



The Horsell Village School

First Aid and Supporting Children with Medical Conditions Policy

School Name: The Horsell Village School

Date: Spring Term 2025

Review Date: Spring Term 2027

Date originally shared with LGC: Spring 2025

Date originally shared with staff: Spring 2025

Contents

1. Policy aims are:	3
2. Legislation and Statutory Responsibilities	3
3. Roles and Responsibilities	4
Servery Team Responsibility	5
4. Equal Opportunities	6
5. Being notified that a child has a medical condition (Appendix 1)	6
6. Individual Healthcare Plans (IHPs) (Appendix 2)	6
7. Managing and administering medicines.....	7
8. Storage	9
9. Controlled drugs	9
10. Pupils managing their own needs	9
11. Unacceptable practice	9
12. First Aid	10
13. Records and reporting	10
14. Injuries.....	11
15. Risk assessments (Appendix 3)	11
16. Emergency Procedures	11
17. Training.....	12
18. Hygiene and infection control.....	12
19. Confidentiality	12
20. Liability and indemnity.....	12
21. Complaints	13
22. Monitoring Arrangements	13
23. Links to other policies	13
Appendix 1 -Being notified that a child has a medical condition	14
Appendix 2 – Individual Health Care Plan.....	15
Appendix 3- Risk Assessment Template	21
Appendix 4-Special Diets Request Form.....	22
Appendix 5 Parental / carer agreement for setting to administer medicine	24

1. Policy aims are:

- To support pupils with medical conditions, so that they have full access to education, including physical education and educational visits.
- To ensure that school staff involved in the care of children with medical needs are fully informed and adequately trained by a professional in order to administer support of prescribed medication.
- To ensure the safe inclusion for children in school with medical conditions including allergies and where necessary to help to support attendance.
- To write, in association with healthcare professionals when required, Individual Health Care plans and / or individual risk assessments where necessary.
- To ensure that medicines given at school are stored and administered safely.
- To keep, monitor and review appropriate records.

We aim to support the rights of the child with medical conditions including allergic reaction, these include;

- To be educated in a safe and healthy environment, with as few irritants as possible in school.
- Not to be stigmatised as a result of their condition.
- To be able to participate in all school activities to the same extent as their peers, where possible.
- To have access to medication and where possible other measures to relieve symptoms.
- To have access to trained personnel who are able to treat acute reactions.
- To have their education adapted to their condition if necessary (e.g. Physical Education).

Where children are unwell and not fit to be in school, or when they are suffering from an infection which may be passed onto others, children should remain at home. Even if symptoms have improved children may not return to school for at least 48 hours following vomiting and / or diarrhoea.

The Horsell Village School is committed to encouraging children to return to school as soon as possible after an illness, subject to the health and safety of the school community. This policy sets out care and support to be provided in school during opening hours.

2. Legislation and Statutory Responsibilities

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education (DfE)'s statutory guidance on [supporting pupils with medical conditions at school](#).

The Horsell Village School provides full access to the curriculum for every child wherever possible. We believe that pupils with medical needs have equal entitlement and must receive necessary care and support so that they can take advantage of this. However, we also recognise that employees have rights in relation to supporting pupils with medical needs, as follows:

Employees may:

- Receive appropriate training.
- Work to clear guidelines.
- Bring to the attention of Senior Leadership any concern or matter relating to the support of pupils with medical conditions.

3. Roles and Responsibilities

The Local Governing Committee (LGC)

The Local Governing Committee has ultimate responsibility to make arrangements to support pupils with medical conditions. The LGC will ensure that all staff have received suitable training and are competent before they are responsible for supporting children with medical conditions and for the giving of First Aid when necessary.

