# **Church Aston Infant School**



# **Supporting Pupils with Medical Conditions and Administration of Medication in Schools**

February 2024



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This policy should be read in conjunction with Telford and Wrekin's Health and Safety 'Medication in Schools' guidance. The Governors and staff of Church Aston Infant School are committed to the school providing an inclusive community and wish to ensure that pupils with medication needs receive appropriate care and support at school. All children with medical conditions will be properly and effectively supported so that they have full access to education and the same opportunities as any other child, including school trips and physical education. The views of parents and pupils will be sought in order to provide the best support for each child with medical needs. No child with a medical condition will be denied admission to school or excluded based on their medical needs, and arrangements will be made to ensure that the child is fully supported.

The Governing Body and the Headteacher, MRS J GRIFFITHS will ensure that this policy is implemented effectively and accept responsibility in principle for members of the school staff giving prescribed medication during the school day where those members of staff have volunteered to do so. All staff understand that certain medical conditions are serious and can be potentially life-threatening, particularly if ill managed or misunderstood. The Headteacher will ensure that all relevant staff are made aware of a pupil's condition and will put into place arrangements to cover staff when a member of staff is absent. It is the responsibility of the Head teacher to brief supply staff when necessary. The SEND Co-ordinator, MRS J GRIFFITHS will ensure that Individual Health Care Plans are monitored. The class teacher will ensure that Risk Assessments address the needs of children with medical conditions.

#### Please note that parents should keep their children at home if acutely unwell or infectious.

Parents are responsible for providing the Headteacher with comprehensive information regarding the pupil's condition and medication. Some medications are dispensed on a short-term basis, such as when a pupil is completing a course of treatment. Others are given on a regular basis as part of the management of a pupil's medical condition. Some medicines or procedures are for use only in emergencies. Prescribed medication will not be accepted in school without complete written and signed instructions from the parent (see Med Form 1).

Staff will not give a non-prescribed medicine to a child unless there is specific prior written permission from the parents which must state the dosage and be in accordance with the instructions specified on the product container. Information should be sought as to whether the pupil is taking any other medication that may be likely to have an adverse health effect from the interaction of the two.

Only reasonable quantities of medication should be supplied to the school (for example, a maximum of four weeks supply at any one time).

Each item of medication must be delivered to the Headteacher or another authorised person, in normal circumstances by the parent, <u>in a secure and labelled container as originally dispensed</u>. Each item of medication must be clearly labelled with the following information:

- Pupil's Name.
- Name of medication.
- Dosage.
- Frequency of administration.
- Date of dispensing

- Storage requirements (if important).
- Expiry date.

The school will not accept items of medication in unlabelled containers.

#### **Safe Storage – Emergency Medication**

Emergency medication is readily available to pupils who require it at all times during the school day or at off-site activities. If the emergency medication is a controlled drug and needs to be locked up, the keys are readily available and not held personally by members of staff. Pupils at this school have their emergency asthma medication accessible in the classroom at all times. Staff carry pupils' emergency medication with them when going to PE in the village hall or on school visits. Pupils, whose healthcare professionals and parents advise the school that their child is not yet able or old enough to self-manage and carry their own emergency medication, know exactly where to access their emergency medication.

The school holds an emergency salbutamol inhaler kit which can be used for children who have been diagnosed with asthma and prescribed a reliever inhaler or who have been prescribed a reliever inhaler. Written consent will be updated annually at the start of the academic year. Church Aston Infant School has adopted the **Protocol for the Use of Emergency Salbutamol Inhalers in Schools**.

#### Safe Storage – Non-Emergency Medication

Unless otherwise indicated all medication to be administered in school will be kept in a locked medicine cabinet held in a cool dry place. Some medication may need to be refrigerated. All refrigerated medicine is stored in an airtight container and is clearly labelled. Refrigerators used for storage are in a secure area inaccessible to unsupervised pupils. Due care is taken to ensure that this medicine is stored correctly on school trips.

All medication is sent home with pupils at the end of the school year. Medication is not stored during the summer holidays. It is the parent's responsibility to ensure new and in date medication comes into school on the first day of the new academic year. A named member of staff is responsible for checking the dates of medication and arranging for the disposal of any that have expired. This check is done at least three times a year and is always documented.

The school will keep a written record of the dates and times of each administration that is made on the Administration of Medicines Record (Appendix A), which they will have available for parents.

