and specialist services
* Keep parents informed of how the healthcare needs is affecting the pupils Adamsdown Primary School. This may include reporting any deterioration, concerns or changes to pupils or staff routines.
	1. **Parents/Carers/Pupils**

It is vital that pupils and parents are actively involved in the planning of support and management of healthcare needs. Meeting the individual’s needs will be at the centre of decision making and processes. The UNCRC states pupils will have access to appropriate information essential for their health and development and have opportunities to participate in decisions affecting their health.

* + 1. **Parents and pupils will:**
* Receive updates regarding healthcare issues/changes that occur within Adamsdown Primary School
* Be involved in the creation, development and review of an IHP (if any). The parent and pupils may be best placed to provide information about how their healthcare needs affect them. They will be fully involved in discussions about how the pupils’ healthcare needs will be met in the school, and contribute to the development of, and compliance with, their IHP
* Provide the school with sufficient and up to date information about healthcare needs, including any guidance regarding the administration of medicines and/or treatment from healthcare professionals. Where are appropriate, pupils will be encouraged and enabled to manage their own healthcare needs
* Inform school of any changes such as type of medication, dosage and administration instructions
* Ensure nominated adult is contactable at all times and all necessary forms are completed and signed
* Inform the school if their child has/had an infectious disease or condition while in attendance.
	1. **Local Authority**

Local Authorities will ensure education provision is available to pupils, and:

* Must make reasonable adjustments to ensure disabled children and young people are not at a substantial disadvantage compared with their peers. This duty is anticipatory. For example, pupils will not be disadvantaged when leaving primary school and beginning secondary school. In practical terms, this means adjustments must be planned and implemented in advance to prevent any disadvantage. Discussions around responsibility for provision will not impact on the delivery of service, as delays could be detrimental to the education and wellbeing of the pupils
* Must make arrangements to promote cooperation between various bodies or persons, with a view to improving, among other things, the wellbeing of children in relation to their physical and mental health, their education, training and recreation. When making these arrangements, local authorities will ensure appropriate agreements are in place for data sharing. This could be through working within the Wales Accord on Sharing Personal Information (WASPI) Information Sharing Protocols or Data Disclosure Agreements
* Must make reasonable provision of counselling services for young people aged 11 – 18 and pupils in Year 6 of primary school. Within schools, this provision will complement the different approaches already in place to support the health, emotional and social needs of pupils
* Will work with schools to ensure pupils with healthcare needs received a suitable education. Where a pupil of compulsory school age would not receive a suitable education for any period because of their health, the local authority has a duty to make arrangements to provide suitable education. If a pupils is over that compulsory school age but under 18, the local authority may make such arrangements
* Will provide support, advice and guidance, including how to meet the training needs of school staff, so that governing bodies can ensure the support specified within the individual healthcare plan (IHP) can be delivered effectively.
	1. **NHS Wales school health nursing service, health and other professionals, third sector organisations and other specialist services**

Healthcare and practical support can be found from a number of organisations. Schools have access to a health advice service. The scope and type of support the service can offer may include:

* Offering advice on the development of IHPs
* Assisting in the identification of the training required for the educations setting to successfully implement IHPs
* Supporting staff to implement a pupils’ IHP through advice and liaison with other healthcare, social care and third sector professionals

Health advice and support can also be provided by specialist health professionals such as GPs, paediatricians, speech and language therapists, occupational therapists, physiotherapists, dieticians and diabetes specialist nurses. In addition, third sector voluntary bodies can provide advice and practical support. Proactively engaging with specialist services can provide practical help when writing and implementing IHPs. They can also provide training and awareness raising resources, including video links.

* 1. **Creating an accessible environment**

Local authorities and governing bodies will ensure their schools are inclusive and accessible making reasonable adjustments for pupils with healthcare needs. This includes the following:

4.1 **Physical access to Adamsdown Primary School buildings**

A duty is placed on local authorities to produce a written accessibility strategy for all schools they are responsible under the Equality Act 2010. Any such strategy is expected to address:

*‘improving the physical environment of schools for the purpose of increasing the extent to which disabled pupils are able to take advantage of education and benefits, facilities or services provided or offered by schools’* (schedule 10, Equality Act 2010)

Similarly, individual schools must carry out accessibility planning and are under a duty to prepare an accessibility plan following the same principles are the strategies prepared by the local authority.

* 1. **Reasonable adjustments – auxiliary aids or services**

The Equality Act 2010 places a duty on learning establishments to make ‘reasonable adjustments’ for pupils who are disabled as defined by the Act. In regard to these pupils, auxiliary aids or services (with the appropriate number of trained staff) must be provided.

* 1. **Day trips and residential visits**
		1. Governing bodies will ensure the Adamsdown Primary School actively supports all pupils with healthcare needs to participate in trips and visits. Governing bodies must be aware of their legal requirements to make reasonable adjustments to trips and residential visits ensuring full participation from all pupils.
		2. Staff will be aware of how pupils’ healthcare needs may impact on participation, and seek to accommodate any reasonable adjustments, which would increase the level of participation by the pupils. Staff will consider how to accommodate the sharing of personal information with third parties if necessary for off-site activities (in compliance with the Data Protection Act 1998 and in respecting the pupils’ rights to privacy). This may include information about the healthcare needs of pupils, what to do in an emergency and any additional support, medication or equipment needed.

4.3.3 Additional safety measures to those already in place in the setting may be necessary to support pupils with health care needs during visits or activities outside of the normal school timetable. Arrangements for taking medication and ensuring sufficient supplies for residential visits may be required.

4.3.4 All staff supervising visits will be aware of a pupil’s healthcare needs and any medical emergency procedures. Summary sheets held by all staff, containing details of each young person’s needs and any other relevant information provided by parents, is one way of achieving this. If appropriate, a volunteer staff member will be trained in administering medication, if they have not already been so trained, and will take responsibility in a medical emergency.

