

Supporting Pupils and Students with Medical Conditions Policy

2020

Responsibility: Louise Burns Date: January 2020

Signed and Adopted by the Governing Body:

Chair of Governors

Date: 30.01.2020

Date to be reviewed: January 2021

Supporting Pupils with Medical Conditions Policy

Villa Real School wishes to ensure that pupils/students with medical conditions receive appropriate care and support at school. All pupils/students have an entitlement to a full time curriculum or as much as their medical condition allows. This policy has been developed in line with the Department for Education’s statutory guidance released in April 2014 updated 16th August 2017– “Supporting pupils/students at school with medical conditions” under a statutory duty form section 100 of the Children and Families Act 2014. The statutory duty came into force on 1st September 2014.

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions-3>.

[Section 100 Children and Families Act 2014](http://www.legislation.gov.uk/ukpga/2014/6/section/100/enacted)places a statutory duty on governing bodies of maintained schools to make arrangements at school to support pupils/students with medical conditions. A child’s mental and physical health should be properly supported in school, so that the pupil/student can play a full and active role in school life, remain healthy and achieve their academic potential.

For pupils/students who have medical conditions that require EHC plans, compliance with the SEND code of practice (part 3 of the Children and Families Act 2014) will ensure compliance with this guidance with respect to those children.

<https://www.gov.uk/government/publications/send-code-of-practice-0-to-25>

Ofsted places a clear emphasis on meeting the needs of pupils/students with SEN and disabilities, also including pupils/students with medical conditions.

*N.B. Early years settings should continue to apply the Statutory Framework for Early Years foundation Stage.*

