

# Medlock Primary School



## Medical Policy

Supporting Pupils at school with Medical  
Conditions

March 2019  
Review: March 2022

## Named personnel with designated responsibility for SEND (incorporating Medical needs)

Academic year	Designated Lead Person(s)	Nominated Governor	Chair of Governors
2014 - 2015	J. Brown	A. Corcoran	Pam Brown
2015 - 2016	J. Brown	Lindsay Gilbert	Lindsay Gilbert
2017 - 2018	J. Scott	Lindsay Gilbert	Lindsay Gilbert
2018 - current time	P. O'Dwyer	Lindsay Gilbert	Lindsay Gilbert

## Policy review dates (frequency of review: annual)

Review Date	Changes made	By whom
April 2015	Policy created	Manchester City Council Medlock Primary School
April 2016	Policy reviewed	J. L. Herbert & Governors
November 2018	Policy reviewed	J. Brown & Governors
January 2020	Schedules review	J. Brown & Governors

## Ratification by Governing Body

Academic year	Date of ratification	Chair of Governors
2014 - 2015	20.5.15	Pam Brown
2015 - 2016	02.03.16	Lindsay Gilbert
2018 - 2017		Lindsay Gilbert

## INTRODUCTION

We want all children and young people to have successful and fulfilling lives. Section 100 of the Children and Families Act 2014 places a statutory duty on all schools to effectively manage and meet the needs of pupils with medical conditions, medical needs and physical disabilities. The aim is to ensure that all children with medical conditions, in terms of both physical and mental

health, are properly supported in school. The outcome should be that they can play a full and active role in all aspects of school life including trips, educational visits, residential and extended school activities, such that they remain healthy and achieve their academic potential.

This policy document should be considered in conjunction with all other relevant duties, policies and guidance, for example, Health and Safety legislation, the SEND code of practice and the Equality Act 2010 that may impact on support / provision for pupils with medical conditions.

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

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

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

## **PURPOSE OF DOCUMENT**

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

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

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

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

All staff in schools and academies have a duty to maintain professional standards of care and to ensure that children and young people are safe. It is considered to be good practice that schools and academies will consider and review cases individually and actively support pupils with medical conditions, including administering medicines or medical interventions in order to meet the all-round needs of the child. However, there is no legal duty requiring individual staff to administer medication, carry out medical interventions or to supervise a child when taking

medicines. Any member of staff may be asked to administer medicines or medical interventions but they cannot be required to do so. This is a voluntary role.

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

## **1. ROLES AND RESPONSIBILITIES**

### **1.1 The Governing Body**

The governing body is responsible for:

- ensuring the Head Teacher develops and effectively implements policy with partners and school staff, including regular policy review;
- ensuring the Head Teacher makes all staff aware of this policy on supporting pupils with medical conditions and all staff understand their role in its implementation;
- designating a named individual/s who is responsible for effective implementation of this policy (*Julia Scott*)
- ensuring this policy clearly identifies how the roles and responsibilities of staff who are involved in the arrangements to support pupils at school with medical conditions are made clear to both staff, parents/carers and the child;
- ensuring that all relevant staff are aware of an individual child's medical condition and needs;
- ensuring that sufficient numbers of staff receive appropriate training to fulfil the roles and responsibilities of supporting children with medical conditions i.e. are able to deliver against all Individual Healthcare Plans (IHCPs) and implement policy, including in contingency and emergency situations;
- ensuring that a system is in place which identifies procedures to be followed on receipt of notification of a pupil's medical needs; procedures should cover any transitional arrangements or when pupil needs change (see Appendix 1);
- ensuring that cover arrangements are always available in the event of staff absence or staffing changes including briefing for volunteers, supply teachers and appropriate induction for new members of staff;
- ensuring that individual healthcare plans (IHCPs) are in place, where appropriate, and developed in consultation with parents/carers, healthcare professionals, relevant staff and (if appropriate) the child or young person;
- ensuring that individual healthcare plans (IHCPs) are monitored and are subject to review, at least annually, or sooner if needs change;
- ensuring that risk assessments relating to the school environment are in place, as appropriate, including consideration for actions to take in the event of emergency situations;
- ensuring that risk assessments relating to off-site visits, residential trips and extended school opportunities offered outside the normal timetable are in place, as appropriate, including consideration for actions to take in the event of emergency situations;
- ensuring that appropriate insurance is in place to support staff to undertake this role;
- ensuring that a complaints procedure is in place and is accessible.

