

Healthcare Needs Policy



King Henry VIII 3-19 School Ysgol 3-19 Brenin Harri'r VIII

We believe in the limitless capacity for everyone to achieve great things.

Effective from: July 2024

Approved by Governors: July 2024

Reviewed by Governors: July 2026

Next Review Due: October 2026

Contents	Page Number
Aims	3
Roles and responsibilities	3
Accessibility	6
Information sharing	6
Record keeping	7
Storage, access and administration	7
Emergency arrangements	7
Training	8
Qualifications and assessments	8
EOTAS and Integration	9
Monitoring and review	9
Complaints	9
Unacceptable practice	9
Appendix 1: Healthcare Protocol	10
Appendix 2: Contacting Emergency Services	15
Appendix 3: Consent for Prescribed Medication	16
Appendix 4: Individual Healthcare Plans	20
Appendix 5: Staff Training Record Template	30
Appendix 6: Record of Administration of Medication	31
Appendix 7: Storage of Medication Check List	32

Aims

King Henry VIII 3-19 School is committed to ensuring that all our pupils, including those with healthcare needs, are fully supported in accordance with our legal responsibilities and statutory duties. A cooperative and proactive approach to providing effective and individual support is therefore promoted.

King Henry VIII 3-19 School has arrangements in place that clearly focus upon meeting the needs of pupils with healthcare needs, considering how those needs impact upon their education, attainment and well-being. The school is committed to ensuring all arrangements properly support pupils and minimise disruption to their learning. Arrangements also consider wider safeguarding duties, while seeking to ensure all pupils can access and enjoy the same opportunities. Wherever possible, the school is committed to supporting the pupil in building their understanding and confidence so that they can increasingly self-manage their healthcare needs, dependent upon their ability to do so.

This policy links directly to Local Authority and Welsh Government healthcare guidance and King Henry VIII 3-19 School First Aid Protocol for Staff (Appendix 1).

Roles and responsibilities

Pupil Healthcare Leader

- Ensure the implementation and maintenance of the Welsh Government *Supporting Students with Healthcare Needs* policy.
- Provide day-to-day first aid support and administer prescribed medicines.
- Record the administration of medicines using the Administration of Medication Spreadsheet.
- Check medicines are stored appropriately, expiry dates recorded and regularly checked.
- Update pupil medical information and notes upon the whole school data management system (SIMS), sharing appropriate information with staff via ClassCharts and individual pupil folders on Microsoft TEAMS
- Update the CPU with up-to-date medical information relating to a child as necessary.
- Ensure Individual Healthcare Plans are in place for pupils who require them, and that they are regularly reviewed and updated.
- Track, monitor and share Individual Healthcare Plans and associated documentation, alongside completion of accident forms as required.
- Provide staff, including catering staff, with relevant healthcare information and updates related to allergies.
- Add Food allergy and intolerance information to IMPACT.
- Liaise with parents, carers and external professionals to develop and review Individual Healthcare Plans, health-based risk assessments and allergy plans.
- Liaise with and be the school link for external vaccination programmes/teams, setting up schedules for vaccination days and supporting their running.
- Organise healthcare training and keep a record of staff who attend, ensuring that the school is able to meet the identified healthcare needs of pupils.

- Support the SRB Lead in organising any specialist training that is required for SRB staff who support pupils with more complex medical needs.
- Provide support to meet the personal care needs of individuals with disabilities in-line with the Equality Act 2010.
- Liaise with the Site and Safety Manager (or their Line Manager if absent) when completing risk assessments, accessibility and evacuation plans linked to pupil's healthcare needs.
- Ensure all First Aid kits for use on trips and within the school are fully resourced.
- Ensure all Accident forms are viewed and signed by the Deputy Headteacher, a hard copy provided to the Site and Safety Manager and sent to the Local Authority.
- Record all accidents using the School Accident Spreadsheet.
- Support pupils with healthcare needs in overcoming the barriers presented to attendance, engagement and progress in learning.

The Headteacher and Governing Body

- Comply with statutory duties by having strategic oversight of the development and implementation of medical arrangements within the school.
- Ensure that The Healthcare Policy and associated protocols are supported by clear communication with staff, parents/carers and other key stakeholders to ensure full implementation.
- Ensure that the School Healthcare Policy is reviewed at least annually.
- Ensure clear understanding of healthcare roles and responsibilities.
- Promote the wellbeing of pupils and staff and support them by upholding their rights.
- Ensure Individual Healthcare Plans are developed, monitored and reviewed in accordance with guidance set out within the School Healthcare Policy (Appendix 4).
- Ensure the School Healthcare Policy includes information relating to emergency situations (Appendix 2).
- Ensure appropriate staff training is available and undertaken to meet all identified healthcare needs.
- Ensure appropriate school insurance is in place.

