# Supporting Pupils at School with Medical Conditions

Draft

**Managing Medical Conditions in School**

Oak Lodge School wishes to ensure that pupils with medical conditions receive appropriate support and care at school. This policy is written with reference to Section 100 of the Children and Families Act 2014. We aim to support children and ensure that we pay attention to the social and emotional aspects of their medical condition. We will ensure that no student experiences bullying or social isolation because of their condition.
The school governing body will ensure that arrangements are in place to support pupils with medical conditions in school by reviewing arrangements every year.

**What is a medical condition?**

In this policy we refer to short-term illnesses and chronic medical conditions. The school will have in place individual support plans for pupils who have a medical diagnosis which requires medical intervention and/or medicine whilst in school. The plan will include relevant and up to-date information about the child, the medical condition, and how the condition should be managed and monitored in school. The key roles and responsibilities are set out in the appendix. The day-to-day responsibility for children and young people rests with the Executive Headteacher and the designated members of staff who have daily contact with the individual pupils.
Parents are given clear information about who is responsible in the school and who to contact to ask questions or give information.

* The term ‘parent’ implies any person or body with parental responsibility such as foster parent, carer, guardian or local authority.

The school will **not** have individual care plans in place for pupils who have short-term illnesses such as coughs, colds and common childhood diseases.

The school will have a medical plan in place for all children who have a medical diagnosis, for example:

- allergies and anaphylaxis
- asthma
- breathing difficulties
- cancer
- diabetes
- epilepsy
- heart condition
- liver and kidney conditions
- seizures
- any other serious medical condition

**Procedure when the school is notified that a pupil has a medical condition (Appendix A)**

The designated Senior Leadership Team (SLT) member will arrange a meeting with the parents as soon as possible after the school has been informed. The information may come from the parent, the school nurse, a health visitor or other medical professional. **(See Appendix B- Health form)** The SLT member will invite the parents, the school nurse and any other relevant health professionals to the meeting. At the meeting the SLT member will gather all the relevant information including, diagnosis, signs and symptoms, medicines and treatment plan. The meeting will also cover the emotional needs of the child or young person and include emotional support / counselling as appropriate. The school will consult with parents about how much information can be shared with the child's class and peer group. The plan will be put in place and the relevant members of staff will be trained within four weeks of the first notification. The headteacher will be kept informed of the operational implications of the health care plan.

In order to ensure full implementation of this policy, pupils, parents, staff and relevant health and social care partners will be informed about it, copies will be provided as appropriate, access to the policy signposted and regular reminders will be put in place. **(See Appendix C)**

In addition a staff training programme will be provided, which will take account of the need for specialist training (when required) for some key members of the staff team. In addition, all new staff, including supply and temporary staff, will be informed of the policy and their responsibilities.

**The School's Right to Challenge**

Oak Lodge School listens to children and parents but may challenge and ask for supporting documents if there is doubt or dispute about a child's medical condition or treatment. The designated member of the Senior Leadership team will consult with the local education authority and any relevant NHS paediatrician team as appropriate. The local education authority will also be asked give advice if there is a dispute between the parents and the school.

## Staff Training

- Teachers and support staff will receive training about individual pupils' medical conditions which will be organised by the school. A record of this training will be kept by the designated member of the Senior Leadership Team.
- The Head of School will be responsible for monitoring and reviewing the quality of staff training as well as ensuring it is kept up to date.
- New members of staff will receive relevant and up-to-date information about managing medical conditions in schools as part of inductions.
- Temporary and supply staff will be given information by head of department about individual children or young people who are likely to become ill and/or require medical intervention.
- Every member of staff is responsible for ensuring they know and understand the care plans.

## Individual Health Care Plans (See Appendix D for front page))

- For young people with complex medical conditions the designated member of the Senior Leadership team, class teacher and health team will write individual plans in partnership with the parent.
- The health team will write medical plans for all young people with epilepsy and less complex medical conditions.
- The plans will be shared with relevant members of staff and reviewed annually or as appropriate if there are significant changes.
- The plan will include details about the responsibilities, child's condition, health
- professional involved, medication, dosage, treatment, symptoms and warning signs. It should also include what constitutes an emergency and what to do in an emergency.
- The plans will be kept on SIMS and the medical file (stored in the school office) and not put on display unless this is agreed with the parents.
- Information about the child's medical condition will be kept on their school file and health files. It is only shared with those who need to know.