# Key roles and responsibilities

* 1. The Local Authority (LA) is responsible for:
		1. Promoting co-operation between relevant partners regarding supporting pupils/students with medical conditions.
		2. Providing support, advice /guidance and training to schools and their staff to ensure Individual Healthcare Plans (IHCP) and Health Passports are effectively delivered.
		3. Working with schools to ensure pupils/students attend full-time or make alternative arrangements for the education of pupils/students who need to be out of school for fifteen days or more due to a health need and who otherwise would not receive a suitable education.
	2. The Governing Body of Villa Real School is responsible for:
		1. Ensuring arrangements are in place to support pupils/students with medical conditions.
		2. Ensuring the policy is developed collaboratively across services, clearly identifies roles and responsibilities and is implemented effectively.
		3. Ensuring that the Supporting Pupils with Medical Conditions Policy does not discriminate on any grounds including, but not limited to protected characteristics: ethnicity/national/ origin, religion or belief, sex, gender reassignment, pregnancy and maternity, disability or sexual orientation.
		4. Ensuring the policy covers arrangements for pupils/students who are competent to manage their own health needs.
		5. Ensure that the arrangements in place give parents/carers and pupils/students confidence in the school’s ability to provide effective support for medical conditions. The arrangements should show an understanding of how medical conditions impact on a child’s ability to learn, as well as increase their confidence. They should ensure that staff are properly trained to confidently, and competently provide the support pupils/students need.
		6. Ensuring that all pupils/students with medical conditions are able to play a full and active role in all aspects of school life, participate in school visits/trips/sporting activities, remain healthy and achieve their academic potential. This will require flexibility on the part of the school, and consideration may have to be given as to how pupils/students are reintegrated back into school after long periods of absence, or a change to their level of need and intervention.
		7. Ensuring that relevant training is delivered to a sufficient number of staff who will have responsibility to support children with medical conditions and that they are signed off as competent to do so. Staff to have access to information, resources and materials. Villa Real will have an ongoing training programme to meet the specialist needs of our young people.
		8. Ensure that the focus is on the needs of each individual child and how their condition can impact on their school life. Some of the medical conditions our pupils/students have impact significantly on quality of life and are life limiting. Some more obviously than others*.*
		9. Ensuring written records are kept of, any and all, medicines administered to pupils.
		10. Ensuring the policy sets out procedures in place for emergency situations.
		11. Ensuring the level of insurance in place reflects the level of risk.
		12. Handling complaints regarding this policy as outlined in the school’s Complaints Policy.
		13. Ensure that health of pupils/students is not put at risk unnecessarily by, for example, infectious diseases. They therefore do not have to accept a pupil/student into school at times where it would be detrimental to the health of that pupil, and others, to do so.
		14. Ensure appropriate services to meet medical needs are commissioned
	3. The Head Teacher is responsible for:
		1. Ensuring the policy is developed effectively with partner agencies and then making staff aware of this policy.
		2. The day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and Procedures of Villa Real School.
		3. Liaising with healthcare professionals regarding the training required for staff.
		4. Ensuring that all identified staff are comfortable, confident and competent in administering medication.
		5. Ensuring a system of supervision for staff who administer medication regularly.
		6. Ensure that unused medication is returned to the parents/carers, or destroyed following appropriate procedures, at the end of the school year / term
		7. Ensure that regular contact is maintained with parents/carers of pupils/students with very complex medical conditions, in order to ensure the pupil’s welfare needs are met.
		8. Ensure all staff are aware of a child’s medical condition.
		9. Developing Individual Healthcare Plans (IHCPs) and Health Passports. And ensuring that staff regularly update and monitor new advice relating to IHCPs and Health Passports.
		10. Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHCPs and Health Passports in normal, contingency and emergency situations.
		11. If necessary, facilitating the recruitment of staff for the purpose of delivering the promises made in this policy. Ensuring more than one staff member is identified, to cover holidays / absences and emergencies.
		12. Ensuring the correct level of insurance is in place for teachers and support staff who support pupils/students in line with this policy.
		13. Continuous two-way liaison with medical professionals and school in the case of any child who has or develops an identified medical condition.
		14. Ensuring confidentiality and data protection in line with GDPR.
		15. Assigning appropriate accommodation for medical treatment/ care.
		16. Have a defibrillator in school and provide defibrillator training to all staff willing to undertake it.
		17. Voluntarily holding 2 ‘spare’ salbutamol asthma inhalers for emergency use.
		18. Voluntarily holding a ‘spare’ epi pen for emergency use.
		19. Ensuring that Emergency Evacuation Plans accommodate those with medical conditions including staff.
	4. Staff members are responsible for:
		1. Taking appropriate steps to support children with medical conditions and familiarising themselves with procedures which detail how to respond when they become aware that a pupil/student with a medical condition needs help. A first-aid certificate is not sufficient. This must include familiarisation with all medical management plans, including epilepsy, asthma, gastrostomy and Emergency Care Plans, as appropriate*.*
		2. Knowing where controlled drugs are stored and where the key is held.
		3. Taking account of the needs of pupils/students with medical conditions in lessons. This will include altering parts of the lesson to ensure learning is still accessible.
		4. Undertaking training to achieve the necessary competency for supporting pupils/students with medical conditions, with particular specialist training as required.
		5. Allowing inhalers, adrenalin pens, catheters, syringes, extension tubes, suction machines, and feed bags to be held in an accessible location, following DfE guidance.
		6. Staff should seek additional advice if they are unsure of the facts, or implications, relating to a pupil’s medical needs. They should never agree to administer medication if they are unsure of the implication of doing so, or if they are uncomfortable with any aspect of the role, they must seek advice from the relevant member of staff, e.g. SENCO or medical team leader.
	5. School nurses are responsible for:
		1. Collaborating or developing an IHCP and Health Passport in anticipation of a child with a medical condition starting school.
		2. Notifying the school when a child has been identified as requiring support in school due to a medical condition at any time in their school career.
		3. Supporting staff to implement an IHCP and Health Passport and then participate in regular reviews of the IHCP and Health Passport. Giving advice and liaison on training needs.
		4. Liaising locally with specialist medical practitioners on appropriate support. Assisting the Head Teacher in identifying training needs and providers of training.
	6. Parents and carers are responsible for:
		1. Keeping the school informed about any new medical condition or changes to their child/children’s health, including emergency procedure agreed by GP or consultant Paediatrician.
		2. Participating in the development and regular reviews of their child’s IHCP and Health Passport.
		3. Completing a parental consent form to administer medicine or treatment before bringing medication into school.
		4. Ensuring that medication is collected at the time of school holidays.
		5. Providing the school with the medication, with name and address on, and equipment their child requires and keeping it up to date including collecting leftover medicine.
		6. Carrying out actions assigned to them in the IHCP and Health Passport with particular emphasis on, they or a nominated adult, being contactable.
		7. Ensuring that Villa Real School have sufficient information about their child’s needs and difficulties, to enable us to make decisions about how we can best enable effective provision*.*
		8. Advise school of any known side effects of the medication.
		9. Ensure that the list of key contact people is up to date and regularly reviewed, subject to any change in circumstance.
	7. Pupils are responsible for:
		1. Providing information on how their medical condition affects them, if they are able.
		2. Contributing to their IHCP and Health Passport, if they are able*.*
		3. Complying with the IHCP and Health Passport and self-managing their medication or health needs including carrying medicines or devices, if judged competent to do so by a healthcare professional and agreed by parents/carers.