Parents may be asked to supply:

* Details of medical conditions
* Emergency contact numbers
* The pupils’ GP’s name, address and phone number
* Information on whether the pupils has spent a night away from home before and their ability to cope effectively
* Written details of any medication required (including instructions on dosage/times)
* Parental permission if the young people needs to administer their own medication or agreement for a volunteer staff member to administer
* Information on any allergies/phobias
* Information on any special dietary requirements
* Information on any toileting difficulties, special equipment or aids to daily living
* Special transport needs for pupils and young people who require help with mobility
* ‘Fit to travel’ certificate written by the GP/consultant if the child has a significant medical need (without this the insurance maybe invalid)

4.4.  **Social Interactions**

4.4.1 The governing body will ensure the involvement of pupils with healthcare needs is adequately considered in structured and unstructured social activities, such as during breaks, breakfast club, productions, after school clubs and residential visits

4.4.2 All staff are aware of the social barriers to pupils with healthcare needs may experience and how this can sometimes lead to bullying and social exclusion. A proactive approach is needed to remove any barriers.

4.5 **Exercise and physical activity**

4.5.1 Adamsdown Primary School fully understands the importance of all pupils taking part in physical activities and staff will make appropriate adjustments to sports and other activities to make them accessible to all pupils, including after-hours clubs and team sports.

4.5.2 Staff are made fully aware of pupils’ healthcare needs and potential triggers. They will know how to respond appropriately and promptly if made aware that a pupil feels unwell. They will always seek guidance when considering how participation in sporting or other activities may affect pupils with healthcare needs.

4.5.3 Separate ‘special provisions’ for particular activities will be avoided, with an emphasis instead on activities made accessible for all. Where this might not be possible, advice from healthcare or physical education professionals and the pupils will be sought.

4.5.4 Staff will also understand that it may be appropriate for some pupils with healthcare needs to have medication or food with them during physical activity; such pupils will be encouraged to take the medication or food when needed.

4.6 **Food Management**

4.6.1 Where food is provided by or through Adamsdown Primary School, consideration must be given to dietary needs of pupils, e.g. those who have diabetes, coeliac disease, allergies and intolerances

4.6.2 Where a need occurs, Adamsdown Primary School will in advance provide menus to parents and pupils, and signpost them to Cardiff School Catering services at [www.cardiff.gov.uk/schoolcatering](http://www.cardiff.gov.uk/schoolcatering) with complete lists of ingredients and nutritional information. Gluten and other intolerances or allergens must be clearly marked. Providing information will help facilitate parent and catering teams’ collaborative working. This is especially important when carbohydrate counting is required. Consideration will be given to availability of snacks. Sugar and gluten free alternatives will always be available. As some conditions require high calorific intake, there will be access to glucose rich food and drinks.

4.6.3 Food provided for trips must reflect the dietary and treatment needs of the pupils taking part. Food provided for snacks in classroom settings will also take the dietary and treatment needs of these pupils into account. While healthy school and ‘no sweets’ policies are recognised as important, pupils with healthcare needs may need to be exempted from these policies. Pupils needing to eat or drink as part of their condition will not be excluded from the classroom or put in isolation.

**4.7 Risk assessments**

4.7.1 Staff will be clear when a risk assessment is required and be aware of the risk assessment systems in place. They will start from the premise of inclusion and have built into them a process of seeking adjustments or alternatives activities rather than separate provision.

4.7.2 In addition, there are duties under the Equality Act 2010 to prepare and implement accessibility strategies and plans. These strategies and plans deal with matters related to increasing participation of disabled pupils.

1. **Sharing Information** –

 Governing bodies will ensure healthcare needs arrangements, both schools policies and IHPs, are supported by clear communication with staff, parents and other key stakeholders to ensure full implementation. It is essential that all information is kept up to date. All information sharing techniques such as staff noticeboards and school intranets must be agreed by the pupils and parent in advance of being used, to protect confidentially.

5.1 **Teachers, supply teachers and support staff (this may include catering staff and relevant contractors)**

5.1.1 Staff will have access to the relevant information, particularly if there is a possibility of an emergency situation arising. How this is done will depend on the type and size of the setting and could include:

* Following appropriate consent, a list in the staff room, main office and kitchen is used to display information on high risk health needs, first aiders and certificates, emergency procedures etc. pupils’ right to privacy must be taken into account.

5.2 **Parents and pupils**

5.2.1 Parents and pupils will be active partners, and to achieve this the Adamsdown Primary School will make parents fully aware of the care their child receives. Parents and pupils will also be made aware of their own rights and responsibilities. To help achieve this school will:

* Make healthcare policies easily accessible in hard copy in the main office and a copy to class teacher.
* Provide the pupils/parents with a copy of the information sharing policy. This will state the type of bodies and individuals with whom the pupils’ medical information may be shared
* Ask parents to sign a consent form, which clearly details the bodies, individuals and methods through information will be shared. Sharing medical information can be a sensitive issue and the pupils will be involved in any decisions. Adamsdown Primary Schools will keep a list of what information has been shared with whom and why, for the pupils/parent to view on request
* Consider including a web link to the healthcare needs policies in relevant communications sent to parents, and within the pupils’ IHP
* Include school councils, ‘healthy schools’ and other pupils groups in the development of the setting’s healthcare needs arrangements, where appropriate
* Consider how friendship groups and peers may be able to assist pupils, e.g., they could be taught the triggers and signs of issues for a pupil, know what to do in an emergency, and who to ask for help. Adamsdown Primary School will discuss with the pupils and parents first and decide if information can be shared.

6. **Procedures and record keeping for the management of pupilss’ healthcare needs**

6.1. Adamsdown Primary School has procedures which state the roles/responsibilities of all parties involved in the identification, management and administration of healthcare needs. The following documentation is maintained in the main office…

* Contact details for emergency services
* Parental agreement for educational setting to administer medicine
* Head of Adamsdown Primary School agreement to administer medicine
* Record of medicine stored for and administered to an individual pupils
* Record of medicines administered to all pupils by date
* Staff training record administration of medicines
* Medication incident form

6.2 New records will be completed when there are changes to medication or dosage. The learning setting will ensure that the old forms are clearly marked as being no longer relevant and stored in line with their information retention policy. These forms and templates can be found in Appendix 1. Electronic versions can be found on the Welsh Government website.