### **1.2 The Headteacher**

The Headteacher is responsible for:

- ensuring that the notification procedure is followed when information about a child's medical needs are received (Appendix 1);
- ensuring that parents/carers provide full and up to date information about their child's medical needs by completion of 'Parent/Carer Information about a Child's Medical Condition' form (Template A)
- deciding, on receipt of a 'Parent/Carer Request and Agreement for School to Administer Medicines / Medical Interventions' form (Template B), on case by case basis, whether any medication or medical intervention will be administered, following consultation with staff;
- deciding, on receipt of a 'Parent/Carer Request for the Child's Self-administration of Medication/Medical Intervention (Template C), on a case by case basis, whether any medication will be carried by the child, will be self-administered by the child or any medical intervention will be self-administered by the child, following consultation with staff, if appropriate;
- ensuring that procedures are understood and implemented by all staff, volunteers and pupils.

### **1.3 Staff**

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

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

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

### **1.4 Parents/carers Responsibilities**

Parents/carers are required to:

- provide the school with sufficient and up to date information about their child's medical needs and to update it at the start of each school year or, if needs change, by completion of 'My Child's Medical Condition Parent/Carer Information' form (pg 15) or by meeting face to face for this information to be communicated to relevant staff;
- provide up to date contact information so that parents/carers or other nominated adults are contactable at all times;
- carry out any action they have agreed to as part of the implementation of an Individual Healthcare Plan (IHCP);
- provide any medication in its original packaging, with the pharmacy label stating the following:
  - a) the child's name
  - b) the child's date of birth
  - c) name of medicine
  - d) frequency / time medication administered
  - e) dosage and method of administration
  - f) special storage arrangements

- ensure that medicines or resources associated with delivery of a medical intervention have not passed the expiry date;
- collect and dispose of any medicines held in school at the end of each term or as agreed;
- store any equipment (provided by the family / medical professionals) required to carry out a medical intervention e.g. catheter tubes;
- collect and dispose of any equipment used to carry out a medical intervention e.g. sharps box.

## **2 PUPIL INFORMATION**

Parents/carers are required to give the following information about their child's medical condition and to update it at the start of each school year or sooner, if needs change, by completion of 'My Child's Medical Condition Parent/Carer Information' form (pg 15);

- A. Details of pupil's medical conditions and associated support needed at school
- B. Medicine(s), including any side effects
- C. Medical intervention(s)
- D. Special requirements e.g. dietary needs

## **3 MANAGING MEDICINES / MEDICAL INTERVENTIONS ON SCHOOL PREMISES**

### **3.1 Administration of Medicines / Medical Interventions**

Medicine / medical interventions will only be administered at school when it would be detrimental to pupil's health or attendance not to do so.

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

No medication / medical intervention will be administered without prior written permission from the parents/carers. 'Medical Permission Form - Parent/Carer Request and Agreement for School to Administer Medicines / Medical Interventions' (pg18)

The Head Teacher will decide whether and by whom any medication or medical intervention will be administered in school, following receipt of the above form and after consultation with staff. It may also be appropriate for training to be in place before this can be instigated.

No changes to administration method or dosage of medication or changes in procedures relating to medical interventions will be carried out without written authority from parents/carers and recorded amendment to the 'Medical Permission Form - Parent/Carer Request and Agreement for School to Administer Medicines / Medical Interventions' (pg18)

The Head Teacher will decide whether a child is able to carry and self-administer any medication or self-administer any medical intervention; following consultation with staff as appropriate following permission request

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

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

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

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

- A. Name of pupil
- B. Written instructions provided by the parents/carers or healthcare professional or as agreed in an Individual Healthcare Plan (IHCP)
- C. Prescribed dose, if appropriate
- D. Expiry date, if appropriate

Any member of staff, on each occasion, will make a written record of medication / medical interventions administered on the 'Record of Administration of Medicines / Medical Intervention to an Individual Child'

No child under 16 will be given medicine unless prescribed by a doctor, including those containing **aspirin**.

### **3.2 Child's Role in Managing their own Medical Needs**

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

Written permission from the parents/carers 'Medical Permission Form - Parent/Carer Request and Agreement for School to Administer Medicines / Medical Interventions' (pg18) will be required for pupils to self-administer medicine(s) / medical intervention(s).

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

### **3.3 Refusing Medication / Medical Intervention**

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

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

### **3.4 Storage of Medicines / Medical Intervention Equipment and Resources**

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

### **3.5 Records**

Records are only kept for the period of time a medical intervention or course of medicine is required. At the end of a medical intervention or course of medication, all records and forms

will be destroyed. Medlock Primary school is committed to ensure all of your information and data is protected therefore every effort is taken to only store current and relevant data about you and your family.