The Headteacher

The Headteacher will:

- Make sure all staff are aware of this policy and understand their role in its implementation.
- Ensure there is a sufficient number of trained staff available to implement this policy and deliver against all Individual Healthcare Plans (IHPs), including contingency and emergency situations.
- Take overall responsibility for the development and periodic reviews of IHP's with parent / carers, the child and medical professionals.
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way.
- Ensure that all staff who need to know are aware of a child's condition.
- Contact the school nursing service in case of any pupil who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse team.
- Ensure transition arrangements between schools are carried out ensuring full disclosure of relevant medical information / IHPs and risk assessments to ensure the child's receiving school have time to adequately prepare.
- Ensure systems are in place for obtaining information about a child's medical needs and that this information is kept up to date.
- Ensure all staff implement procedures in relation to this policy correctly.

Staff

Supporting pupils with medical conditions or treating a child with First Aid during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions or give first aid should it be necessary, but all staff have the right to choose not to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions and children with IHP's will receive sufficient and suitable training and will achieve the necessary level of competency before doing so. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions will:

- Ensure all parties understand their roles and responsibilities in administering medicines and first aid.
- Receive sufficient and suitable training and will achieve the necessary level of competency before doing so.
- Ensure medicines are stored and administered safely.
- With the Headteacher, write and monitor Individual Healthcare Plans (IHP) and/or Individual Risk Assessments (IRA) and reviewed annually or as changes are required and will include the views and wishes of the child and parent in addition to the advice of relevant medical professionals.
- Liaise as necessary with healthcare professionals and services in order to access the most up-to-date advice about a pupil's medical needs and will seek support and training in the interests of the pupil.

Teachers will take into account the needs of pupils with medical conditions they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with medical conditions or a child that requires first aid, needs help.

Office Staff- Front of House

The office staff hold the responsibility for looking after first aid equipment e.g. restocking first aid supplies, including those for trips, the first aid cupboard and ensuring appropriate records are kept and procedures followed, informing a member of the senior leadership team of any accidents that may need further investigation and calling an ambulance if required.

Servery Team Responsibility

The servery team will be made aware of all children with medical conditions and special diet/allergy and a copy of special diet request form is given to them once it has been received from parent.

On receipt of this form, the Servery Team is responsible for:

- Following all procedures as laid out by Surrey Commercial Services, using Special Diet Flow Chart Procedure, produced by Strictly Education4S.
- Sending a copy of the Special Diet Request Form to Surrey Commercial Services (copy kept in school office). *Lunch cannot be provided unless this is completed.*
- Maintaining a list of children with medical conditions and allergies /special diets in servery as easy reference guide.
- Photo displayed of child, in the servery.
- The servery serves each child their lunch taking a token identifying their allergy first.

N.B. Child with medical conditions and special diet/allergy is identified to staff in the servery and dining room by the adult accompanying them to the dining room on the first day. Then by token thereafter.

Parent / Carers will

- Provide the school with sufficient and up-to-date information about their child's medical needs.
- Be involved in the development and review of their child's IHP and may be involved in its drafting.
- Provide the school with appropriately prescribed medication, where the dosage information and regime are clearly printed by a pharmacy on the container.
- Complete a guardian agreement for The Horsell Village School to administer medication that is prescribed by a doctor.
- Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are always contactable.

Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

School nurses and other healthcare professionals

Our school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible. They may also support staff to implement a child's IHP.

Healthcare professionals, such as GPs and pediatricians, will liaise with the school's nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

4. Equal Opportunities

The Horsell Village School is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities. Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

5. Being notified that a child has a medical condition (Appendix 1)

When the school is notified that a pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an IHP. See flow chart in appendix 1.

The school will make every effort to ensure that arrangements are put into place within 1 week, or by the beginning of the relevant term for pupils who are new to our school.

Children with medical conditions which may require emergency attention e.g. diabetes, epilepsy, anaphylaxis, will have their names and IHPs clearly accessible in the classroom and all adults dealing with the child have their attention drawn to this information. All other medical conditions will be noted on a pupil's SIMs record, in their file and be provided to teachers annually or when there is an update. All individual medical forms are kept in the school office.

Any visitors working within a classroom will be informed of any medical needs within the class of children they are working with, and Inclusion Leaders will send termly reminders to all staff of children with medical conditions.