# Training of staff

* 1. Newly appointed teachers, supply or agency staff and support staff will receive training on the ‘Supporting Pupils with Medical Conditions’ Policy as part of their induction.
	2. No staff member may routinely administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the condition and signed off as competent.
	3. School will keep a record of medical conditions supported, training undertaken and a list of staff qualified to undertake responsibilities under this policy. They will notify Health and Safety DCC, and Risk, Insurance and Governance Manager, DCC. All staff will routinely receive annual updates from school nursing team.

# Individual Healthcare Plans (IHCPs) and Health Passports

* 1. Where necessary an Individual Healthcare Plan (IHCP) / Health Passport will be developed in collaboration with the pupil, parents/carers, Head teacher, Special Educational Needs Coordinator (SENCO) and medical professionals.
	2. IHCPs / Health Passports will be easily accessible to all relevant staff, including supply/agency staff, whilst preserving confidentiality. IHCPs / Health Passports are stored on CPOMS and most up to date copy in class red files. Staffrooms are inappropriate locations under Information Commissioner’s Office (ICO) advice for displaying IHCP / Health Passport as visitor’s/parent helpers etc. may enter. If consent is sought from parents/carers a photo and instructions may be displayed. However, in the case of conditions with potential life-threatening implications the information should be available clearly and accessible to everyone*.*
	3. Parents/carers will complete an IHCP / Health Passport at the start of each academic year. They will be reviewed as part of the Annual Review process and when a child’s medical circumstances change.
	4. All of our pupils/students have an Education, Health and Care plan. The IHCP / Health Passport will have to be linked to it or become part of it. Individual plans are held for epilepsy management, gastrostomy care, asthma plans and Emergency Care Plans. These plans need to be displayed and easily accessible to staff in the case of an emergency in class and in red files.
	5. Where a child is returning from a period of hospital education or alternative provision or home tuition, collaboration between the LA /AP provider and school is needed to ensure that the IHCP/Health Passport identifies the support the child needs to reintegrate. A Risk Assessment may need to be written depending on the circumstances.
	6. Pupils who have PEGS fitted may have patency maintained by trained staff. Staff who are trained as part of direct payment work may replace Buttons to those named direct payment children only and signed by parents/carers in IHCP/Health Passport.
1. Transport arrangements
	1. Where a pupil/student with an IHCP/ Health Passport is allocated school transport, a copy of the IHCP/Health Passport will be copied to the Transport team and kept on the pupil/student record. The IHCP/Health Passport must be passed to the current operator for use by the driver/escort and the Transport team will ensure that the information is supplied when a change of operator takes place.
	2. For some medical conditions the driver/ escort will require adequate training. For pupils/students who receive specialised support in school with their medical condition this must equally be planned for in travel arrangements to school and included in the specification to tender for that pupil’s transport. It is important to recognise that although this is the policy for our Local Authority, current practice is to ring an ambulance and /or parents/carers in the case of a medical emergency whilst on transport.
	3. When prescribed controlled drugs need to be sent in to school, parents/carers will be responsible for handing them over to the adult in the car in a suitable bag or container. They must be clearly labelled with name and dose etc. See Administration of Medication Policy.
	4. Controlled drugs will be kept under the supervision of the adult in the car throughout the journey and handed to a school staff member on arrival. Any change in this arrangement will be reported to the Transport team for approval or appropriate action. See Administration of Medication Policy.
2. Education Health-Needs (EHN) referrals
	1. All pupils/students of compulsory school age who due to illness lasting 15 days or more, would not otherwise receive a suitable full-time education are provided for under the Local Authority’s duty to arrange educational provision for such pupils.
	2. In order to provide the most appropriate provision for the condition the EHN team accepts referrals where there is a medical diagnosis from a medical consultant and will liaise with the school whether the LA will provide support from Helen Perfect’s team of whether the school will provide support with school staff.