## Medicines in Schools

- This applies to all pupils including those who do not have an individual health care plan.
- Any parent can request that their child is given prescription medicine in school.

- If medicines (including asthma pumps) are to be administered in school the parents must complete and sign an agreement form which will be renewed annually. **(Appendix E- Parental agreement)**
- It is preferable that pupils take medicine at home, before or after the school day.
- Antibiotics that must be refrigerated are kept in a locked fridge within the medical room.

- Parents are encouraged to ask their GPs for medical prescriptions that fit around the school day.
- No pupil will be given medicine without the parental consent unless there is a clear and dire emergency and ambulance / emergency personnel are in attendance.
- Prescribed medicines must be in date, prescribed by a NHS doctor and provided in the original container with dosage instructions. Government guidanec
- All medicines brought to school, whether prescribed by a doctor or not, should be handed to medical staff. **Medical staff will ensure that children know where their medicines are at all times and that staff are able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to children and not locked away.**
- If the administration of prescription medicines requires technical/medical knowledge then individual training should be provided for staff from the School Nurse, if it is deemed safe to do so based on an understanding of the drug and technique involved. Training should be specific to the individual child concerned.
- The school will not accept medicines that have been taken out of the container as originally dispensed. The school will not make changes to dosages on parental instructions – a new prescription is required.
- Parents must regularly renew the school supply of medicines and be responsible for visiting the GP to collect repeat prescriptions.
- At the end of the school year in July the school will return all medicines in store to the parents.
- Medicines will be safely stored in the medical room in a single locked cupboard which must be kept **locked at all times**
- A written record will be kept by SCHOOL NURSE or school staff member and stored in the MEDICAL ROOM.
- The school will not be held responsible for any side-effects due to the correct
- administration of prescribed drugs.
- The school health team will ensure parents are informed when medication is due to expire, with sufficient time to get a new prescription.
- The systems for monitoring changes in medication, updates to care plans, administration of medication will be monitored as part of Governor safeguarding.

**Update on the use of adrenaline auto-injector (AAI) devices in Schools**

From 1 October 2017 the Human Medicines (Amendment) Regulations 2017 will allow all schools to buy adrenaline auto-injector (AAI) devices without a prescription, for emergency use in children who are at risk of anaphylaxis but their own device is not available or not working (e.g. because it is broken, or out-of-date).
The school's spare AAI should only be used on pupils known to be at risk of anaphylaxis, for whom both medical authorisation and written parental consent for use of the spare AAI has been provided.

The school's spare AAI can be administered to a pupil whose own prescribed AAI cannot be administered correctly without delay.
See : www.gov.uk/government/publications/using-emergency-adrenaline-auto-injectors-in-schools

Due to the shortage of epipens the government has approved that certain batches of adult EpiPen 0.3mg auto-injectors (children over 30kg can be prescribed adult 0.3mg auto-injectors) can be safely used for four months after the expiry date has passed – further information about these batches is available on the EpiPen website www.epipen.co.uk/ or via healthcare professionals.

**Storage and Administration of Controlled Drugs**

If a pupil is prescribed a controlled drug it will be stored in a lockable cupboard that complies with the Misuse of drugs Safe Custody Regulations 1973. Cupboards should conform to the British Standard reference BS2881 this is a minimum security standard.
The medication should be labeled with the pupils name and if administered should be written and signed for in the controlled medication book in the medicine cupboard. A witness is required to ensure the correct dose of the controlled medication is administered to the correct pupil and that the correct amount of medication remains.

These drugs, are stock checked on a weekly basis. Any unused medication must be returned to the parent/guardian for safe disposal at the pharmacy from where it was dispensed.

**Arrangements for children who are competent to manage their own medicine in school.**

A child who has been prescribed a medicine may be responsible enough to carry and administer drugs or medical testing equipment e.g. blood sugar testing kit. The school will consult with parents and relevant school staff about the advisability of an individual child or young person taking responsibility for their own treatment and an assessment will be carried out **(See Appendix F)** The decision in cases of dispute will rest with the Executive Headteacher who has a duty to ensure the safety of all children and young people. A form detailing arrangements will need to be filled in**. (See Appendix G)**

Action required in an emergency for the common serious conditions is displayed in the staff room.