6. Individual Healthcare Plans (IHPs) (Appendix 2)

The Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions.

- Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed or on the request of a parent.
- Plans will be developed with the pupil's best interests in mind and will set out:
 - What needs to be done
 - When
 - By whom
- Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the Headteacher will make the final decision.
- Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as a school nurse, specialist or paediatrician, who can best advise on the pupil's specific needs.
- The pupil will be involved wherever appropriate.
- IHPs will be linked to, or become part of, any Education, Health and Care (EHC) Plan. If a pupil has SEND but does not have an EHC plan, the SEND will be mentioned in the IHP.

- The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed.
- The Headteacher will consider the following when deciding what information to record on IHPs:
 - The medical condition, its triggers, signs, symptoms and treatments
 - The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons
 - Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
 - The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
 - Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
 - Who in the school needs to be aware of the pupil's condition and the support required
 - Arrangements for written permission from parents and the Headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours
 - Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments
 - Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition
 - What to do in an emergency, including who to contact, and contingency arrangements

7. Managing and administering medicines

Administering

- Only essential prescribed medicines will be administered during the school day.
- Where medicine is required to be taken three times a day or less, the school encourages, before, after school and bedtime. If a child is attending afterschool clubs or medicine needs to be taken with food, it can be administered during the school day.
- Parents must submit a written medical permission slip (Appendix 5) providing consent before any medicine is administered.
- Medicines to be given during the school day must be in their original container.
- The school will not enter into any agreement to administer nonprescription medicines on a regular basis unless this forms part of a pupils Individual Healthcare Plan.
- Pupils will not be given medicine containing aspirin unless prescribed by a doctor.
- The school will only accept prescribed medicines that are:
 - In-date.
 - Labelled including the child's name and date of birth.
 - Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage.
- Before administering any medicine, staff must check that the medicine belongs to the child, must check that the dosage they are giving is correct, and that written permission has been given.

- Any child refusing to take medicine in school will not be made to do so, and parents will be made aware as soon as possible.
- Medicines will be dispensed in accordance with instructions and agreed time.
- All doses administered will be recorded in the Administration of Medicines book (located in the school reception office).
- The school do not stock and therefore will not provide any medicine, lotion or cream that has not been provided by a parent.

Inhalers

- Inhalers are kept in the school office.
- Children have access to these inhalers at all times and will be accompanied by an adult during administration.
- All inhalers are marked with the child's name.
- All children with an inhaler must take them on educational visits, however short in duration, records are kept when they are administered. This is the responsibility of the class teacher.
- The school own their own inhaler. This can be used if a child whose prescribed one is not available.

Auto Injector Pens

- IHP's are created for all children with Auto Injector Pens.
- Auto Injector pens are stored at the school office and in the first aid cupboard at the canteen.
- Parents / carers with a child who has a food allergy will complete a special dietary request form (Appendix 4). This will be shared with the catering team, Twelve15
- Any member of staff can administer an Auto Injector pen in an emergency.
- All staff will have received training.
- A pupil's IHP should be followed in all circumstances.
- Cetirizine or a prescribed antihistamine may be given when a symptom occurs following ingestion of possible irritants for allergy sufferers. This will be stored at the school office and in the first aid cupboard at the canteen.
- The child's one page care plan will also be carried with the auto injector pen.
- If symptoms are more severe, the auto injector pen should be given immediately and ambulance called. The pen (cap off) should be pushed against the child's thigh, through clothing if necessary. The pen should be held for the amount of seconds stipulated on the instructions before being withdrawn. A second auto injector pen must be obtained from the school office and applied following the first, if symptoms are not improving.
- Ambulances must be called for a child who has required an auto-injector pen.
- Parents should be contacted after this call has been made.
- All children requiring auto injector pens must have two in school.
- If attending a club, Leaders of the club will collect each child's named medicine pack and return to the school office once the club has finished.
- The school own their own auto injector pens and inhalers. These can be used if children who have a prescribed one are not available. They are not to be used by any other child unless instructed by a paramedic on suspicion of Anaphylaxis.