Medicines See Administration of Medication Policy.

* 1. Where possible, unless advised it would be detrimental to health, medicines should be prescribed in frequencies that allow the pupil/student to take them outside of school hours.
	2. If this is not possible, prior to staff members administering any medication, the parents/carers of the child must complete and sign a parental consent to administration of medicine form.
	3. Appropriately trained staff in school must record the medication onto the pupil’s medication record before it can be administered and signed off or on the school system with 2 signatures.
	4. Where a pupil/student is prescribed medication by a healthcare professional without their parents’/carers’ knowledge, every effort will be made to encourage the pupil/student to involve their parents/carers while respecting their right to confidentiality.
	5. No child under 16 years of age will be given medication containing aspirin without a doctor’s prescription.
	6. Medicines MUST be in date, labelled, and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered. On rare occasions this may also apply to Epipens, following recent medical advice
	7. Where necessary, medicines will be stored in the medication fridge in the medical room. This is to remain locked at all times. The temperature of the fridge will be checked by the P Emmerson and / or School Nurse every day
	8. Medicines and treatments may be given in the classrooms as appropriate but strict infection control must be maintained at all times. This will be outlined in IHCP / Health Passport as necessary.
	9. Usually four weeks’ supply of the medication may be provided to the school at any one time. In many cases a maximum of a term’s supply may be provided, for our pupils/students with long-term conditions.
	10. A child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. This is not something that we promote at Villa Real, given the nature of the learning difficulties our pupils/students have. Monitoring arrangements may be necessary. At Villa Real, we keep controlled drugs that have been prescribed for a pupil/student securely stored in a non-portable container and only named staff have access. Controlled drugs should be easily accessible in an emergency and therefore staff have the key. Only staff with Level 3 Administrator qualifications dispense controlled drugs.
	11. Controlled drugs are listed in the controlled drug book. These must be kept in a locked box, inside a locked bag whilst on trips.
	12. Medications will be stored in the wall cabinets in the medical room. Controlled drugs will be stored separately from all other drugs.
	13. Any medications left over at the end of the course will be returned to the child’s parents/carers.
	14. Written records will be kept of any medication administered to children.
	15. Pupils/students will never be prevented from accessing their medication.
	16. Emergency salbutamol inhaler kits may be kept voluntarily by school.
	17. General posters about medical conditions (diabetes, asthma, epilepsy etc.) are recommended to be visible in the staff room.
	18. Villa Real School cannot be held responsible for side effects that occur when medication is taken correctly.
	19. Staff will not force a pupil, if the pupil/student refuses to comply with their health procedure, and the resulting actions will be clearly written into the IHCP / Health Passport which will include informing parents/carers.
	20. An Epi-pen for use during an anaphylactic episode is stored in the medication cupboard.
	21. Individual inhalers and spacers should be kept in unlocked cupboards in the classroom

# Emergencies

* 1. Medical emergencies will be dealt with under the school’s emergency procedures which will be communicated to all relevant staff so they are aware of signs and symptoms.
	2. All staff working with our vulnerable students should know what action to take in event of an emergency.
	3. If a pupil/student needs to be taken to hospital, a member of staff will remain with the child until their parents/carers arrive. They must take copies of emergency management plans and the IHCP / Health Passport, if required.
	4. All Special Support Assistants have it written into their job description, that should a pupil/student require hospital treatment, that they will accompany them to the hospital.

# Day trips, residential visits and sporting activities

* 1. Unambiguous arrangements should be made and be flexible enough to ensure pupils/students with medical conditions can participate in school trips, residential stays, sports activities and not prevent them from doing so unless a clinician states it is not possible.
	2. To comply with best practice risk assessments should be undertaken, in line with HandS executive guidance on school trips, to plan for including pupils/students with medical conditions. Consultation with parents/carers, healthcare professionals etc. on trips and visits will be separate to the normal day to day IHCP / Health Passport requirements for the school day.
	3. This is carried out in accordance with the Evolve Educational Visits System. Emergency Medical Management Plans are carried by the lead staff and are at hand should medical care be needed.