6.2.1. All administration of medication must be recorded on the appropriate forms. If a pupil refuses their medication, staff will record this and follow the defined procedures where parents will be informed of this non-compliance as soon as possible.

7 **Storage, access and the administration of medication and devices**

Pupils may require medication at setting for many reasons and this will only be administered with prior agreement and consent given by the parent/legal guardian**.** Medicines will only be given if prescribed by the GP. No child under 16 will be given medicines containing Aspirin.

A pupils requiring medication will require an Individual Healthcare Plan (IHP).

**7.1 Arrangements to give medication in setting**

* A parental request form will be completed each time there is a request for medication to be administered (Form 3A and 3B in Appendix 1) by setting staff, or for a pupils to self-administer their own medication. This arrangement must be agreed, documented and dated by the Head teacher. A copy must be kept on file.
* In the case where medication maybe a long term arrangement, a letter must accompany the request from the pupils’ GP or consultant explaining this.
* Amendments to the medication will only be accepted in writing from a health professional and this will again be kept on file. **Verbal messages will not be accepted.**

**7.2 Receiving medication in Setting**

 No medication will be accepted into an Adamsdown Primary School unless it is clearly labelled with the:

* + Pupils’ name
	+ Name and strength of medication
	+ Dosage, frequency and time the medication will be given
	+ Expiry date
	+ Advice about storage

**7.3 Storage of medication**

* Medication will be stored in a locked room away from other children and young people. The key will be kept in an accessible place known to the designated members of staff. Some medications require refrigeration. If storage in a refrigerator is required this will be in a sealed container that is clearly labelled. All medicines must be clearly labelled. Further advice can be obtained from the **COSHH guidelines, Control of Substances Hazardous to Health, 2002[[1]](#footnote-1)**.

**7.4 Administering medication**

* Any staff willing to administer medication must receive appropriate training and guidance, and be aware of any possible side effects of the medication. This can be found in the information leaflet.
* Parents must not send the medication to setting in pre-drawn doses/syringes (unless this is how it is dispensed by the pharmacist) or in drinks. It must come in the original packaging with a pharmacy label intact. There must be a syringe provided to help in the measurement of the correct dose.
* Medicines must only be given according to the prescription given by the GP. Parents will ensure a copy of this is available for the setting. Settings require written notification from the GP will doses change or medications change.
* Medicines will not be given if they are out of date. Parents will need to replace the medicines immediately and it is the parent’s responsibility to dispose of any unwanted medicines.
* It is best practice that there will be two members of staff to check the medication when it is time to administer it. The following details will be checked:
* **Right Pupils** (name and date of birth)
* **Right Medicine** (staff will be aware of the purpose of the medication)
* **Right Dose** (measured using a syringe)
* **Right Route** (orally/gastrostomy/nasogastric)
* **Right Time**
* The pupils may self-administer some medications e.g. asthma inhalers. It will be clear in the forms relating to medications in setting whether the pupil requires supervision or not. It is good practice to record when a pupil has medication even if self-administering.
* Appropriate measures will be put in place or alternative arrangements if named staff are unavailable or absent.
* There will be a completed form (Form 5 & 6 in Appendix 1) to show the pupils’ name and DOB, the date, time and medication name and dose and two staff will sign this. Accurate recording is of the utmost importance.
* Staff will not give any medication if a medical judgement is required to determine the need unless an emergency but this will be in accordance with the agreed IHP.

**7.5 Hygiene and Infection Control**

* All staff will be familiar with normal procedures for avoiding infection and follow basic hygiene procedures. Staff will have access to protective disposable gloves and take care when dealing with spillages of blood or other body fluids and disposing of dressing or equipment.

**7.6 Disposal of medications**

* Medications will always be returned to the parent to be disposed of. If this is not possible any unused medications will be returned to a local pharmacy
* Medications will not be disposed of in sinks or toilets
* Some medications (i.e. for diabetes) are pre-assembled and contain a needle. Sharps boxes are essential for the disposal of needles and these can be obtained by contacting your local pharmacy or speaking to the school nurse.

**7.7 Emergency Medications**

* Emergency medications (i.e. epi pen, buccal midazolam) must have an IHP detailing how to administer it and what to do in the event of an emergency
* The location of emergency medications will be easily known and accessible to all staff but not accessible to other children and young people
* Emergency medications must not be used for another pupil displaying the same symptoms. If there are concerns an ambulance must be called. Medication can only be given to the pupils it is intended for
* Staff will receive training in how to administer any emergency medications. If a pupils forgets their emergency medications the parent must either bring it in immediately or the pupils must go home
* Parents and GP must always be informed if emergency medications have been given and records will be retained at the setting.

**8. Emergency Procedures**

8.1. Governing bodies will ensure a policy is in place for handling emergency situations. Staff will know who is responsible for the policy, nominated first aiders and how to deal with common healthcare needs. In situations requiring assistance, 999 will be called immediately. The location of pupils’ healthcare records and emergency contact details will be known to staff.

8.2. Where a pupil has an IHP, this will clearly define what constitutes an emergency and explain what to do. Staff will be made aware of emergency symptoms and procedures.

8.3. Other pupils in the Adamsdown Primary School will also know what to do in general terms in an emergency, such as to inform a member of staff immediately. If a pupil needs to be taken to hospital, a staff member will stay with the pupil until a parent arrives. This includes accompanying them in an ambulance to hospital. The member of staff will have details of any known healthcare needs and medication.

8.4. Pupils will not be taken to hospital in staff cars unless there are extreme reasons. If this is necessary, another adult must accompany pupils and staff member. Staff must have public liability vehicle insurance.

See Emergency Situations Policy

**9. Training** *–*

9.1 Governing bodies must ensure staff who volunteer or who are contracted to support those with healthcare needs are provided with appropriate training. Governing bodies will also ensure their policies clearly set out how a sufficient number of these staff will be identified and supported.