In the case of the 'Parent/Carer Information 'My Child's Medical Condition'' form, the form is only held in order to complete a Individual Health Care Plan (IHCP). On the completion and agreement of a IHCP, the 'Parent/Carer Information 'My Child's Medical Condition'' form is destroyed. The IHCP is then held for the period of time it is needed and shared appropriately with all relevant staff. It will also be shared with other relevant agencies and services, including NHS services and specialist staff from outreach services in Special Schools. Should a child move settings (both at the end of their primary education and move to high school, or mid year to another primary setting), the IHCP will be shared with the school to be attended as part of transition.

All 'Parent/Carer Request and Agreement for School to Administer Medicine(s) or Medical Intervention(s)' forms will be destroyed at the end of the course of medication or treatment. If copies are required by families they must be requested in advance of the end of the course of treatment so copies can be made before destruction.

### **3.6a Controlled drugs**

A child who is 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 to be communicated, when relevant, to all parties.

Where controlled drugs are not an individual child's responsibility, they will be kept in a non-portable locked cabinet in a secure (named) environment e.g. admin office, medical room. Only named staff, cited on the IHCP, will have access.

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

Where controlled drugs are not an individual child's responsibility, records will be kept of any doses used and the amount kept on the premises.

### **3.6b Non-controlled drugs and medical resources**

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

## **4. TRAINING**

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

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

Specialist training and advice will be provided by appropriate healthcare professionals, e.g. specialist epilepsy nurse, asthma training by school nurse etc, for staff involved in supporting

pupils with medical conditions including the administration of relevant medicines / medical interventions. Best practice models are to be used, ie Asthma training to be delivered 'whole staff', each academic year.

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

Training will be sufficient to ensure staff are competent and have confidence in their ability to support pupils with medical conditions. It will also fulfil the requirements set out in individual healthcare plans for the pupils they relate to. Induction training will raise awareness of school's policy and practice on supporting pupils with medical condition(s).

School will make every effort to ensure that specialist training will be completed as quickly as possible to ensure that the child is able to attend school safely.

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

## **5. INDIVIDUAL HEALTH CARE PLANS (IHCP)**

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

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

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

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

### **Intimate and Invasive Care**

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

Information about the types of training required for administration of medicines and medical interventions commonly found in schools is contained in Appendix 3 (Medicines and Medical Interventions).

## **6. OFF-SITE AND EXTENDED SCHOOL ACTIVITIES**

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

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

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

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

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

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

## **7. MANAGING EMERGENCIES AND EMERGENCY PROCEDURES**

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

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

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

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

## **8. CONFIDENTIALITY AND SHARING OF INFORMATION WITHIN SCHOOL**

Under the Data Protection Act 2018 we take the management and confidentiality of medical information seriously and our school data protection policy and privacy notices outline how we manage this type of information.

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

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

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

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

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

## **9. LIABILITY AND INDEMNITY**

School insurance policies provide liability cover relating to the administration of medicines. In the case of medical interventions, individual cover may be arranged for any specific healthcare procedures, including information about appropriate staff training and other defined requirements of the insurance policy. The school's insurance arrangements are as follows:

QBE Insurance through Manchester City Council

## **10. COMPLAINTS PROCEDURE**

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

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

See school complaints policy

## **11. UNACCEPTABLE PRACTICE**

The school considers that the **following constitute unacceptable practice**:

- requiring parent/carers or otherwise making them feel obliged to attend school to administer medicines / medical interventions or provide medical support to their child, including around toileting issues – no 2/carer should have to give up working because the school is failing to support their child's medical needs;
- preventing children from participating or creating unnecessary barriers to children participating in any aspect of school life, including trips, e.g. by requiring parents/carers to accompany the child.
- preventing children from easily accessing and administering their medicines as and where necessary;

- assuming that every child with the same condition requires the same treatment;
- ignoring the views of the child and/or their parents/carers (although this may be challenged);
- ignoring medical evidence or opinion (although this may be challenged);
- sending children with medical conditions home without reference to IHCP or agreed procedures;
- preventing children with medical conditions from staying at school for normal school activities, including lunch, unless this is specified in their IHCP;
- penalising children for their attendance record if their absences are related to their medical condition e.g. hospital appointments;
- preventing children from eating, drinking or taking toilet /other breaks whenever they need to in order to manage their medical condition effectively.

## **Medlock Primary School Notification Procedure**

### **Point of Notification**

- School receives notification of child's medical condition and needs from parent/carer, LA, healthcare professional or other school.
- Parents asked to complete (Parent/Carer Information about a Child's Medical Condition 'form (Template A).
- School notifies School Nursing Service if the child has not yet been brought to their attention.