Other medicines/ products

- Suntan lotion should be applied before and after school.
- All lotions (such as eczema creams) should be marked with the child's name and class and a IHP created for them. Children will self-administer creams.

8. Storage

- All medicines will be stored safely and clearly named.
- Pupils and staff will be informed about where their medicines are at all times and be able to access them immediately.
- Medicines needing refrigeration will be stored in the fridge located in the school office.
- Controlled drugs or prescribed medicines will be kept in a cabinet/ fridge in the main office.
- Access to these medicines is restricted to staff members only.
- Auto Injector Pens are kept in a cupboard in the main office and the first aid cupboard by the canteen. These are clearly named and with photo ID on the box/bag.
- In the case of auto injector pens, all staff have access to the cupboard which is clearly labelled and accessible.
- Medicines will be returned to parents to arrange for safe disposal when no longer required. In all circumstance, medicines should be taken to and collected from the office by a responsible adult. All medicines including inhalers, will be returned to the parents at the end of the academic year with instructions to bring in new medicines, for the start of the new academic year in the autumn term.
- It is parents' responsibility to be aware of the expiry date and arrange replacements when required. As a backup, expiry dates are monitored by the office termly and parents contacted to replace when necessary.

9. Controlled drugs

- Controlled drugs are prescription medicines that are controlled under the Misuse of Drugs Regulations 2001 and subsequent amendments, such as morphine or methadone.
- All controlled drugs prescribed to a child must be kept in a secure cupboard in the school office and only named staff have access.
- Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

10. Pupils managing their own needs

- Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures.
- This will be discussed with parents, and it will be reflected in their IHPs.
- Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered, if required.

11. Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable to:

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every pupil with the same condition requires the same treatment
- Ignore the views of the pupil or their parents or any medical evidence (although this may be challenged)
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- Penalise pupils 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
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child.
- Administer, or ask pupils to administer, medicine in school toilets

12. First Aid

- First aid will be provided in cases where a person needs help
- All staff will provide immediate first aid to anyone in need and alert another adult to assist when required. This alert can be sending another sensible child or adult to the office, using the red assistance card, using a walkie-talkie/ classroom phone or mobile if on an educational visit, or by simply shouting for aid particularly when in the playground.
- All staff, pupils and visitors to The Horsell Village School are entitled to attention if they suffer injury or fall ill whilst in the school environment. It is important that casualties receive immediate attention and that assistance is sought, calling for an ambulance when necessary.
- First aid does not extend to giving medical treatment or medications such as pain relief.
- Non urgent/ less serious conditions can be treated in class or on the playground during the school day with use of first aid equipment in a school first aid bag. All head injuries will be treated at the school office.
- Urgent or more serious conditions should be sent to the office if appropriate or Paediatric first aid trained staff called for help whilst staff begin immediate first aid.

13. Records and reporting

The Horsell Village School has an area where first aid resources and equipment are stored.

The records of first aid treatment are also kept in this area and detail name, date, time, detail of the injury, the treatment given and a signature of the person providing first aid.

Major injuries (fractures, amputations, dislocations, loss of sight etc...) must be reported to the Health and Safety Executive under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1985 RIDDOR.

In respect of pupils, the "trigger" requiring reporting to the Health and Safety Executive:

- The person was taken from site of the accident to hospital and
- The incident arose out of or was in connection with work, for example:
 - Work organisation or lack of supervision
 - Defective equipment
 - Use of substances
 - Defective condition of premises

Children's medical details including current IHP and IRA will be passed on to new schools along with personnel files as part of transition.

- The Local Governing Committee will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school.
- Parents will be informed if their child has been unwell at school.
- IHPs are kept in a readily accessible place which all staff are aware of.
- Children with serious medical conditions will have their photo and brief description of condition, along with any other necessary information detailed in their risk assessment or healthcare plan.
- Children with medical conditions which may require emergency attention, e.g. epilepsy, diabetes, will have their names and an Individual Healthcare Plan and/or risk assessment accessible in their classroom, and all adults dealing with the child will have their attention drawn to this information.