9.2 When assisting pupils with their healthcare needs, it will be recognised that for many interventions no specialist training is required and the role of staff is to facilitate the pupils to meet their own healthcare needs.

9.3 IHPs may reflect complex needs requiring staff to have specific information and training. This training may also be in the use of aids such as hearing aids (staff will be shown how to change batteries) and various adaptive technologies. If these have been instigated by health professionals, they can be asked to provide suitable for school as well as pupils and families.

9.4 Training provided will be sufficient to ensure staff are competent, have confidence in their ability to support pupils and fulfil IHP requirements. Crucially this training will involve input from the pupils and parents, who often play a major role in providing information on how needs, can be met. However, parents will not be solely relied upon to provide training about the healthcare needs of their child.

9.5 If a pupil has a complex needs, input may be needed from healthcare services and the local authority who will be able to advise and signpost to further training and support.

9.6 All staff, irrespective of whether they have volunteered to assist or support pupils with healthcare needs, may come into contact with pupils who have healthcare needs. It is therefore advisable that all staff have a basic understanding of common conditions to ensure recognition of symptoms and understand where to seek appropriate assistance. For further information with regard to common condition see Cardiff Local Authority Healthcare Toolkit.

9.7 Policies will include a procedure on how to raise awareness of common conditions, a healthcare needs policy and staff roles in carrying out arrangements. New and temporary staff will especially be made aware of what preventative and emergency measures are in pace so staff can recognise the need for intervention and react quickly.

9.8 If the trained staff who are usually responsible for administering medication are not available, the IHP will set out alternative arrangements. This also needs to be addressed in risk assessment and planning of off-site activities.

**10. Qualifications and assessments**

10.1 Efficient and effective liaison is imperative when pupils with healthcare needs are approaching assessments, Liaison between the school and the hospital teacher or home tutor is most important, especially where the pupils is moving from school or home to the hospital on a regular basis.

**11. Education other than at school (EOTAS)**

11.1 A pupil who is unable to attend their school because of their healthcare needs will have their educational needs identified, and receive educational support quickly so they continue to be provided with suitable education. The nature of the provision will be responsive; reflecting the needs of what may be a changing health status.

11.2 Where absences are anticipated or known in advance, close liaison between the school and local authority will enable the EOTAS service to be provided from the start of the absence.

11.3 Cooperation between education, health and administration staff in hospital is essential. The aim will be to achieve the greatest possible benefit for the pupils’ education and health, which will include the creation of an atmosphere conducive to effective learning. Parents can also be a valuable link.

11.4 Pupils with complex healthcare needs may be discharged from hospital with a written care plan. Where this happened, the written care plan will be integrated into any IHP.

**12. School transport**

12.1 There is a statutory duty on the local authority, head teacher and governing body in relation to pupils travelling to the place where they receive their education or training. For example, depending upon the circumstances, the local authority may need to arrange home to school transport for pupils, or provide appropriately trained escorts for such journeys to facilitate the attendance of pupils.

**13. Reviewing policies, arrangements and procedures**

13.1 Governing bodies will ensure all policies, arrangements and procedures are reviewed regularly by Adamsdown Primary School. IHPs may require frequent reviews depending on the healthcare need – this will involve all key stakeholders including, where appropriate, the pupils, parents, education and health professional and other relevant bodies.

**14. Insurance arrangements**

14.1 The governing body will ensure an appropriate level of insurance is in place to cover the setting’s activities in supporting pupils with healthcare needs. The level of insurance will appropriately reflect the level of risk. Addition cover may need to be arranged for some activities or healthcare procedures for pupils with particular needs. For further guidance refer to Cardiff’s Local Authority Toolkit *– Supporting learning with healthcare needs (April 2017*).

**15. Complaints procedure**

See complaints procedure policy

**16. Individual Healthcare Plans (IHP)**

16.1 The governing body will ensure that the Adamsdown Primary School’s policy covers the role of IHPs, and who is responsible for their development in supporting pupils at an Adamsdown Primary School with medical conditions.

16.2 An IHP (See Form 2, in Appendix 1) can assist settings identify the necessary safety measures to support the pupils with a healthcare need and ensure that they and others are not put at risk. They will often be essential, such as cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. They are likely to be helpful in the majority of cases, especially where the medical condition is long term and complex. However, not all children and young people will require one.

16.3 An Individual Health Care Plan can clarify for settings, parents and the pupils the help that the setting can both provide and receive. There will be a level of flexibility to account for any unexpected changes in the pupils’ healthcare needs.

**16.2 Roles and Responsibilities in the creation and management of IHPs**

16.2.1 IHPs do not need to be complex but they will explain how the pupils’ needs can be met. AN IHP will be easily accessible to all who need to refer to it, while maintained the required levels of privacy. Each plan will capture key information and actions required to support the pupils effectively.

16.2.2 A health professional must take a lead role in writing a Health Care Plan; this could be the school nurse, specialist nurse, special needs health visitor or consultant. Their knowledge of the condition, medication, emergency procedures and the pupils is paramount. This will be completed involving the:

* The pupils (where possible)
* Parent/carer
* Input or information from previous school
* Appropriate healthcare professionals
* Social care professionals
* Head teacher and/or delegated responsible individual for healthcare needs across the setting
* Teacher and support staff, including catering staff if necessary
* Any individual with relevant roles such as a first aid coordinator, a well being officer and ALNCo (Additional Learning Needs Coordinator)
* Setting staff who have agreed to administer medication or be trained in emergency procedures

**An Individual Healthcare Plan (IHP) may include:**

* The medical condition: its triggers, signs, symptoms and treatments and how it is managed on a day to day basis, in particular during setting hours
* The pupils’ 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 pupils’ educational, social and emotional needs
* The level of support needed (some pupils will be able to take responsibility for their own healthcare needs) including in an emergency
* Who will provide this support, their training needs and expectations of their role
* Who in the setting needs to be aware of the pupils’ healthcare needs and the support they require
* Protocol for exchanging information between education and health (if necessary)
* Written permission from parents and the Head Teacher for the administration of medicines by staff or self-administration by the pupils during setting hours
* Separate arrangements or procedures required for setting trips or other setting activities outside of the normal setting timetable that will ensure the pupils can participate e.g. risk assessments
* Where confidentiality issues are raised by the parent/child/young person, the designated individuals to be entrusted with information about the child’s condition
* Home to school transport – this is the responsibility of the local authority
* Emergency Procedures including whom to contact, and contingency arrangements. Some pupils may have an emergency health care plan prepared by their lead clinician that could be used to inform the development of their individual health care plan
* An impact statement jointly produced by healthcare professional and a teacher) on how the pupils’ healthcare condition and/or treatment affects their learning and what actions are required to mitigate these effects
* Review date

16.2.3 If the plan needs revising the Adamsdown Primary School and health professional will meet with the parents and a new plan written and signed by all parties.