If children refuse to take medicines, staff will not force them to do so, and will inform the parents of the refusal, as a matter of urgency, on the same day. If a refusal to take medicines results in an emergency, the school's emergency procedures will be followed.

It is the parents' responsibility to renew the medication when supplies are running low and to ensure that the medication supplied is within its expiry date.

Parents must inform the school of any changes in medication such as the change of dosage or if the medication has been stopped.

School staff will not dispose of medicines. Medicines, which are in use and in date, should be collected by the parent at the end of each term. Date expired medicines or those no longer required for treatment will be returned immediately to the parent for transfer to a community pharmacist for safe disposal.

For each pupil with long-term or complex medication needs, the Headteacher will ensure that an Individual Healthcare Plan is drawn up in conjunction with the appropriate health professionals. This should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency

symptoms and procedures. Other pupils in school should know what to do in general terms, such as informing the teacher immediately if they think help is needed.

Where it is appropriate to do so, pupils will be encouraged to administer their own medication, under staff supervision.

Upon discovery of medicines being given to the wrong child, or when the incorrect dosage has been given (under or over dosing), a First Aider must be summoned and the Head teacher must be notified. **The child must <u>not</u> be left unattended.** In the event of the child becoming unconscious or displaying severe signs of a reaction to the medication an ambulance must be summoned immediately (dial 999). Details of the medication, dose given and time given must be given to the ambulance crew or doctor. A member of staff must escort the child transferred to hospital.

While waiting for medical help the child concerned **must be fully supported by a fully qualified First Aider at all times.** Upon seeking advice a full record must then be kept, details must include:

- Date and time doctor consulted
- Name of doctor
- Details of what happened
- Advice given
- Details of any signs, symptoms or reactions

Regular checks must be made and recorded each time.

If the incident falls under RIDDOR then the HSE will be informed, in accordance with RIDDOR guidelines. No medication which was administered incorrectly will be disposed of.

If the medication wrongly administered to a child belongs to another pupil, then medical advice must be sought by the Headteacher via a registered practice doctor on the best course of action following the missed medication.

An investigation will take place after the incident to include a full review of all risk assessments, current practices and the policies and procedures governing the management of medication, in order to stop further incidents from occurring. The Headteacher must debrief and support the person who administered the medication incorrectly, and take the appropriate course of action, as required, which may include retraining. If repeat incidents are made by the same member of staff then further guidance will be sought from the School's Human Resources Partner.

The Misadministration of Medication Incident Form: MED 3 will be completed with a copy sent to the school's Health and Safety Advisor.

The school will continue the administration of medication to a pupil whilst on educational visits away from the school premises, even if additional arrangements might be required. The child's needs will be identified on the Educational Visit Risk Assessment.

#### **Short Term Medication**

Short term medication will only be administered at school when it would be detrimental to the child's health or affect school attendance not to do so.

#### **Training**

School staff are informed and regularly reminded about this policy through the distribution of copies when the policy has been reviewed each year.

All staff are aware of the most common serious medical conditions at this school and understand their duty of care to pupils in the event of an emergency.

Staff who volunteer to assist in the administration of medication will receive appropriate training/guidance through arrangements made with the School Health Service. This will be updated annually and a certificate will be given to all staff who have successfully undertaken the training.

Staff must not give prescription medicines or undertake health care procedures without appropriate training. A First Aid certificate does not constitute appropriate training.

#### **Unacceptable Practice**

It is not generally acceptable practice to:

- prevent children from having easy access to their inhalers and medication and prevent their medication from being administered when and where necessary;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or ignore medical evidence or opinion
- send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- if the child becomes ill, send them to the school office unaccompanied or with someone unsuitable;
- penalise children 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 school to administer medication or provide medical support to their child, including toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs; or
- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

# Procedure for admitting a pupil who has a medical condition (see Appendix B)

Church Aston Infant School works in partnership with parents and carers to support transitional arrangements between schools and /or help in the reintegration of a pupil returning to school. When a pupil's needs change, arrangements for staff training or support arrangements will be reviewed so that the child's needs are accommodated fully. Whether a child has a new diagnosis or is starting school the procedure must be completed within two weeks.