- All other medical conditions will be noted from children's SIMs records and this information will be provided to class teachers annually.

14. Injuries

Every care is taken to ensure that injuries are not missed.

- If a child sustains a knock to the head or receives a more severe injury and is not hospitalised, every effort will be made to contact the parent/carer or other emergency contact as recorded in the child's records.
- A mutual decision will be made as to whether the pupil will remain in school or is to be collected.
- For lesser injuries where a pupil is able and willing to continue to remain at school parents will simply be informed.
- For all head injuries parents are informed on the day of the injury.
- Children attending after school care club leaders are informed.
- Minor cuts and bruises are not generally reported to parents, but the incident is still recorded and can be recalled if an enquiry is made.

15. Risk assessments (Appendix 3)

- Parent / carers should contact the school, informing them immediately of a broken limb so that a risk assessment can be put into place before the child returns to school. The school may ask a parent to keep their child at home until this provision is made.
- A child/ member of staff who arrives in school having sustained an injury e.g. arm in a sling, broken finger or leg in plaster, will require an Individual Risk Assessment (IRA) see appendix 3.
- An IRA must be completed by the Headteacher or Deputy Headteacher with the parent.
- The risk assessment will detail the agreed adaptations to the school day enabling the child to take part fully but safely in all activities where possible and be signed by parent and staff member, then reviewed as changes occur.
- IRAs are shared with staff members who work with the child/ staff member.
- All staff working in school are kept informed of any child's special medical needs. This information is circulated as a medical risk assessment and details, including special arrangements or evacuation procedures, are specified. If necessary, a Personal Emergency Evacuation Plan (PEEP) is completed.

16. Emergency Procedures

- Staff will follow the school's normal emergency procedures (for example, calling 999).
- All pupils' IHPs will clearly set out what constitutes an emergency and will explain what to do.
- If an ambulance needs to be called, staff will outline the full condition and how it occurred and give details regarding the child's date of birth, address, parents' names and any known medical conditions.
- If a pupil needs to be taken to hospital, 2 staff members will stay with the pupil until the parent/carer arrives or accompany the pupil to hospital by ambulance.
- In a medical emergency, all teachers and support staff have been appropriately trained to administer emergency first aid if necessary. If possible, one of the school's Paediatric First Aiders, will be asked to attend.
- The school has two defibrillators - one located by the canteen, and one located on the external wall at the front of the school building (Entrance).

17. Training

- Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.
- The training will be identified during the development or review of IHPs.
- Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.
- The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Headteacher.
- Training will be kept up to date.
- Training will:
 - be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
 - fulfil the requirements in the IHPs
 - help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures
 - include healthcare professionals providing confirmation of the proficiency of staff in a medical procedure, or in providing medication.
 - ensure all staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.
 - include all staff completing a First Aid Awareness certificate and renewing auto injector pen training every three years.
- All staff are expected to complete First Aid Awareness and auto injector pen training.
- Staff newly appointed will undergo basic training within the first three months of employment if they do not hold a valid certificate. Training is repeated every three years for all staff.
- Five members of staff have completed Paediatric first aid training.

18. Hygiene and infection control

- All persons giving first aid or administering medicines at school will take precautions to avoid infection.
- Hands must be washed before and after giving first aid.
- Single use disposable gloves must be used and care taken when dealing with blood and any other body fluids.
- Plastic aprons are also available should they be required.

19. Confidentiality

- All staff will treat medical information confidentially.
- The Headteacher will agree with the parent who should and will have access to a child's records and other information about the child.
- Where a condition could lead to fatality it is recommended that all staff are informed. If information is withheld on the instruction of a parent/carer, staff will not be held responsible if they act incorrectly whilst providing medical assistance but are otherwise acting in good faith.

20. Liability and indemnity

The Local Governing Committee will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk. The details of the school's insurance policy can be found with the School Business Manager. The school ensure that they are a member of the Department for Education's risk protection arrangement (RPA).