### **Initial Meeting**

School Lead and parents/carers meet to discuss **Parent/Carer Information about a Child's Medical Condition'** form (Template A).

### **Formal Request**

- Parent/carer completes 'Parent/Carer Request and Agreement for School to Administer Medicines / Medical Interventions' form (Template B), if required
- Parent/carer completes 'Parent/Carer Request for the Child's Self- administration of Medication / Medical Intervention' form (Template C), if required.

### **Multi-Agency Meeting**

School co-ordinates a multi-agency meeting to include parents/carers, relevant healthcare professionals and any other professionals or agencies involved to identify pupil support needs and staff training needs.

### **Staffing**

- School consults with staff to plan for the administration of any medication or medical intervention.
- Appropriate training is provided for staff and recorded on '**Record of Staff Training'** form (Template E).

### **IHCP**

- School develops an **Individual Healthcare Plan (IHCP)**, if appropriate, with parents/carers,pupil,healthcare and other relevant professionals.
- IHCP agreed by parents/carers and the school.

## **Medicines and Medical Interventions**

Some of the medicines and medical interventions commonly managed within special and mainstream schools are detailed below.

## **Medicines**

<b>Medical Needs</b>	<b>Medicine</b>	<b>Training Requirements</b>
Adrenal Insufficiency	Hydrocortisone	
Diabetes Type 1	Insulin	Training by specialist nursing team required
Eczema	Topical corticosteroids Emollients (moisturising creams)	
Epilepsy (rescue medication in the event of a seizure)	Midazolam hydrochloride (Buccolam) Midazolam maleate (Epistatus)	Training by specialist nursing team required
Muscle spasm (Cerebral Palsy)	Baclofen	
Severe allergy / anaphylaxis	Adrenaline (EpiPen)	Training by specialist nursing team required

## **Medical Interventions**

<b>Situation</b>	<b>Medical Intervention</b>	<b>Training Requirements</b>
Blood-Glucose (Sugar) Level Monitoring	Testing procedure includes taking a small blood sample	Training by specialist nursing team required
Catheterisation	<ul style="list-style-type: none"> <li>• Clean Intermittent Catheterisation (CIC)</li> <li>• Self – Catheterisation (CIC)</li> <li>• Management of In-Dwelling Catheter</li> </ul>	Training by specialist nursing team required
Diabetes and Insulin management	<ul style="list-style-type: none"> <li>• Injection of insulin (insulin pen)</li> <li>• Dose management</li> </ul>	Training by specialist nursing team required
Gastrostomy / Nasogastric feeding (tube feeding into the stomach)	<ul style="list-style-type: none"> <li>• Bolus (Gravity) feeding procedure</li> <li>• Pump feeding procedure</li> <li>• Management of stoma site</li> </ul>	Training by specialist nursing team required
Hickman (Central) Line	Awareness raising, management and monitoring	Training by specialist nursing team required
Oxygen Therapy	Management of oxygen via cylinders	Training required by suppliers and specialist nursing team
Tracheostomy	<ul style="list-style-type: none"> <li>• Trache and equipment care and management</li> <li>• Suction</li> <li>• Changing / replacing trache tube</li> </ul>	Training by specialist nursing team required



## Parent/Carer Information 'My Child's Medical Condition'

To ensure the welfare of your child we are asking for additional personal and sensitive information so that we can ensure we safeguard them at all times. The information you provide on this form will be used to produce a care plan for your child's needs. This information is transferred to the 'Individual Health Care Plan' (IHCP); and this form is then destroyed. All information held by the school is covered by the school privacy notice, and this explains your rights with regards to the information held, and how to contact our Data Protection Officer.

<b>Date</b>	
<b>Child's Full Name</b>	
<b>Class</b>	

**Hospital / Clinic Consultant / Specialist Nurse / Community Health e.g. paediatrician, physiotherapist, occupational therapist**

**Please name all relevant practitioners**

<b>Name &amp; Position</b>	
<b>NHS service</b>	
<b>Contact number</b>	

<b>Name &amp; Position</b>	
<b>NHS service</b>	
<b>Contact number</b>	

### Child's Medical Information

<b>Diagnosis / Condition</b>	
<b>Regular Medicine - 1</b>	
<b>Time administered</b>	
<b>Side – effects</b>	
<b>Contraindications</b> (When should medicine never to used)	