**Emergency Procedure For Calling An Ambulance**

Staff will call an ambulance when a child or young person has become seriously ill e.g. unconscious, blue not breathing or having an unexpected seizure. Epilepsy plans are followed for known children and young people. These plans include involvement of the school nurse and recording of the timing and duration of seizures. All members of staff in a class team should be familiar with individual epilepsy plans.

## 1. Who can call 999?- Guidance for staff

*Any member of staff can call 999 – ideally the person making the call should have sight of the child or young person. There should be one person in charge of the child and one person making the call.*

*You will be asked specific questions about the child – it is therefore not good practice to send someone to the school office to make the call or to ask the office staff to make the call.*

*- DO NOT WAIT FOR PERMISSION FROM A SENIOR MEMBER OF STAFF*
*- DO NOT SEEK OUT THE SCHOOL NURSE BEFORE YOU MAKE THE CALL*
*- DO NOT SEEK PERMISSION FROM PARENTS*
*- USE YOUR KNOWLEDGE OF THE INDIVIDUAL'S HEALTH CARE PLAN IF APPROPRIATE*

## 2. Who takes charge?

*Quickly make a decision about who is in charge and who will relay information to the emergency services. Do not waste time looking for written information if not readily available.*

## 3. What happens next?

*Do not move the child or young person unless it is safe to do so e.g. the child is in a wheelchair and can be moved to another area. Let member of The Executive Headteacher and SLT know what is happening. The SLT member will inform the school office and the parents. The admin staff will make to meet and direct the ambulance crew. The SLT staff will nominate a member of staff to travel in the ambulance to hospital. Staff will stay in touch via mobile phone until the parent arrives at hospital.*

## 4. What happens if I am not sure?

*Again – do not hesitate – make a decision – better to call 999 than not if a child is seriously ill*
*It is the school's responsibility to call emergency services – not the school nurse. You do not need permission from the Executive Headteacher or the school nurse to call 999.*
*All emergency calls should be logged in the medical file (kept in the school office).*

## First Aid

Oak Lodge School is committed to providing emergency first aid provision in order to deal with accidents and incidents affecting pupils, employees and visitors.
We have suitably stocked first aid boxes, which are checked monthly for stock, including expiry dates for equipment and are kept in the staffrooms, school offices and first aid/medical rooms. Travel first aid kits are kept in the staffroom and must be taken on all visits/ trips with pupils.

All staff will consider the appropriateness of any first aid treatment, for example allergies such as latex and plasters.

We have suitably detailed and current risk assessments for all pupils in school and for specific trips and activities.
First aiders' names and their most recent date of training are listed on the school's training record and walls in public areas of the schools.
First aid will only be given by qualified first aiders and not the school healthcare assistants or nurse.
The school's designated first aid/medical rooms are clearly marked by a sign on the door and are confidential rooms with access to running water and a fully stocked first aid supply. Residential medical rooms are kept locked during school hours between 8.30 am and 3.30 pm.

**Accidents with minor injury**

What is a minor injury?

- Injuries to children which do not require first-aid, visit to the hospital, or warrant an accident on-line report.
- Injuries to members of staff which do not require first-aid, visit to the hospital, or warrant an accident on-line report.

All minor injuries should be recorded using the school's accident form.

Completed forms must be handed to the designated member of SLT who may decide the injury is 'significant' and ask the staff member to complete the online form in addition.

**Record keeping**

School staff have a responsibility to ensure they keep written records of all medicines administered to children. The record is kept in the medical room and includes date, time, name of medication, dosage and name of the member of staff who administers the medicine and a witness signature. Parents are expected to notify the school of any ad-hoc medication. These records will be monitored during safeguarding governor visits.

**Unacceptable Practice**

The DfE guidance 2014 lists the following unacceptable practices. This policy is designed to ensure that these issues are avoided and that there is an ongoing dialogue between school, pupils and parents so that all pupils and parents feel confident in the processes in place in the school.

It is unacceptable at Oak Lodge School to:

- Prevent pupils from easily accessing their inhalers and medication.
- Prevent pupils from drinking or eating if needed to manage their medical condition.