'Schools do not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on the available evidence. This would normally involve some form of medical evidence and consultation with parents. Where evidence conflicts, some degree of challenge may be necessary to ensure the right support can be put in place.' (DfE Supporting pupils at school with medical conditions Sept 2014)

## **Individual Health Care Plans (IHCP)**

The main purpose of an IHCP is to identify the level of support that is needed at school for an individual child. The IHCP clarifies for staff, parents/carers and the child the help the school can provide and receive. These plans will be reviewed annually as a minimum, or more frequently at the request of parents/carers or the school/centre, or as required.

An IHCP will include:

- Details of the child's condition
- What constitutes an emergency
- What action to take in an emergency

- What not to do in the event of an emergency
- Who to contact in an emergency
- The role of staff
- Special requirements e.g. dietary needs, pre-activity precautions
- Side effects of medicines

A copy will be given to parents/carers, class teachers, teaching assistants and a copy will be retained in the Medical Needs file in the office and the child's individual file.

All trained staff will ensure they are aware of the protocols and procedures for specific pupils in school through attending training provided and reading care plans devised for individual pupils.

#### Roles in the partnership to maintain an effective policy

#### **Employer**

This school's employer has a responsibility to:

- Ensure the health and safety of their employees and anyone else on the premises or taking part in school activities (this includes all pupils). This responsibility extends to those staff and others leading activities taking place off-site, such as visits, outings or field trips
- Ensure health and safety policies and risk assessments are inclusive of the needs of pupils with medical conditions
- Make sure the medical conditions policy is effectively monitored and evaluated and regularly updated
- Report to parents, pupils, school staff and the local authority about the successes and areas for improvement of this school's medical conditions policy
- Provide indemnity for staff who volunteer to administer medication to pupils with medical conditions.

#### Headteacher

This school's Headteacher has a responsibility to:

- Ensure the school is inclusive and welcoming and that the medical conditions policy is in line with local and national guidance and policy frameworks
- Liaise between interested parties including pupils, school staff, special educational needs coordinators, welfare officers, teaching assistants, school nurses, parents, governors, the school health service, the local authority transport service, and local emergency care services
- Ensure the policy is put into action, with good communication of the policy to all
- Ensure every aspect of the policy is maintained
- Ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place using pupils' Healthcare Plans
- Ensure pupil confidentiality
- Assess the training and development needs of staff and arrange for them to be met
- Ensure all supply teachers and new staff know the medical conditions policy
- Delegate a staff member to check the expiry date of medicines kept at school and maintain the school medical conditions register
- Monitor and review the policy at least once a year, with input from pupils, parents, staff and external stakeholders
- Update the policy at least once a year according to review recommendations and recent local and national guidance and legislation
- Report back to all key stakeholders about implementation of the medical conditions policy.

#### **School Staff**

All staff at this 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
- understand the school's medical conditions policy
- know which pupils in their care have a medical condition and be familiar with the content of the pupil's Individual Healthcare Plan
- allow all pupils to have immediate access to their emergency medication
- 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
- Be aware of pupils with medical conditions who may be experiencing bullying or need extra social support
- Understand the common medical conditions and the impact it can have on pupils (pupils should not be forced to take part in any activity if they feel unwell)
- Ensure all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in
- Ensure pupils have the appropriate medication or food with them during any exercise and are allowed to take it when needed.

## **Teaching Staff**

Teachers at this school have a responsibility to:

- Ensure pupils who have been unwell catch up on missed school work
- Be aware that medical conditions can affect a pupil's learning and provide extra help when pupils need it
- Liaise with parents, the pupil's healthcare professionals, special educational needs coordinator and welfare officers if a child is falling behind with their work because of their condition
- Use opportunities such as PSHE and other areas of the curriculum to raise pupil awareness about medical conditions.

#### School Nurse or School Healthcare Professional

The school nurse at this school has a responsibility to:

- Help update the school's medical conditions policy
- Help provide regular training for school staff in managing the most common medical conditions at school
- Provide information about where the school can access other specialist training.

#### **First Aider**

First aiders at this school have a responsibility to:

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

#### **Special Educational Needs Coordinator**

Special Educational Needs Coordinator at this school has the responsibility to:

• Help update the school's medical condition policy

- Know which pupils have a medical condition and which have special educational needs because of their condition
- Ensure pupils who have been unwell catch up on missed schoolwork
- Ensure teachers make the necessary arrangements if a pupil needs special consideration or access arrangements in exams or course work.

#### Local doctors and specialist healthcare professionals

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

- Complete the pupil's Individual 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 know how to self-manage their condition
- Ensure the pupil knows how to take their medication effectively
- Ensure children have regular reviews of their condition and their medication
- Provide the school with information and advice regarding individual children with medical conditions (with the consent of the pupil and their parents)
- Understand and provide input in to the school's medical conditions policy.