<b>Does the child require this medicine to be administered regularly e.g. every day during the school day? Yes / No (please delete)</b>	
<b>Regular Medicine - 2</b>	
<b>Time administered</b>	
<b>Side – effects</b>	
<b>Contraindications</b> (When should medicine never to used)	
<b>Does the child require this medicine to be administered regularly e.g. every day during the school day? Yes / No (please delete)</b>	
<b>Regular Medicine - 3</b>	
<b>Time administered</b>	
<b>Side – effects</b>	
<b>Contraindications</b> (When should medicine never to used)	
<b>Does the child require this medicine to be administered regularly e.g. every day during the school day? Yes / No (please delete)</b>	
<b>Emergency Medicine</b>	
<b>Time administered</b>	
<b>Side – effects</b>	
<b>Contraindications</b> (When should medicine never to used)	
<b>Might the child require this medicine to be administered during the school day? Yes / No (please delete)</b>	

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

<b>Name of intervention</b>	
<b>Time administered</b>	
<b>Equipment used</b>	
<b>Does the child require a medical intervention to be administered regularly e.g. every day during the school day? Yes / No (please circle)</b>	

**Mobility – movement and walking**

<b>Walking aids used</b>	
<b>Physiotherapy needs / programmes</b>	

**Personal Care**

<b>Dressing Needs / Support</b>	
<b>Feeding Needs Support (Food &amp; Drink)</b>	
<b>Toileting Needs / Support</b>	

**To be completed Prior to meeting with School's Inclusion Team. All information on this form needs to up to date and accurate in order as it may be used to create a IHCP.**

**Confirmation**

**I confirm all information is accurate.**

**Signed**

**Parent Name (please print)**

**Date**

## Medlock Primary School

### Parent/Carer Request and Agreement for School to Administer Medicine(s) or Medical Intervention(s)

The school will not give your child medicine or carry out a medical intervention unless you complete this form. By signing this form you are consenting to staff administering medicine, supervise your child when they take their medicine or carry out the medical interventions. You are also consenting for the information on this form to be shared with all school staff to support your child receive their medication safely.

On completion of the course of medicine, this form will be destroyed.

<b>Child's Full Name</b>	
<b>Class</b>	
<b>Date</b>	
<b>Medical Condition</b>	

<b>Name of Medicine</b>	
<b>Dosage</b>	
<b>Method of administration</b>	
<b>Timing(s) - When should it be administered?</b>	
<b>Side-effects</b>	
<b>Contraindications</b> (When should medicine never to used)	
<b>Self-administration Yes / No (please delete)</b>	

I give permission for school / my child (delete as appropriate) to administer the medicines above

**Signature**

**Parent/ Carer's Full Name (Please print)**

\_\_\_\_\_  
**Date**

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

<b>Name of intervention</b>	
<b>Time administered</b>	
<b>Equipment used</b>	
<b>Self-administration Yes / No (please delete)</b>	

I give permission for school / my child (delete as appropriate) to administer the procedure(s) above

Parent/ Carer's Full Name (Please print)

Signature \_\_\_\_\_

Date \_\_\_\_\_



**Procedure for Contacting Emergencies Services Requesting an Ambulance  
Dial 999.**

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

You will be asked for three key pieces of information:

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

1. School's telephone number is **273 1830**

2. School Name **Medlock Primary School**

School Address **Wadeson Road, Brunswick, Manchester**

School Postcode for SAT NAV **M13 9UJ**

Best entrance to the school site **Wadeson Road**

**Exact location of the patient within the school**

**STATE THAT THE AMBULANCE WILL BE MET BY A MEMBER OF STAFF WHO WILL TAKE THE  
CREW TO THE PATIENT - Allocate staff to do this.**

3. **Name of Child**

**Age of Child**

**Description of Child's Symptoms**

**Inform if underlying Medical Condition**

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

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

**On Arrival of the Ambulance**

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

**Medlock Primary School**  
**Parent/Carer Request and Agreement for School to Administer**  
**Medicine(s) or Medical Intervention(s)**

The school will not give your child medicine or carry out a medical intervention unless you complete this form. By signing this form you are consenting to staff administering medicine, supervise your child when they take their medicine or carry out the medical interventions. You are also consenting for the information on this form to be shared with all school staff to support your child receiving their medication safely.

On completion of the course of medicine, this form will be destroyed.

<b>Child's Full Name</b>	
<b>Class</b>	
<b>Date</b>	
<b>Medical Condition</b>	

<b>Name of Medicine</b>	
<b>Dosage</b>	
<b>Method of administration</b>	
<b>Timing(s) - When should it be administered?</b>	
<b>Side-effects</b>	
<b>Contraindications</b> (When should medicine never to used)	
<b>Self-administration Yes / No (please delete)</b>	

**I give permission for school / my child (delete as appropriate) to administer the medicines above**

**Signature**

**Parent/ Carer's Full Name (Please print)**

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