- Assume that every pupil with the same condition needs the same treatment.
- Prevent children from personal care.
- Ignore the views of the child or their parents: or ignore medical evidence unless there is good reason to challenge those views.
- Exclude pupils from lunchtime or after- school activities because of a medical condition.
- Prevent pupils from participating, or create barriers to normal school activities including day trips and school journeys.
- Leave children who are ill unattended in a medical room or school office or any room.

**Medical Emergencies at Oak Lodge School**

We have policies in place for medical emergencies. These are available in the staff handbook.

**Day trips, residential visits and sporting activities**

Oak Lodge School will make every effort to ensure that all children are included in the full range of school activities. The school will make sure that reasonable precautions are taken to safeguard children's health and carry out risk assessments for trips and school journeys which take into account the individual child's needs.
**Liability and indemnity**

The governing body will ensure that an appropriate level of insurance is in place and appropriately reflects the level of risk for individual members of staff working with individual children.

**Complaints**

Oak Lodge School works closely with parents to ensure that children and young people with medical conditions are treated fairly and in a way that will promote good health outcomes.

All complaints should be made under the school's Complaints Policy. Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

**<u>Residential visits and School Trips</u>**

For residential visits staff work closely with healthcare professionals and families to ensure appropriate support is in place. Pupil medical details are available to all off-site visits. **(See Appendix H)**

If a child has a condition that needs regular medication and the child is leaving the school premises for an outing or sporting fixture, the appropriate medication would be placed in the medical bag that accompanies that child and the accompanying staff member with responsibility for medical support is made aware of the item.

Parents are sent a residential visit / school trips form to be completed and returned to school shortly before their child leaves for an overnight or extended day visit. (**See Appendix H)**

This form requests up-to-date information about the pupil's current condition and their overall health. This provides essential and up-to-date information to relevant staff and school supervisors to help the pupil manage their condition while they are away. This includes information about medication not normally taken during school hours.

All parents of pupils with a medical condition attending a school trip or overnight visit are asked for consent, giving staff permission to administer medication at night or in the morning if required.

## Roles and responsibilities

Oak Lodge School works in partnership with all interested and relevant parties including the school's governing body, all school staff, parents, employers, community healthcare professionals and pupils to ensure the policy is planned, implemented and maintained successfully.

The **Governors** will ensure that arrangements are in place to support pupils with medical conditions to ensure that they are enabled to participate in as many aspects of school life as possible. Governors will ensure all staff have received the appropriate level of training and are competent to support pupils. Governors will receive annual updates on the effective working of the policy and will review this carefully and ensure implementation of any changes or recommendations arising from the review.

The **Head of School, Head of Care and designated SLT member for medical support and** have responsibility for the implementation and review of the policy and will :

- Ensure that the school is inclusive and welcoming.
- Ensure that the policy is in line with national guidance and expectations, is put into action and maintained.
- Liaise with other interested and relevant parties (including parents and pupils, school health, community and acute health services, the local authority services etc.)
- Ensure information held by the school is accurate and up to date and good communication and information sharing systems are in place.
- Ensure pupil confidentiality is respected.
- Assess the training and development needs of staff and arrange for them to be met.
- Ensure all staff are aware of the policy, including supply teachers and new

staff

- Delegate tasks appropriately to named members of staff.
- Monitor and review the policy at least once a year, with input from pupils, parents, staff and external stakeholders and update it as and when necessary.
- Report back to governors and to all key stakeholders about the implementation of the medical conditions policy.

**All staff** at the school have a responsibility to :

- Be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency.
- Maintain effective communication with parents including informing them if their child has been unwell at school.
- Ensure pupils who carry their medication with them have it when they go on a school visit or out of the classroom.
- Administer medication if they have agreed to undertake that responsibility.
- Undertake training to achieve the necessary competency for supporting pupils with medical conditions if they have agreed to undertake that responsibility.
- Be aware of pupils with medical conditions who may be experiencing bullying or need extra social support.
- Ensure pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in, and understand the impact a medical condition may have on a pupil and make any reasonable adjustments to accommodate this (e.g. that pupils have the appropriate medication or food with them during any exercise and are allowed to take it when needed, and are not forced to take part in an activity if they are unwell).
- Be aware that medical conditions can affect a pupil's learning and provide extra help when pupils need it, including help to catch up with work when the pupil has been unwell.
- Use opportunities such as PHSCE and other areas of the curriculum to raise pupil awareness about medical conditions.