#### **Emergency Care Services**

Emergency care service personnel in this area have a responsibility to:

• have an agreed system for receiving information held by the school about the child's medical conditions, to ensure best possible care

#### **Pupils**

The pupils at this 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
- Let any pupil take their medication when they need it, and ensure a member of staff is called
- Treat all medication with respect
- Know how to gain access to their medication in an emergency
- Ensure a member of staff is called in an emergency situation.

#### **Parents/Carers**

The parents/carers 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 catches up on any school work they have missed

- 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.

This policy will be monitored annually and updated when necessary to ensure new legislation is incorporated. Staff will regularly receive opportunities to discuss and evaluate the management of the procedures and protocols in school.

This policy will also be made available to parents through the school website. We will ask parents for annual updates regarding medical information.

# **Complaints**

Should parents/carers be dissatisfied with the support provided they are advised to discuss their concerns with the
school. If for whatever reason this does not resolve the issue, they may make a formal complaint following the
guidance set out in the Church Aston Infant School Complaints Policy.



#### Form MED1

School: CHURCH ASTON INFANT SCHOOL

Address:

Church Aston, Newport, Shropshire. TF10 9JN

Template B:

#### PARENTAL AGREEMENT FOR SETTING TO ADMINISTER MEDICATION

DETAILS OF PUPIL (Capitals please)								
Name		M/F	Date of Birth	/ /	Class			
Condition or illness (e.g. Asthma; Diabe	tes; Epilepsy, Cystic Fibrosis,	Anaphylo	axis, Recovery	ı from? Illness, etc.,	) <u>;</u>			
DOCTOR'S DETAILS								
Doctor's	Medical Practice				Telephone			
Name					Number			
		ı				1		
MEDICATION AND ADMI	NISTRATION							
Name of medication (give full detail	ls given on the contain	er label	issued by t	he pharmacist,	)			
Type of Medication (e.g. tablets, mi	xture, inhaler, Epipen,	other (	please spec	ify)				
Date Dispensed:	Date Dispensed:  Dosage and method:							
Times to be taken in School:	Is precise timing crit	ical? Ye	es/ No					
For how long will your child need to	take this medication							

onset of asthma attack, onset of migraine etc.)	<b>.</b> .	g. before e	exercise
insect of distribute details, offsect of fingrame etc.,			
'ha madiantian naoda ta ha administarad hu a mambar af staff		Yes	No
he medication needs to be administered by a member of staff		res	INO
My child is capable of administering the medication him/herself under the supervis staff	ion of a member of	Yes	No
would like my child to keep his/her medication on him/ her for use as necessary		Yes	No
The medication needs to be readily accessible in case of emergency		Yes	No
Precautions or Side Effects:  What to do in an emergency:			
viiat to do iii an emergency.			
(Please read the notes on the reverse of this form carefully. If you are medicine is to be given you must seek the advice of your child's doctor.			.)
The doctor named above has advised that it is necessary for my child during school time. I understand that teachers have no <i>obligation</i> to administration of medicines at school. However, I request that the madministered by/taken under supervision of a member staff, who made medical training. The school, the Headteacher and staff accept no redeath or damage suffered by a pupil as a result of the administration form, other than any injury, death or damage which arises because the staff have been negligent	give or supervise the nedication named abo by not have had any fi esponsibility for any in n of medicine mention	ove be rst aid or njury, ned in this	
	e at the end of each to	erm.	
I shall arrange to collect and dispose of any unused, expired medicine			