21. Complaints

Parents / carers with a complaint about their child's medical condition should discuss these directly with the Headteacher in the first instance. If this person cannot resolve the matter, they will direct parents to the school's complaints procedure.

22. Monitoring Arrangements

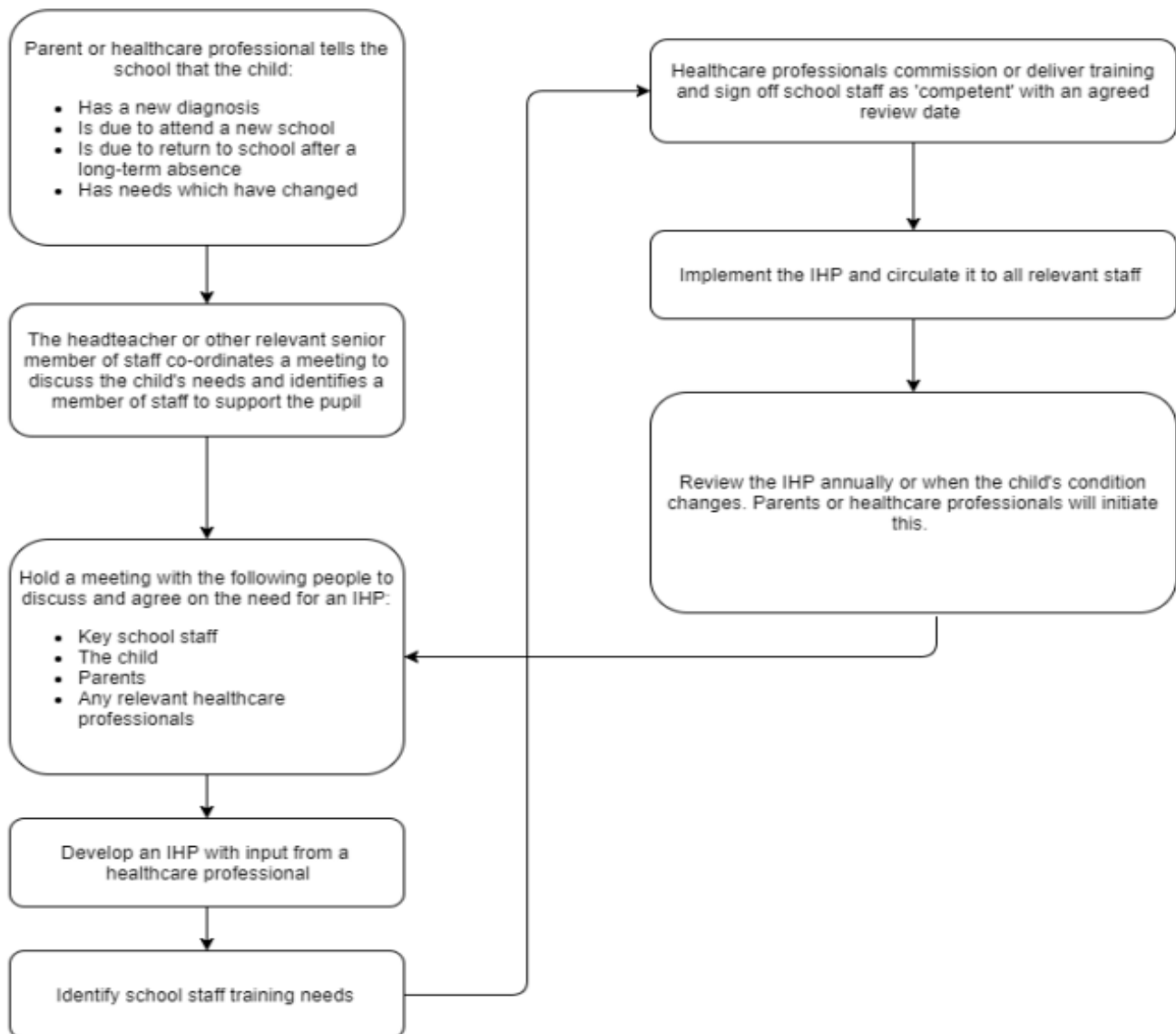
This policy will be reviewed and approved by the Local Governing Committee every 2 years.

23. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- Health and safety
- Safeguarding
- Special Educational Needs Policy
- Intimate Care Policy

Appendix 1 -Being notified that a child has a medical condition



Appendix 2 – Individual Health Care Plan

The Horsell Village School Individual Healthcare Plan

Child / Young Person Information



Personal Details

Child's Name	
Date of Birth	
Year Group & Class	
Child's Address Town Postcode	
Medical Diagnosis or condition Give a brief description of the medical condition (s), including description of signs, symptoms, triggers and behaviours	
Allergies	
Date of IHP	
Review Date	

Family Contact Information

Name	
Relationship	
Home phone number	
Mobile number	
Work number	
Email	

Name	
Relationship	
Home phone number	
Mobile number	

Work number	
Email	

Name	
Relationship	
Home phone number	
Mobile number	
Work number	
Email	

Professionals

	Name	Contact Details
GP		
Consultant Paediatrician		
Specialist Nurse		
Class Teacher		
Other relevant teaching staff		
Other relevant non-teaching staff		
Health visitor / school nurse		
SEND Co-ordinator		
Headteacher		
Person with overall responsibility for implementing Individual Healthcare plan		
Any provider of alternative provision		

This child / young person has the following medical condition (s)

requiring the following treatment

Medical condition	Drug	Dose	When	How is it administered?

Potential side effects:

Is there any ongoing treatment that is not being administered in school?
What are the potential side effects of this treatment?

Any medication will be stored:

Medical Needs

Symptoms	
Triggers & signs of triggers	
Treatments What action must be taken?	
Are there any follow up actions (e.g. tests or rest) that are required?	
Specialist equipment Name and how it is to be used	
Environmental Issues	

Daily Care Requirements	
Specific support for pupils educational, social and emotional needs	
Is the children / young person likely to need time off because of their conditions? Process for missed work?	

Emergency Situations

An emergency occurs whenever a child / young person needs urgent treatment to deal with their condition

What is considered an emergency?	
What are the symptoms?	
What are the triggers	
What action must be taken?	
Are there any follow up actions (e.g.; test / rest) that are required?	

Routine monitoring

Some medical conditions will require monitoring to help manage the child / young person's condition

What monitoring is required?	
When does it need to be done?	

Does it need any equipment?	
How is it done?	
Is there a target? If so, what is the target?	

School Environment

Can and how does the school environment affect the child's medical condition?	
What changes can the school make to deal with these issues?	
Location of school medical area	

Physical Activity

Are there any physical restrictions caused by the medical condition (s)?	
Is any extra care needed for physical activity?	
Actions before exercise	
Actions during exercise	
Actions after exercise	

Trips and activities away from school

What care needs to be in place?	
When does it need to take place?	
If needed, is there somewhere for the care to take place?	

Who will look after medicine / equipment?	
Who outside of the school needs to be informed?	
Who will take overall responsibility for the child / young person on the trip?	

Staff Training

What training is required?	
Who needs to be trained?	
Has the training been completed Signed & dated by all staff that have completed the training?	

Plan Development

	Name	Signatures	Date
Child / Young Person			
Parents / carers			
Healthcare Professional			
School representative			
School Nurse			
Other			

Copies of IHP given to:

Name	Signatures	Date

Appendix 3- Risk Assessment Template

Date			
Context			
Risk Area			
Assessment Performed by:		<u>Hazards are:</u> Major- death or disabling injury Serious- Medical Attention Slight -	<u>Likelihood</u> High – it will happen Medium- Happens often Low- very unlikely

Some potential hazards in this Risk Area	Estimated Risk Level			Some useful Controls in this risk Area	Action Dated
	High	Med	Low		