**Specific responsibilities of key staff**

The **designated member of the Senior Leadership team** will :

- Keep an overview of any pupils whose medical needs impact on their learning, will advise staff working directly with them and ensure appropriate strategies are put in place to support them.
- Advise on training on less common conditions, including providing information about where the school can access other specialist training

**Staff with first aid training will** :

- Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards with the school and when necessary ensure that an ambulance or other professional medical help is called.

**Designated medical support Teaching Assistant** in liaison with nominated senior leadership team staff will:

- Ensure all medication is correctly stored and labelled, regularly reviewed, in date and that parents provide new medication as needed.
- Ensure parental consent is obtained and recorded.
- Collect relevant health information to support pupil, family and school to inform the healthcare plan.
- Support pupils and parents as appropriate.

**Individual doctors and specialist healthcare professionals** caring for pupils who attend this school have a responsibility to:

- Complete the pupil's Healthcare Plans provided by parents.
- Where possible, and without compromising the best interests of the child, try to prescribe medication that can be taken outside of school hours.
- Offer every child or young person (and their parents) a written care/self-management plan to ensure children and young people know how to self-manage their condition.
- Ensure the child or young person knows how to take their medication effectively.
- Ensure children and young people have regular reviews of their condition and their medication.
- Provide the school with information and advice regarding individual children and young people with medical conditions (with the consent of the pupil and their parents).
- Understand and provide input in to the school's medical conditions policy.

**Acute health care service personnel** have a responsibility to:

- Have an agreed system for receiving information held by the school about children and young people's medical conditions, to ensure best possible care
- Understand and provide input in to the school's medical conditions policy

**The pupils at Oak Lodge School** have a responsibility to**:**

- Treat other pupils with and without a medical condition equally.
- Tell their parents, teacher or nearest staff member when they are not feeling well.
- Let a member of staff know if another pupil is feeling unwell.
- Treat all medication with respect.
- If mature and old enough, know how to take their own medication and to take it when they need it.
- Ensure a member of staff is called in an emergency situation.

**The parents* of a child at this school** have a responsibility to:

- Tell the school if their child has a medical condition.
- Ensure the school has a complete and up-to-date Healthcare Plan for their child
- Inform the school about the medication their child requires during school

hours.

- Inform the school of any medication their child requires while taking part in visits, outings or field trips and other out-of-school activities.
- Tell the school about any changes to their child's medication, what they take, when, and how much.
- Inform the school of any changes to their child's condition
- Ensure their child's medication and medical devices are labelled with their child's full name.
- Provide the school with appropriate spare medication labelled with their child's name.
- Ensure that their child's medication is within expiry dates.
- Keep their child at home if they are not well enough to attend school.
- Ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional
- Ensure their child has a written care/self-management plan from their doctor or specialist healthcare professional to help their child manage their condition.
- Attend immediately if their child is taken to Accident and Emergency or admitted to hospital

* The term 'parent' implies any person or body with parental responsibility such as foster parent, carer, guardian or local authority

**Date of new policy : October 2018**
**Review date : October 2019**

**C.Mukasa / Rachel Rust**

**Appendix A**

School made aware of medical condition
- New diagnosis
- Child moving to new school

Parent or health professional informs school

⇩

Headteacher or delegated lead from Senior Leadership Team lead school co-ordinates meeting to agree individual healthcare plan (IHP)

Attendees should include
- Parent
- Child (if appropriate)
- Specialist nurse
- School nurse
- GP
- Paediatrician or consultant (where possible – if not report from him/her)
- Key school staff

⇩

Clarify medical condition and healthcare needs of the child

Develop IHP and agree who will write it

Identify school staff training needs

**Appendix B**

# HEALTH INFORMATION FROM PARENTS

**Student Health Information**

**Personal Information**

| | | | |
|---|---|---|---|
| **Forename** | | **Surname** | |
| **Date of Birth** | | **Gender** | |
| **Mobile Number** | | **Email Address** | |
| **NHS Number** | | | |