- 1. The school will consider each request on its merits. Where it is practicable the school may well prefer parents to come into school at appropriate times to administer the medicine themselves or make arrangements at break or lunchtime for the pupil to go home to receive the medication.
- 2. The school may refuse to undertake administration where this is seen to be the reasonable decision in the best interests of the school. For example where timings of administration are critical and crucial to the health of the pupil and cannot be guaranteed; where specific technical or medical knowledge and/or training is required or where administration would make unacceptable intimate contact with the pupil necessary.
- 3. The school will not agree to administer any medication in school without a written request using this form, having first been made.
- 4. The school will not agree to administer any medication in school that is not essential to be administered during the course of the school day. (If it is acceptable for doses to be given before and after school the school should not be asked to administer during the school day).
- 5. All requests will need to be discussed fully with the head teacher or other authorised member of staff before any medicines are sent into school.
- 6. Any prescribed medicine must be supplied to the school in the original container labelled by the pharmacist with the name of the medicine, full instructions for use and the name of the pupil. Any non-prescribed medicine bought by the family should be in the original container bearing the manufacturer's instruction/guidelines. The school may refuse to administer any medicines supplied in inappropriate containers.
- 7. For pupils on long-term medication the request form should be renewed by the parent/carer when required by the school and in any event at the beginning of each new school year.
- 8. Parents are responsible for notifying the school immediately in writing of any subsequent changes in medicines or doses.
- 9. Parents are responsible for notifying the school immediately the doctor has stopped the medication.
- 10. Parents are responsible for collecting and disposing of any unused or expired medicine at the end of each term.
- 11. A record will be kept by the school of all medicines administered and when in respect of each pupil for whom it has agreed to administer medicines.
- 12. Where they feel it to be necessary the school reserves the right to ask parents to supply a doctor's note to support/confirm the information given on the request form.
- 13. You may find it necessary to seek your Doctor's help in completing this form.

Template C:

# RECORD OF MEDICINE ADMINISTERED TO AN INDIVIDUAL CHILD

Name of school:	Church Aston Infant School					
Name of child:						
Date medicine provided by parer						
Group/class/form:						
Quantity received:						
Name and strength of medicine:						
Expiry date:						
Quantity returned:						
Dose and frequency of medicine:						
Staff signature:	Print name:					
Signature of parent:	Print name:					
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:						

# C: Record of medicine administered to an individual child (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:		

#### SCHOOL RECORD OF MEDICATION ADMINISTRATION TO ALL CHILDREN

Name of school: Church Aston Infant School	

#### Notes:

- 1. No medication should be administered to any pupil without a parental request form (Med 1) having been received. Med 1 should be held within this administration record file until the completion of the period of medication when the request form should be transferred to the pupil's personal file.
- 2. Any administration of medication including analgesic (pain reliever) to any pupil must be recorded.

Date	Time	Pupil's Name	Name of Medication	Dose Given	Any Reactions/Remarks	Signature of Staff - Please print name

Date	Time	Pupil's Name	Name of Medication	Dose Given	Any Reactions/Remarks	Signature of Staff - Please print name



#### Form MED 3

School: CHURCH ASTON INFANT SCHOOL

Address:

Church Aston, Newport, Shropshire, TF10 9JN

# **Misadministration of Medications for Schools Form**

Name of child wh	o received the	Name:				
Incorrect medicat	tion.					
		Address:				
Date incident occ	urred					
Time incident occ	urred					
Who was the orig prescribed for?	inal medication					
Please list the	Name of Medication	Dose give	n	Coi	mments	
incorrect						
medication						
administered						
				ı		
Was the child adr	mitted to	Yes			No	
Hospital ?(please	tick)					

If yes, which h they admitted	ospital and what ti ?	me were				
Advice sought from a doctor or Pharmacist ?(other than hospital)			Yes		No	
			Date and ti	me advice so	ught	
Name of Doct	or or Pharmacist					
Contact detail	s:					
(address, telep	phone, number)					
Persons on du incident occur	-					
Child's parents contacted	Record summary	of convers	sation:			
Was the mem	ber of staff admini	stering the	e medication	trained and		
	do so ?(please circl				Yes	No
How did the incident occur?	Describe in full d	etails:				

Outcome:	Please tick/add comments
	,
Dayants informed and incident report form	
Parents informed and incident report form completed	
Child monitored with no ill effects	
Outcome uncertain	
Child may have short term side offests	
Child may have short term side effects	
Child survived but may have long term damage	
If admitted to hospital how long did they stay in for (dates from/to)	
What systems were in place at the time	
medication was incorrectly administered?	
Risk assessment reviewed	
Training needs identified	
Misadministration form completed	
copy sent to Internal Health and Safety, 7 <sup>th</sup>	
Floor Darby House, Lawn Central, TELFORD, TF3 4JA, 01952 (3)83627	
• copy on child's file	