* + 1. The plan will also be made available to **all staff** coming into contact with the pupils

16.2.5 If the pupils’ condition is degenerative or life threatening, the plan will reflect these additional needs and will provide sufficient information to setting staff. The plan will include details of the condition, what to do and who to contact in an emergency. More frequent reviews will be required for those with conditions that are technologically dependent or potentially life limiting.

16.2.6 In most cases, especially concerning short term illnesses such as those requiring a course of antibiotics, a detailed IHP will not be necessary. In such circumstances it may be sufficient to record the name of medication, dosage, time administered and any possible side effects. These procedures will be conformed in writing with the pupils (where appropriate), the parents and the school.

**16.3 Coordinating information with healthcare professional m the pupils and parents**

The way in which a pupils’ healthcare needs are shared with social and healthcare professionals depends on their requirements and the type of school. The IHP will explain how information is shared and who will do this. This individual can be a first point of contact for parents and staff and would liaise with external agencies.

**16.4 Confidentiality**

It is important that relevant staff (including temporary staff) are aware of the healthcare needs of their pupils, including changes to IHPs. IHP will likely contain sensitive or confidential information. The sharing, and storing of information must comply with the Data Protection Act 1998 and not breach the privacy rights of or duty of confidence owed to the individuals.

**16.5 The pupils’ role in managing their own healthcare needs**

Pupils who are competent to do so will be encouraged to take responsibility for managing their own medicines and procedures. This will be reflected within the pupils’ IHP.

If a pupil refuses to take their medication or carry out a necessary procedure, staff cannot force them to do so, but follow the setting’s defined arrangements, agreed in the IHP. Parents will be informed as soon as possible so that an alternative arrangement can be considered and heath advice will be sought where appropriate.

**17. Unacceptable Practice**

**It is not acceptable practice:**

* Prevent pupils from attending education or reduce hours due to their healthcare needs, unless this would be likely to cause harm to the pupils or others.
* Prevent pupils from easily accessing their inhalers, medication and administering of their medication when and where necessary
* Assume every pupil with the same condition requires the same treatment
* Ignore the views of the pupil, of their parents, or ignore healthcare evidence or opinion
* Send pupils with healthcare needs home frequently for reasons associated with their medical condition or prevent them from staying for normal setting activities, including lunch, unless this is specified in their IHP or risk assessment
* Send a pupil that becomes ill or needs assistance to the office or medical room unaccompanied or with someone who is unaware of the pupils’ needs or unable to properly monitor them
* Penalise a pupil for their attendance record if their absences are related to their medical condition e.g. hospital appointments
* Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
* Require parents, or otherwise make them feel obliged, to attend a school, trip or other off site activity to administer medication or provide healthcare support to the pupils, including for toileting issues
* Prevent, or create unnecessary barriers for pupils from participating in any aspect of school life, including setting trips e.g. by requiring parents to accompany the child
* Ask a pupil to leave the classroom or activity if they need to administer non personal medication or consume food in line with their health needs
* Expect or cause a parent to give up work or other commitments because school is failing to support a pupils’ healthcare needs
* Request adjustments or additional time for a pupil at a late stage. They will be applied for in good time. Consideration will also be given to adjustments or additional time needed in tests

Please refer to the ‘Unacceptable Practice’ section in the Welsh Government’s ‘Supporting Learners with Healthcare Needs’ statutory guidance.

**Outline of legal framework**

There are various duties on schools and local authorities which are relevant to safeguarding the welfare of children and young people with healthcare needs in the educational context. The main provisions are outlined below.

This is not an exhaustive list of the law relevant to this subject. Nor is it an authoritative statement or description of the law, which only courts can give. The descriptions below are summaries of the main relevant provisions. For any particular duty, there will be further statutory provisions and there may be case law (and possibly such developments after the issue of this guidance), affecting the meaning of the provisions (e.g. defining terms), or how a function is to be exercised (e.g. matters to which the person exercising the function must have regard). It will not be relied upon as a substitute for seeking legal advice or reading the actual provisions. Legislation can be found at [www.legislation.gov.uk](http://www.legislation.gov.uk) though it is not all in revised and up to date form.

**General**

As part of the common law, those responsible for the care and supervision of children and young people, including teachers, and other staff in charge of children, owe a duty of care to act as any reasonably prudent parent would in relation to their own children.

A person without parental responsibility for a child or young person, but with the care of that child, may do what is reasonable in all the circumstances of the case for the purpose of safeguarding or promoting the child’s welfare. This is subject, for example, to a court order prohibiting certain steps being taken in relation to that child or young person without the Court’s consent **(Section 3(5) of the Children Act, 1989)[[2]](#footnote-2)**.

**Statutory duties on governing bodies of maintained schools**

* In discharging their functions relating to the conduct of the school, governing bodies of maintained schools (including maintained nursery schools) must promote the well-being of pupils at the school **(Section 21(5) of the Education Act, 2002)[[3]](#footnote-3).**
* Governing bodies of maintained schools (including maintained nursery schools) must make arrangements for ensuring that their functions relating to the conduct of the school are exercised with a view to safeguarding and promoting the welfare of children and young people (i.e. those under 18) who are pupils at the school **(Section 175(2) of the Education Act, 2002).** In considering what arrangements are required, the governing body is to have regard to any guidance by the Welsh ministers[[4]](#footnote-4) **(Section 175(4) of the Education Act, 2002).**Governing bodies are also subject to duties under the **Equality Act, 2010[[5]](#footnote-5) –** see the section below for more details.