**Residence**
*Include all addresses*

**1**

| | | | |
|---|---|---|---|
| **Home Address** | | | |
| **Post Code** | | **Phone Number** | |
| **Local** | | | |

| | | | |
|---|---|---|---|
| **Authority** | | | |

**2**

| | | | |
|---|---|---|---|
| **Home Address** | | | |
| **Post Code** | | **Phone Number** | |
| **Local Authority** | | | |

**Medical Information**

| | | | |
|---|---|---|---|
| **GP Name** | | **Practice Name** | |
| **Practice Address** | | | |
| **Post Code** | | **Phone Number** | |
| **ND/CAMHS Involvement - Organisation and location(s)** | | **From:**<br><br>**To:** | |
| **Other Medical/Therapy Intervention - Organisation and location(s)** | | **From:**<br><br>**To:** | |

**Medical Conditions**
*Tick all applicable conditions*

| | | | | | |
|---|---|---|---|---|---|
| **None** | | **Eczema** | | **Overweight** | |
| **ADHD** | | **Epilepsy** | | **TB** | |
| **Allergy** | | **Fine & gross motor skills** | | **Underweight** | |
| **Arthritis** | | **Learning difficulty** | | **Ushers** | |
| **Asthma** | | **Mental Health** | | **Visual Impairment** | |
| **Diabetes** | | **MS** | | **Other – specify below:** | |
| | | | | | |

| 1 | |
|---|---|
| **Details of Medical Condition** | |
| | |
| **Date(s) diagnosed** | |
| **Medication** | |
| **Drug Reactions** | |
| **Methods for Management of Medical Condition** | |
| | |

| 2 | |
|---|---|
| **Details of Medical Condition** | |
| | |
| **Date(s) diagnosed** | |
| **Medication** | |
| **Drug Reactions** | |
| **Methods for Management of Medical Condition** | |
| | |

| 3 | |
|---|---|
| **Details of Medical Condition** | |
| | |
| **Date(s) diagnosed** | |
| **Medication** | |
| **Drug Reactions** | |
| **Methods for Management of Medical Condition** | |

| |
|---|
| |

| **Additional information**<br>*Please include details of first aid given, previous medical treatment, operations, and instructions on managing ongoing conditions. Also include factors that may worsen the medical condition (e.g. infection, stress etc.), as well as any other important information related to the health of your child that you would need the school to be aware of* |
|---|
| |

**Health and Dietary Needs**

*Tick all dietary requirements and allergies*

| | | | | | |
|---|---|---|---|---|---|
| **Artificial Colouring Allergy** | | **Kosher Foods Only** | | **No Pork** | |
| **Gluten Free** | | **No Dairy Produce** | | **Seafood Allergy** | |
| **Halal** | | **Nut Allergy** | | **Vegetarian** | |
| **Vegan** | | **Other – specify below:** | | | |
| | | | | | |

**VI Information**

| | |
|---|---|
| **Degree & Type of VI** | |

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| **Onset/cause** | | | | | | | | | |
| **Effects on Communication** | | | | | | | | | |
| **Glasses** | **Yes** | | **No** | | **Colour Blind** | **Yes** | | **No** | |

| | |
|---|---|
| **Name of Hospital/Optical Care Centre** | |
| **Full postal Address** | |
| **Post Code** | |
| **Phone Number** | |
| **Hospital Reference Number** | |
| **Name of Dr/Consultant** | |

**Audiology Information**

| | |
|---|---|
| **Name of Hospital/Audiologist** | |
| **Full postal Address** | |
| **Post Code** | |
| **Phone Number** | |
| **Hospital Reference Number** | |
| **Name of Dr/Consultant** | |

| | | | | | | |
|---|---|---|---|---|---|---|
| **Hearing Aids** | **Right** | | **Left** | | **Date Started** | / / |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| **Cochlear Implant** | **Right** | | **Left** | | **Date Started** | / / | |
| **Kind – Specify** | | | | | | | |
| **Make** | | **Model** | | **Serial No.** | | | |

**Parent/Carer signature** _____

**Print name** _____

Date / /

**Appendix C**

C**ommunication plan to ensure full implementation of this policy**

b. **Parents are informed about their responsibilities within the medical conditions policy:**