Name of school:	Church Aston Infant School
Name:	
Type of training received:	
Date of training completed:	
Training provided by:	
Profession and title:	
	has received the training detailed above and is competent to carry ecommend that the training is updated [].
out any necessary treatment. I re Trainer's signature:	
Trainer's signature:	ecommend that the training is updated [].
	ecommend that the training is updated [].
Trainer's signature:	ecommend that the training is updated [].
Trainer's signature:	ecommend that the training is updated [].  Print name:
Trainer's signature:  Date:	ecommend that the training is updated [].  Print name:
Trainer's signature:  Date:  I confirm that I have received the	ecommend that the training is updated [].  Print name:

#### Template G:

#### **CONTACTING EMERGENCY SERVICES**

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

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

- 1. your telephone number
- 2. your name
- 3. your location as follows; Church Aston Infant School, Church Aston, Shropshire
- 4. state what the postcode is TF10 9JN
- 5. provide the exact location of the patient within the school setting
- 6. provide the name of the child and a brief description of their symptoms
- 7. inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
- 8. put a completed copy of this form by the phone

#### **Template H:**

# MODEL LETTER INVITING PARENTS TO CONTRIBUTE TO INDIVIDUAL HEALTHCARE PLAN DEVELOPMENT

#### **Dear Parent**

#### DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case.

The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom.

Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend.

The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting.

I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely

#### **Template J:**

#### Consent form for USE OF EMERGENCY SALBUTAMOL INHALER

Church	Aston	Infant	School
CHALCH	731011		3011001

Child showing symptoms of asthma / having asthma attack

- 1. I can confirm that my child has been diagnosed with asthma / has been prescribed an inhaler [delete as appropriate].
- 2. My child has a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day.
- 3. In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

Signed:	Date:	
Name (print):	·	
Child's name:	Class:	
Parent's address and contact details:		
Telephone:	Email:	

#### Template K:

# SPECIMEN LETTER TO INFORM PARENTS OF EMERGENCY SALBUTAMOL **INHALER USE**

Church Aston Infant Scl	hool		
Child's name:		Class:	
Date:			
·		has had problems w	rith his / her
breathing today.			
	ff helped them to use the e their own asthma inhal	er with them, so a member of sto	off helped the

- to use the emergency asthma inhaler containing salbutamol. They were given ...... puffs.
- Their own asthma inhaler was not working, so a member of staff helped them to use the emergency asthma inhaler containing salbutamol. They were given ...... puffs. .

[Delete as appropriate]

Although they soon felt better, we would strongly advise that you have your seen by your own doctor as soon as possible.

Yours sincerely,

#### APPENDIX A

# INDIVIDUAL HEALTH CARE PLAN

Name of school/setting:	CHURCH ASTON INFANT SCHOOL
Child's name:	
Class:	
Date of birth:	
Child's address:	
Medical diagnosis or condition:	
Date:	
Review date:	
Family Contact Information	
1. Name:	
Phone no. (work):	
(home):	
(mobile):	
2. Name:	
Relationship to child:	
Phone no. (work):	
(home):	
(mobile):	

Clinic/Hospital Contact	
Name:	
Phone no:	
G.P.	
Name:	
Phone no:	
Who is responsible for providing support in school?	
	ild's symptoms, triggers, signs, treatments, facilities, etc.
equipment or devices, environmental issues e	etc.
equipment or devices, environmental issues e	stration, when to be taken, side effects, contra-
Name of medication, dose, method of admining administered by/self-administered	stration, when to be taken, side effects, contra-
equipment or devices, environmental issues of admini	stration, when to be taken, side effects, contra-
Name of medication, dose, method of admining administered by/self-administered	etc.  Stration, when to be taken, side effects, contrad with/without supervision:

Other informatio	n:	
Describe what co	onstitutes an emergency, and the action to take if this occurs:	
Who is responsib	ole in an emergency (state if different for off-site activities)?	
Plan developed v	vith:	
Chaff has in in a second		
Starr training nee	eded/undertaken – who, what, when:	

#### PROCESS for DEVELOPING INDIVIDUAL HEALTHCARE PLANS

Parent or healthcare professional informs school that child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed Headteacher or senior member of school staff to whom this has been delegated, co-ordinates meeting to discuss child's medical support needs; and identifies member of school staff who will provide support to pupil Meeting to discuss and agree on need for IHCP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them) Develop IHCP in partnership - agree who leads on writing it. Input from healthcare professional must be provided School staff training needs identified Healthcare professional commissions/delivers training and staff signed-off as competent - review date agreed IHCP implemented and circulated to all relevant staff IHCP reviewed annually or when condition changes. Parent or healthcare professional to initiate