People at risk	Pupils (X)	Staff (X)	Parents (X)	Parent helpers (X)	Visitors (X)	Contractors (X)
Employees informed of risk assessment via all of the following means: discussion and paper copy shared.			Paper copies shared with parents and class teacher(s)			
Employees to report newly identified hazards via: In person to the Headteacher						
Date:			Signed: staff			
Date:			Signed: Parent			

Appendix 4-Special Diets Request Form

Childs Name		Year Group & Class		
Please specify type of diet requested				
Medical	Religious	Ethical		
Please add specific details, identifying foods that the child is not able to eat				
Please give details of any medication prescribed if an allergy is indicated above				
Emergency Situations				
What is considered an emergency?				
What are the symptoms?				
What are the triggers?				
What action must be taken?				
Are there any follow up actions (e.g.; test / rest) that are required?				
Medical condition	Drug	Dose	When	How is it administered?
Potential side effects:				
What are the potential side effects of this treatment?				
Any medication will be stored:				

Terms & Conditions

- Please be aware that there is always a risk that traces of allergens may be transferred to items from the menu during processing, storage or preparation in the kitchens. For this reason, Surrey Commercial Services is unable to guarantee that any item on any of the menus is free from trace allergens.
- It is the responsibility of the parent/carer to inform the school in writing of any changes to the pupil's allergy/intolerance.
- Surrey Commercial Services reserves the right to decline a request to provide a special diet if it considers that the medical risk is too great or insufficient evidence/support has been provided. Updated April 2019
- Whilst every effort will be made to meet the requirements identified on this form no liability can be accepted.

GDPR Statement for Special Diet Request Form

- Special Diets is an area of school meals provision where personal data of pupils is provided before any special diet can be safely served. This information can include the pupil's name, name of school, name of class, parent name, medical information and photograph of the child. This information is given willingly and with consent from the parent / guardian. Personal data is not stored by any member of Surrey Commercial Services central team or by Catering Services at Strictly Education 4s but held locally at the school for operational reasons.
- Please be assured all information is held in accordance with data security and data retention policies and most importantly is held with the sole purpose of attending to pupils dietary needs to ensure the health and safety of the children and young adults to whom meals are served.
- Pupil photographs on kitchen walls: Photographs are not displayed in public view; they are provided with consent from the parents and placed in a discreet place behind the counter so only visible to catering staff.
- Pupil photographs in folders: Photographs may also be stored in folders within the kitchen or catering office. These are stored in a secure manner and only available to the catering staff.
- Allergy information including special diet request form and medical notes: All special diet pupils should have a special diet request form, along with any medical correspondence, submitted before a special diet can be served. This information is provided with consent from the parent and stored in a secure folder within the kitchen or catering office and school office.
- Retention of Personal Data The data referred to will be retained only for the purposes of providing a special diet and will be confidentially disposed of when no longer required for this purpose.

I confirm that I have read and understood the above:

	Print Name	Signature	Date
Parent / carer			
School representative			
Catering representative			

Whilst every effort will be made to meet the requirements identified on this form no liability can be accepted

Appendix 5 Parental / carer agreement for setting to administer medicine

The Horsell Village School will not give your child medicine unless you complete and sign this form. Medicine administered will be done so in line with the schools 'First Aid and Supporting medical conditions Policy'	
Name	
Date of Birth	
Class & Year Group	
Medical condition or Illness	

Medicine	
Name / type of medicine (Must be presented in prescribed box / containing with prescription label clearly identifiable)	
Expiry Date	
Dosage and Method	
Timing	
Special precautions / other instructions	
Are there any side effects that the school needs to know about	
Self-administration	Yes No
Procedures to take in an emergency	
Medicines must be in the original container as dispensed by the pharmacy	

Contact Details	
Name	
Contact number	
Relationship to child	
Medicine must be given directly to the school office and not brought into school by a child	
The above information is, to the best of my knowledge, accurate at the time of writing. I give consent to staff administering medicine in accordance with the school's Managing children with medical conditions and First Aid policy. I will inform the school immediately in writing if there is any change in dosage or frequency or if the medicine is stopped.	
Signed	
Date	