- By including the policy statement on the school's website and signposting access to the policy at the start of the school year when communication is sent out about Healthcare Plans
- In the school newsletter at several intervals in the school year
- When their child is enrolled as a new pupil via the school's website, where it is available all year round
- Through school-wide communication about results of the monitoring and evaluation of the policy.
- At their child's annual review

c. **School staff are informed about their responsibilities within the medical conditions policy**

- Through copies handed out at the first staff meeting of the school year and before Healthcare Plans are distributed to parents
- At scheduled medical conditions training
  Through the key principles of the policy being displayed in several prominent staff areas at this school

- Through school-wide communication about results of the monitoring and evaluation of the policy
- All supply and temporary staff are informed of the policy and their responsibilities.

d. **Relevant local health staff** are informed and regularly reminded about the school's medical conditions policy:
By letter accompanied with a printed copy of the policy at the start of the school year
- CCG and school / community nurse.
- Through communication about results of the monitoring and evaluation of the policy.

e. **Governors** should review annually in conjunction with the audit and reporting process outlined above

f. **All other external stakeholders** are informed and reminded about the school's medical conditions policy:
- By letter accompanied with a printed copy of the policy summary at the start of the school year and through communication about results of the monitoring and evaluation of the policy.

**Appendix D (Front Sheet Only)**

# INDIVIDUAL HEALTH CARE PLAN

| |
|---|
| **Name:** |
| **Gender:** |
| **Date of Birth:** |
| **Address:** |
| **Telephone No:** |
| **Family Members:** |
| **Visual Impairment:** |
| **Medical Condition:** |
| **Medication:** |
| **Ethnic Origin:** |
| **Religion:** |
| **Language spoken at home:** |
| **Date of Admission into residential**: |
| **Residential Package:** |

**Appendix E1**

# PARENTAL AGREEMENT FOR OAK LODGE TO GIVE YOUR CHILD PRESCRIPTION MEDICATION AT SCHOOL

| Name of pupil: | Date of birth: |
|---|---|

**Details of prescribed medication**

| | |
|---|---|
| **Name of medicine** | |
| **Strength of medicine** | |
| **Expiry date of medicine** | |
| **Dosage - how much to give** | |
| **Frequency - what time/s of day** | |
| **Number of tablets given to the school** | |
| **Any other instructions** | |

**IMPORTANT NOTE:**
**ALL Medicines must be sent to school in their original container/s as dispensed by the pharmacy.**

| | |
|---|---|
| **Parent/Carer's - daytime contact phone number** | |
| **Name of Doctor/GP** | |
| **Doctor/GP – daytime contact phone number** | |

I confirm that the above information is, to the best of my knowledge, accurate at the time of writing and I give consent to staff at Oak Lodge School to administer medicine in accordance with the Oak Lodge School Policy. I will inform Oak Lodge School immediately in writing if there is a change in dosage or frequency of the medication or if the medicine is stopped.

Parent's/Carers signature: ……

Print name: ……

Date: ……

**Appendix E2**

Dear Parent/Carer

At times your child may be required to take medication while they are at school. We have strict policies and procedures at Oak Lodge and Phoenix House regarding medication brought on site and any medical treatment your son/daughter may require.

To ensure these procedures are adhered to we ask parents/carers to support the staff to follow our rules regarding any type of medicine.

- **All medication should be handed to your child's escort or driver to pass on to the school upon arrival.**

- **If your child travels independently please contact the school prior to their arrival to inform a member of staff what medication they will be arriving with.**

- **Please ensure that all prescribed medication is packaged in the original packaging, clearly stating the dosage, the name of the medication and the name of the pupil. Please do not dispense into another pot or send in a strip of unidentified tablets. We will be unable to administer medication brought into school in this way and in some circumstances may have to send your child home.**

Due to recent government changes in legislation, we are unable to administer painkillers and household remedies to your child from our school supply. This includes paracetamol, ibuprofen, lemsip and calpol.
Students who require these kinds of medications:

- **Must have the medication prescribed by their doctor**
- **Must bring the medication into school in the original packaging.**
- **Must contain pharmacy label including your child's name, dose and date of dispense.**
- **Each student taking must have an individual care plan created by the school nurse.**

All staff in Phoenix House and a core group of school staff are qualified in first aid, however we require your permission for your child to receive first aid, medical treatment or hospital treatment in the event of an emergency. We would only take this course of action without your knowledge if we are unable to contact you in an emergency.