**Statutory duties on local authorities**

* Local authorities have general functions in relation to providing education for their area **(***in particular sections 13 to 14, 15A, 15B of the* **Education Act, 1996)[[6]](#footnote-6).**
* A local authority must make arrangements for the provision of suitable education (at school or otherwise), for children of compulsory school age who may now otherwise receive it for any period due to illness, exclusion from school or otherwise **(***Section 19(1) of the* **Education Act, 1996)**. For young persons (i.e. those who are over compulsory school age but under the age of 18), local authorities have a power (rather than a duty), to make such arrangements in those circumstances **(***Section (4) of the* **Education Act, 1996)**. In determining what arrangements to make under *Section 19(1) or 19(4)*, in the case of any child or young person, the local authority must have regard to any guidance given by the Welsh ministers.
* A local authority must make arrangements for ensuring that their education functions are exercised with a view to safeguarding and promoting the welfare of children and young people (i.e. under 18 years old), **(***Section 175(1) of the* **Education Act, 2002).**

In considering what arrangements are required, the local authority is to have regard to any guidance given by the Welsh Ministers (see footnote 3 on previous page), **(***Section 175 (4) of the* **Education Act, 2002)**. Some of this guidance is issued under *Section 175(4)* –it is marked in bold font.

* Local authorities have general duty to safeguard and promote the welfare of children and young people in need within their area (and so far as consistent with that, to promote the upbringing of those children by their families) by providing a range and level of services appropriate to those children’s needs **(***Section 17 of the* **Children Act 1989).**
* Local authorities must make arrangements to promote cooperation between various persons and bodies, including a local health board for an area within the local authority’s area and an NHS Trust providing services in the area. The arrangements are to be made with a view to:
* Improving the well-being of children and young people within the area;
* Improving the quality of care and support for children and young people provided in the area (when amendments made by the **Social Services and Well-Being (Wales) Act, 2014** come into force)[[7]](#footnote-7).
* Protecting children and young people who are experiencing or at risk of, abuse and other harm (when those amendments come into force), **(***Section 25 of the* **Children Act, 2004)[[8]](#footnote-8).**
* **The Education (School Premises) Regulations, 1999, S.I. 1999/2[[9]](#footnote-9)** set out requirements (for which local authorities are responsible) regarding facilities at maintained schools. These include requirements regarding accommodation for medical examination and treatment of pupils and the care of sick or injured pupils (*Regulation 5).*
* Local authorities also have duties under the **Equality Act, 2010** – see below.

**The Equality Act, 2010**

Disability is a protected characteristic under the **Equality Act, 2010[[10]](#footnote-10).** Some pupils with healthcare needs may be disabled for the purposes of that Act; others may not be. There are various duties under the **Equality Act, 2010** which are relevant in the context of pupils with healthcare needs who are disabled.

The responsible body of a school must not discriminate, harass nor victimise disable pupils and in some cases, other particular persons. The responsible body is also subject to a duty to make reasonable adjustments **(***Section 85 of the* **Equality Act, 2010).**

Local authorities must prepare and implement an accessibility strategy in relation to schools for which they are the responsible body. This is a strategy for (over a particular period):

1. Increasing the extent to which disabled pupils can participate in the schools’ curriculums;
2. Improving the physical environment of the schools for the purpose of increasing the extent to which disable pupils are able to take advantage of education and benefits, facilities or services provided or offered by the schools;
3. Improving the delivery to disabled pupils of information which is readily accessible to pupils who are not disabled **(***paragraph 1 of Schedule 10 to the* **Equality Act, 2010).**

The responsible body of a school must prepare and implement an accessibility plan. Such a plan involves the same content as an accessibility strategy except that it relates to the particular school **(***Paragraph 3 of Schedule 10 to the* **Equality Act, 2010).**

In relation to a maintained school and maintained nursery, the responsible body is the local authority or the governing body. In relation to a pupil referral unit, it is the local authority.

Local authorities and the governing body of local authority maintained educational establishments (e.g. maintained schools) are subject to the public sector equality duty. This requires them, in the exercise of their functions, to have due regard to particular matters related to equality (*Section 149).* They are also under specific duties for the purpose of enabling better performance of the public sector equality duty **(Equality Act, 2010, (Statutory Duties) (Wales) Regulations, 2011 S.I. 2011/1064).**

**Other relevant provisions**

The **Pupils Travel (Wales) Measure, 2008[[11]](#footnote-11)** places duties on local authorities and governing bodies in relation to home-school transport.

The **Data Protection Act, 1998[[12]](#footnote-12)** regulates the processing of personal data, which includes the holding and disclosure of it.

The **Misuse of Drugs Act, 1971[[13]](#footnote-13)** and regulations made, deal with restrictions (for example, concerned with supply and possession), on drugs which are controlled. Pupils may be prescribed controlled drugs.

**Useful relevant legislation for England and Wales**

The legislation listed below can be referred to clarify the main provisions relevant to children and young people with healthcare needs.