#  Avoiding unacceptable practice

# Each case will be judged individually but in general the following is not considered acceptable.

The following behaviour is unacceptable in Villa Real School:

* 1. Preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary.
	2. Assuming that pupils/students with the same condition require the same treatment.
	3. Ignoring the views of the pupil/student and/or their parents/carers or ignoring medical evidence or opinion.
	4. Sending pupils/students home frequently or preventing them from taking part in activities at school.
	5. Sending the pupil/student to the medical room or school office alone or with an unsuitable escort if they become ill.
	6. Penalising pupils/students with medical conditions for their attendance record where the absences relate to their condition.
	7. Making parents/carers feel obliged or forcing parents/carers to attend school to administer medication or provide medical support, including toilet issues unless in an emergency.
	8. Creating barriers to children participating in school life, including school trips.
	9. Refusing to allow pupils/students to eat, drink or use the toilet when they need to in order to manage their condition.

#  Insurance

* 1. Teachers who undertake responsibilities within this policy will be assured by the Head teacher that are covered by the LA/school’s insurance.
	2. Insurance for certain activities or trips may be accessed for additional medical needs.
	3. Full written insurance policy documents are available to be viewed by members of staff who are providing support to pupils/students with medical conditions. Those who wish to see the documents should contact the Headteacher.

#  Complaints

* 1. All complaints should be raised with the school in the first instance.
	2. The details of how to make a formal complaint can be found in the School Complaints Policy.

#  Definitions

* 1. ‘Parent(s)’ is a wide reference not only to a pupil’s birth parents/carers but to adoptive, step and foster parents/carers, or other persons who have parental responsibility for, or who have care of, a pupil.
	2. ‘Medical condition’ for these purposes is either a physical or mental health medical condition as diagnosed by a healthcare professional which results in the child or young person requiring special adjustments for the school day, either ongoing or intermittently. This includes; a chronic or short-term condition, a long-term health need or disability, an illness, injury or recovery from treatment or surgery*. Being ‘unwell’ and common childhood diseases are not covered.*
	3. ‘Medication’ is defined as any prescribed or over the counter treatment.
	4. ‘Prescription medication’ is defined as any drug or device prescribed by a doctor, prescribing nurse or dentist and dispensed by a pharmacist with instructions for administration, dose and storage.
	5. A ‘staff member’ is defined as any member of staff employed at Villa Real School.

Defibrillator kit

At Villa Real School, the AED is located in the medical room. It is advised that it is used by the Clinical Lead/appropriately trained member of staff in the first instance, however, use of the AED was covered on the Emergency First Aid training that many staff hold.

An AED is a machine used to give an electric shock when a person is in cardiac arrest.

<https://www.gov.uk/government/publications/automated-external-defibrillators-aeds-in-schools>

APPENDICIES

[STAFF TRAINING RECORD 14](#_Toc464133807)

[CONTACTING EMERGENCY SERVICES 15](#_Toc464133808)

[MEDICAL INCIDENT RECORD 16](#_Toc464133809)

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[Annex A: Supporting Pupils/students with Medical Conditions lowchart 25](file:///G%3A%5CRuthC%5CFor%20Jill%5CGovernors%20Detail_Oct2016%5CMedical%20Conditions%20Policy%202016.docx#_Toc464133814)



STAFF TRAINING RECORD

|  |  |  |  |
| --- | --- | --- | --- |
| NAME | TRAINING RECEIVED | TRAINING PROVIDED BY | DATE UPDATE DUE |
|  |  |  |  |
|  |  |  |  |
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CONTACTING EMERGENCY SERVICES

Request for an ambulance

Dial 999, ask for an ambulance and provide the following information:

* Your phone number
* Your location i.e. your School or setting address and postcode (be prepared to give the exact location using local landmarks and record this here)
* Identify the best entrance and ensure that the crew are met at the entrance
* Give your name
* Give child’s name and a brief description of symptoms

Provide copy of child’s IHCP, Emergency Plans and Health Passport



MEDICAL INCIDENT RECORD

|  |  |  |
| --- | --- | --- |
| PUPIL NAME | DATE OF BIRTH | DATE AND TIME OF INCIDENT |
| DETAILS OF INCIDENTActivity at the time of the Incident?Length of the activity when the incident started?Sensory or Behavioural Issues? Tick and DetailOther Children Noise Light Heat |
| ACTION TAKENMedication?Medical Support Sought? Nurse First Aider Ambulance Oxygen Given? Epileptic Intervention? Ambibag? Suction? Oral/Trachi?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Pupil Response?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| RELEVANT STAFF/AGENCIES INFORMED ALONGSIDE PARENTNurse O.T. Physio SLT SW Parent Informed in: Telephone Call Letter Home/School Diary |
| PERSON COMPLETING FORM:……………………………………………………………………………. |
| END OF INCIDENTPupil Recovery?Stay at school?Hospital?Presentation after incident? |
| RECOMMENDATION FOLLOWING REVIEW OF INCIDENT: |
| MONITORING OF RECOMMENDATIONS: |
| NOTES: |
| SIGNED OFF: DATE WHEN ACTIONS COMPLETE Full Care Team: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Head Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |



INDIVIDUAL HEALTH CARE PLAN

|  |  |
| --- | --- |
| Name of school/setting  |  |
| Childs Name |  |
| Group/Class/Form |  |
| Date of Birth |  |
| Childs Address |  |
| Medical Condition or diagnosis |  |
| Date |  |
| Review Date |  |

Family Contact Information

|  |  |
| --- | --- |
| Name  |  |
| Contact Number(s) |  |
| Relationship to child |  |
| Name |  |
| Contact Number(s) |  |
| Relationship to child |  |
| Name |  |
| Contact Number |  |
| Relationship to child |  |

Clinic/Hospital Contact

|  |  |
| --- | --- |
| Name |  |
| Contact Number |  |
| Name |  |
| Contact Number |  |
| Name |  |
| Contact Number |  |

G.P

|  |  |
| --- | --- |
| Name |  |
| Contact Number |  |

|  |  |
| --- | --- |
| Who is responsible for providing in school support |  |

Describe Medical Needs and give details of child’s symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.

|  |
| --- |
|  |

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| --- |
| Parent Feedback – Describe Medical Needs and give details of child’s symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc. |

Daily Care Requirements

|  |
| --- |
| DietAllergies |

|  |
| --- |
| Parent Feedback – Please provide any further relevant information in the box below. |

Specific support for the pupils/students educational, social and emotional needs

|  |
| --- |
|  |

Arrangements when out of school

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| --- |
|  |

|  |  |
| --- | --- |
| School |  |
| Signature of Parent |  |
| Signature of teaching staff |  |

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| --- |
| Risk Assessment |
| Ref:  | Area: Whole School and Site |
| Activity: N/A | People at Risk:  |
| Review Date:  |
| Student Name: Staff Name:  |
| Hazard Identified | Risks | Rating | Existing Control Measures | Additional Action Required | Priority |
|  |  |  |  |  |  |



HAZARD SURVEY - PRIORITY CLASSIFICATION

1. Major hazard requiring substantial expenditure or re-organisation or working procedures and documentation.

2. Minor hazard where re-appraisal of existing control measures may be necessary as a result of the risk assessment.

3. Major or minor hazard where existing control measures are adequate.

NOTE: In these cases a risk assessment is still required to record the fact that the hazard has been recognised.



USEFUL CONTACTS

Allergy U.K. Helpline 01322 619898

 [www.allergyuk.org](http://www.allergyuk.org)

The Anaphylaxis Campaign Helpline 01252 542029

 [www.anaphylaxis.org.uk](http://www.anaphylaxis.org.uk)

 [www.allergyinAcademy’s.co.uk](http://www.allergyinschools.co.uk)

Association for Spina Bifida Helpline 0845 450 7755

and Hydrocephalus [www.asbah.org](http://www.asbah.org)

Asthma U.K. Advice line 08457 010203

 [www.asthma.org.uk](http://www.asthma.org.uk)

Council for Disabled Children Helpline 020 7843 1900

 [www.ncb.org.uk/cdc](http://www.ncb.org.uk/cdc)

Contact a Family Helpline 0808 808 3555

 [www.cafamily.org.uk](http://www.cafamily.org.uk)

Cystic Fibrosis Trust 020 8464 7211

 [www.cftrust.org.uk](http://www.cftrust.org.uk)

Diabetes U.K. 0845 1202960

 [www.diabetes.org.uk](http://www.diabetes.org.uk)

Epilepsy Action 0808 800 5050

 [www.epilepsy.org.uk](http://www.epilepsy.org.uk)

National Association for Epilepsy 01494 601300

 [www.epilepsynse.org.uk](http://www.epilepsynse.org.uk)

# Local Organisations

Contact a family Email: northeast.office@cafamily.org.uk

Annex A: Supporting Pupils with Medical Conditions flowchart