Please complete the attached form and return by September 3rd 2014 in order for us to meet your child's needs whilst at school and in residence.

Yours faithfully

Rachel Rust
Head of Care

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I have read and understood the information regarding the safety and well-being of my child and agree to adhere to the procedures regarding medication and agree to inform staff of any changes which may impact this consent.

| | Yes | No |
|---|---|---|
| Permission to administer sun lotion | | |
| Permission to administer first aid | | |
| Permission to seek medical or hospital treatment | | |

Childs Name……

Signature……

Date……..

**Appendix F**

## Pupil self medicating assessment

**NAME OF PUPIL:**

**NAME OF ASSESSOR:**

**DATE OF ASSESMENT:**

| Question | Pupil Answer | Staff comments |
|---|---|---|
| Why do you need to take your medication? | | |
| What is the dose of your medication | | |
| What is the name of your medication? | | |
| When should you take your medication? | | |
| How much should you take? | | |
| It is important to take your medication at the correct times. Why? | | |
| When you are at school/Phoenix House, where should your medication be kept? | | |
| Why is this important? | | |
| Who can you go to if you have any questions about your medication? | | |

**Additional comments**

**Signed……**

**Appendix G**

St George's Healthcare NHS
NHS Trust

## Self-administration of medication for residential pupils

**Pupil's name:** **DoB:**
**Medication to be self-administered:**
**Dosage:**
**Frequency:**

**This pupil has been assessed as competent to self-administer the medication named above.**

**Signed:** **Date:**
**Hannah Hewes School Nurse for Oak Lodge School**

**Signed:**
**Date:**
**Rachel Rust, Head of Care, Phoenix House**

**Consent gained from parent for pupil to self-administer medication. Yes/No**

**By:** **Date:**

## Pupil consent

**I have been given necessary information about the above medication to enable me to self-administer it. I am aware that my ability to self-administer this medication will be monitored by residential staff at Phoenix House.**

**Signed:** **Date:**

**Appendix H**

**Confidential:** MEDICAL CONSENT AND DIETARY NEEDS

**Residential Trip: Isle of Wight Year 9 & 10**

Please complete in **CAPITAL LETTERS**

| | | | |
|---|---|---|---|
| **Name of Pupil:** | | **Sex:** | **M / F** |
| **Date of Birth:** | | **Age:** | |
| **Name of parent/guardian:** | | **Tel:** | **Mobile:**<br>**Home:** |
| **Home Address:** | | | |
| **Second Emergency Contact details**: | | | |
| **Name & relationship to child:** | | **Tel:** | **Mobile:**<br>**Home:** |

## General Information

| | |
|---|---|
| **Does your child suffer from travel sickness?** | |
| **Has your child any dietary requirements: vegetarian, diabetic, medical or religious. If so please give full details.** | |
| **If there are any other particular needs you feel we should know about to help ensure your child has a relaxed and enjoyable stay please give details:** | |

## Medical Information

| | |
|---|---|
| **Name and address of Pupil's Doctor** | |
| **Approximate date of last anti-tetanus injection** | |
| **Is your child allergic to anything (e.g. antibiotics or other medicines, food etc.)?** If so give full details. | |
| **Does your child suffer from or need special treatment for, any ailment or disability e.g. Diabetes, Epilepsy, Kidney disease, Asthma, Heart condition?** If so, please specify the ailment or disability and give details of the treatment required. | |
| **Is your child under medical supervision and/or taking prescription medicine?** If so please give full details. | |
| **Name of prescription medication/s** | |
| **Dose and times** | |

**Declarations by Parent or Guardian:**
I consent to staff that have First Aid Qualifications, giving my child 'simple' treatment e.g. plaster, ice pack, etc.

In the unlikely event of an emergency, I give permission for my child to receive emergency medical treatment during his/her visit to Isle of Wight Centre on 2nd May – 5th May 2017

**Pupil's Name**

**Signed (parent/guardian)**

**Date**