* **Children and Families Act, 2014 (Section 100)[[14]](#footnote-14)** - places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions.
* **Section 21 of the Education Act, 2002[[15]](#footnote-15)** – provides that governing bodies of maintained schools must, in discharging their functions in relation to the conduct of the school, promote the wellbeing of pupils at the school.
* **Section 175 of the Education Act, 2002** – provides that governing bodies of maintained schools must make arrangements for ensuring that their functions relating to the conduct of the school are exercised with a view to safeguarding and promoting the welfare of children who are pupils at the school. Paragraph 7 of Schedule 1 to the Independent School Standards (England) Regulations 2010 set this out in relation to academy schools and alternative provision academies.
* **Section 3 of the Children Act, 1989[[16]](#footnote-16)** – provides a duty on a person with the care of a child (who does not have parental responsibility for the child) to do all that is reasonable in all the circumstances for the purposes of safeguarding or promoting the welfare of the child.
* **Section 17 of the Children Act, 1989** – gives local authorities a general duty to safeguard and promote the welfare of children in need in their area.
* **Section 10 of the Children Act, 2004[[17]](#footnote-17)** – provides that the local authority must make arrangements to promote cooperation between the authority and relevant partners (including the governing body of a maintained school, the proprietor of an academy, clinical commissioning groups and the NHS Commissioning Board, with a view to improving the wellbeing of children, including their physical and mental health, protection from harm and neglect, and education. Relevant partners are under a duty to cooperate in the making of these arrangements.
* **Equality Act, 2010[[18]](#footnote-18)** – the key elements are as follows:
	+ They **must not** discriminate against, harass or victimise disabled children and young people
	+ They **must** make reasonable adjustments to ensure that disabled children and young people are not at a substantial disadvantage compared with their peers. This duty is anticipatory: adjustments must be planned and put in place in advance, to prevent that disadvantage
* **Education Act, 1996, Chapter 1 (Special Educational Needs)[[19]](#footnote-19)**
* **Care Standard Act, 2000[[20]](#footnote-20)**
* **Health and Safety at Work Act, 1974, Section 2[[21]](#footnote-21)** - and the associated regulations, provides that it is the duty of the employer (local authority, governing body or academy trust) to take reasonable steps to ensure that staff and pupils are not exposed to risks to their health and safety.
* **Misuse of Drugs Act, 1971[[22]](#footnote-22)** – and associated regulations the supply, administration; possession and storage of certain drugs are controlled. Schools may have a child who has been prescribed a controlled drug.
* **Medicines Act, 1968[[23]](#footnote-23)** – specifies the way that medicines are prescribed, supplied and administered within UK and places restrictions on dealings with medicinal products, including their administration.

**Other relevant legislation**

* **Every Child Matters, 2003[[24]](#footnote-24)**
* **UN Convention on the Rights of the Child, 1989[[25]](#footnote-25)**
* **Management of Health and Safety at Work Regulations, 1999[[26]](#footnote-26)**
* **Control of Substances Hazardous to Health Regulations, 2002[[27]](#footnote-27)**
* **The Regulatory Reform (fire safety) Order, 2005[[28]](#footnote-28)**
* **Chronically Sick and Disabled Persons Act, 1970[[29]](#footnote-29)**
* **FORM 1: Contacting Emergency Services**

**Request for an Ambulance:**

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

1. Your telephone number either school number **02920 493600** or mobile if being used
2. Give your location as follows *:* **Adamsdown Primary School, System Street**
3. State that the postcode is **CF24 0JF**
4. Give exact location in the school/setting
5. Give your name
6. Give name of child and a brief description of child ’s symptoms
7. Inform Ambulance Control of the best entrance and state that the crew will be met and taken to
8. **Don’t hang up until the information has been repeated back**

Speak clearly and slowly and be ready to repeat information if asked

Put a completed copy of this form by all the telephones in the school

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 *(insert school/setting address)*

**FORM 2: Health Care Plan**

|  |  |
| --- | --- |
| Name of School/setting |  |

|  |  |
| --- | --- |
| Child’s name |  |

|  |  |
| --- | --- |
| Group/class/form |  |

|  |  |
| --- | --- |
| Date of birth |  **/ /** |

|  |  |
| --- | --- |
| Child’s address |  |

|  |  |
| --- | --- |
| Medical diagnosis or condition |  |

|  |  |
| --- | --- |
| Date |  **/ /** |

|  |  |
| --- | --- |
| Review date |  **/ /** |

|  |  |
| --- | --- |
| Contact member of staff |  |

**Family Contact Information**

|  |  |
| --- | --- |
| Name |  |

|  |  |
| --- | --- |
| Phone no. (work) |  |

|  |  |
| --- | --- |
| Home |  |

|  |  |
| --- | --- |
| Mobile |  |

**Clinic/Hospital Contact**

|  |  |
| --- | --- |
| Name |  |

|  |  |
| --- | --- |
| Phone No |  |

**G.P**

|  |  |
| --- | --- |
| Name |  |

|  |  |
| --- | --- |
| Phone No |  |

**Describe medical needs and give details of child’s symptoms**

|  |
| --- |
|  |

**Daily care requirements (e.g. before sport/at lunchtime/home/school trips)**

|  |
| --- |
|  |

**Is there any further information which should be known with regard to the administration of the above provision which needs to be considered? *e.g. Emotional, Social Need, Awareness of their condition, development***

**Describe what constitutes an emergency for the child, and the action to take if this occurs**

|  |
| --- |
|  |

**Who is responsible in an emergency? (State if different for off-site activities)**

|  |
| --- |
|  |

**Form copied to:**

|  |
| --- |
|  |

**Signed by: Date:**

Parents

Head teacher/Nominated person

Health Professional

**FORM 3A: Parental agreement for school/setting to administer medicine**

**The school/setting will not give your child medicine unless you complete and sign this form and the school or setting has a policy that staff can administer medicine**

 / /

Name of school/setting

Name of child

Date of birth

Group/class/form

Medical condition or illness

**Medicine**

Name/type of medicine

(as described on the container)

 / /

 / /

Date dispensed Expiry date

Agreed review date to be initiated by [name of member of staff]

Dosage and method

Timing

Special precautions

Are there any side effects that

The school/setting needs to

Know about?

Self-administration (delete as appropriate) **Yes/No**

Procedures to take in an emergency

**Contact Details**

Name

Daytime telephone no.

Relationship to child

Address

I understand that I must deliver the medicine personally to [*agreed member of staff*]

I accept that this is a service that the school/setting is not obliged to undertake.

I understand that I must notify the school/setting of any changes in writing.

 / /

Date Signature(s) ………………………………………….........

**FORM 3B: Parental agreement for school/setting to administer medicine**

**The school/setting will not give your child medicine unless you complete and sign this form and the school or setting has a policy that staff can administer medicine.**

Name of school/setting

 / /

Date

Child’s name

Group/class/form

Name and strength of medicine

 / /

Expiry date

How much to give (ie dose to be given)

When to be given

Any other instructions

Number of tablets/quantity

To be given to school/setting

***Note: Medicines must be in the original container as dispensed by the pharmacy***

Daytime phone no of parent

**or,** adult contact

Name and phone no of GP

Agreed review date to be initiated by *[name of member of staff]*

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

Print name: ………………………………………………………………………….

Parent’s signature: …………………………………………………………………. Date:

If more than one medicine is to be given a separate form should be completed for each one.

**FORM 4: Headteacher/Head of setting agreement to administer medicine**

Name of school/setting

It is agreed that *[name of child] ……………………………………………….*will receive

*[Quantity and name of medicine]*………………………………………………every day at

*[time medicine to be administered e.g. lunchtime or afternoon break]*…………………….

*[Name of child]* …………………………………………….. Will be given/supervised whilst

He/she takes their medication by *[name of member of staff]* ……………………………..

This arrangement will continue until *[either end date of course of medicine or until*

*instructed by parents]* ………………………………………………………………………….

 / /

Date

Signed ………………………………………………

*(The Headteacher/Head of setting/named member of staff)*

**FORM 5: Record of medicine administered to an individual child**

Name of school/setting

Name of child

Date medicine provided by parent

 / /

Group/class/form

Quantity received

Name and strength of medicine

 / /

Expiry date

Quantity returned

Dose and frequency of medicine

Staff signature ………………………………………………………

Signature of parent ……………………………………………………………

Date

 / /

 / /

 / /

Time given

Dose given

Name of member of staff

Staff initials

 / /

 / /

 / /

Date

Time given

Dose given

Name of member of staff

Staff initials

**FORM 5: Continued**

 / /

 / /

 / /

Date

Time given

Dose given

Name of member of staff

Staff initials

 / /

 / /

 / /

Date

Time given

Dose given

Name of member of staff

Staff initials

Date

 / /

 / /

 / /

Time given

Dose given

Name of member of staff

Staff initials

Date

 / /

 / /

 / /

Time given

Dose given

Name of member of staff

Staff initials

**FORM 6: Record of medicines administered to all children and young people**

Name of school/setting

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Child’s name** | **Time** | **Name of Medicine** | **Dose given** | **Any reactions** | **Signature of staff** | **Print name** |
|  / / |  |  |  |  |  |  |  |
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**FORM 7: Request for child to carry his/her own medicine**

*This form must be completed by parents/guardian*

**If staff have any concerns discuss this request with healthcare professionals**

Name of school/setting

Child’s name

Group/class/form

Address

Name of medicine

Procedures to be taken

in an emergency

**Contact Information**

Name

Daytime phone no

Relationship to child

I would like my son/daughter to keep his/her medicine on him/her for use as necessary.

 / /

Signed ……………………………………………………………………….. Date

**FORM 8: Staff training record – administration of medicines**

Name of school/setting

Name

Type of training received

Date of training completed

 / /

Training provided by

Profession and title

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

I recommend that the training is updated *[please state how often]* ……………………..

 / /

Trainer’s signature ……………………………………………..…….. Date

I confirm that I have received the training detailed above.

 / /

Staff signature …………………………………………………………. Date

Suggested review date

 / /

**FORM 9: Authorisation for the administration of rectal diazepam**

Name of school/setting

Child’s name

 / /

Date of birth

Home address

GP

Hospital consultant

…………………………………..should be given Rectal Diazepam ……..mg.

If he/she has a \*prolonged epileptic seizure lasting over minutes

**OR**

\*serial seizures lasting over …….. Minutes.

An Ambulance should be called for \*at the beginning of the seizure

**OR**

If the seizure has not resolved \*after ……….minutes (\*please delete as appropriate)

Doctor’s signature …………………………………………………………………………..…….. Date …………………………………

Parent’s signature …………………………………………………………………..…………….. Date …………………………………

**NB: Authorisation for the administration of rectal diazepam**

As the indications of when to administer the diazepam vary, an individual authorisation is required for each child. This should be completed by the child’s GP, Consultant and/or Epilepsy Specialist Nurse and reviewed regularly. This ensures the medicine is administered appropriately. The Authorisation should clearly state:

* When the diazepam is to be given eg after 5 minutes; and
* How much medicine should be given

Included on the Authorisation Form should be an indication of when an ambulance is to be summoned.

**Records of administration should be maintained using Form 5 or similar.**

1. Control of Substances Hazardous to Health (COSHH) Regulations (2002) amended as required [www.hse.gov.uk](http://www.hse.gov.uk) [↑](#footnote-ref-1)
2. **Children Act, 1989** - http://www.legislation.gov.uk/ukpga/1989/41/contents/enacted [↑](#footnote-ref-2)
3. **Education Act, 2002** - http://www.legislation.gov.uk/ukpga/2002/32/contents [↑](#footnote-ref-3)
4. This power is now vested in the Welsh Ministers, rather than the National Assembly for Wales, by virtue of paragraph 30 of Schedule 11 to the **Government of Wales Act, 2006** - http://www.legislation.gov.uk/ukpga/2006/32/contents [↑](#footnote-ref-4)
5. **Equality Act, 2010** - http://www.legislation.gov.uk/ukpga/2010/15/contents [↑](#footnote-ref-5)
6. **Education Act, 1996** - http://www.legislation.gov.uk/ukpga/1996/56/contents [↑](#footnote-ref-6)
7. **Social Services and Well-Being (Wales) Act, 2014** - http://www.legislation.gov.uk/anaw/2014/4/contents/enacted [↑](#footnote-ref-7)
8. **Children Act, 2004** - http://www.legislation.gov.uk/ukpga/2004/31/contents [↑](#footnote-ref-8)
9. **Education (School Premises) Regulations, 1999, S.I. 1999/2 -** http://www.legislation.gov.uk/uksi/1999/2/contents/made [↑](#footnote-ref-9)
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