The Senior ALNCo

- Oversee the role of The Healthcare Lead.
- Ensure Local Authority and Welsh Government healthcare guidance is followed.
- Work alongside professionals, e.g. Occupational Therapists, LA ALN Officers and the SRB Lead where specialist medical supervision and care is required for pupils who have complex medical needs.
- Advise and support the Healthcare Lead where specialist medical supervision and care is required for pupils who have complex medical needs.
- Ensure effective processes are in place for monitoring and recording healthcare needs and the administration of first aid and medicines.
- Liaise with The Healthcare Lead to ensure effective methods of communication are in place for the sharing of pupil healthcare needs with staff.
- Support the completion of environmental audits, linked to pupil accessibility and health, where this is requested by external agencies.

- Work with The Healthcare Lead to review the School Healthcare Policy and update the First Aid Protocol, providing feedback to the Headteacher and Governing Body as requested.

Teaching and non-Teaching Staff

- Undertake relevant training as required to meet pupil's healthcare needs.
- Have good knowledge of the School Healthcare Policy and Healthcare Protocol for Staff.
- Have good knowledge of Individual Healthcare Plans and how best to support a pupil's medical needs, including during an emergency.
- Have good up-to-date knowledge of pupil medical needs (including allergies) by regularly accessing the Confidential Pupil Update and Pupil Healthcare file via Teams.
- Have good knowledge of healthcare procedures to be followed when organising an off-site activity, or school trip (Appendix 1).
- Ensure equality and equity with regards participation in school activities and events, regardless of a pupil's healthcare needs.
- Make reasonable adjustments for pupils with healthcare needs as appropriate to support their learning, wellbeing and mental health.
- Inform the Healthcare Lead, Wellbeing Lead or Phase Leader if there are any concerns in relation to a pupil's health, or wellbeing.
- Notify the Healthcare Lead immediately where pupils have forgotten asthma pumps, or they are found to be out of date.
- Notify the Healthcare Lead immediately where pupils have forgotten epi-pens, or they are found to be out of date.

Parents/Carers

- Provide the school with appropriate information and, wherever possible, medical evidence where a pupil has been absent through illness.
- Inform the school where a pupil has had an infectious disease or condition while in attendance.
- Provide emergency contact details and notify the school immediately if they change.
- Contribute to the creation and review of Individual Healthcare Plans (IHPs).
- Provide the Healthcare Lead with any relevant healthcare reports, including records of treatment, healthcare plans produced by medical professionals, medical consultations, or a medical diagnosis.
- Notify the Healthcare Lead immediately of changes that will affect a pupil's medical needs when in school, e.g. a growing number of seizures; a change in seizure type; changed medicines, dosage or method of administration; allergies.
- Complete a *Consent for Prescribed Medication* form when requesting that medication be administered during the school day. Where medicines are to be administered during the

school day, these must be prescribed by a medical professional, in-date and clearly labelled with instructions for use.

- Ensure the correct number of asthma pumps and epi-pens are in school where these have been prescribed, and that they are in-date.

Accessibility

King Henry VIII 3-19 School will ensure that all pupils with healthcare needs are fully supported so that they can participate in trips and visits, structured and unstructured social activities where risk assessments indicate that it is safe to do so. This includes during breaks, breakfast club, School Productions and after-hours clubs.

Dietary requirements of pupils with healthcare needs will be considered carefully as part of any risk assessment and dietary plans, accessibility and evacuation plans, will be put in place for pupils as appropriate.

Information Sharing

King Henry VIII 3-19 School will ensure that all information is kept up to date and that there is a clear information sharing protocol in place that is agreed/signed by parents/carers and the pupil. Teachers, supply teachers and support staff (this may include catering staff and relevant contractors) should have access to the relevant information, particularly if there is a possibility of an emergency situation arising.

- We share information with staff about the healthcare needs of pupils using the Confidential Pupil Update and Healthcare Needs file via Teams.
- Individual Healthcare Plans and/or their location are communicated directly to staff who teach or support that child.
- Further information on high-risk health needs is located within Individual Healthcare Plans, or upon the school information management system (SIMS), including emergency procedures and contact numbers.
- A register of First Aid trained staff is managed by the Healthcare Lead, along with a separate register indicating the date of qualification and renewal requirement date.
- The school uses staff meetings as appropriate to inform staff of pupil healthcare needs.
- If a pupil says they feel ill, all appropriate staff are made aware; e.g. if a pupil had an asthma attack in morning, all other staff the pupil would see later that day are made aware to look out for signs of deterioration/further illness.

This would include non-teaching staff, such as Wellbeing Learning Support Officers, Teaching Assistants, lunchtime supervisors and administration staff.

- We ensure the Healthcare Needs Policy is easily accessible by posting it upon the school website.
- We ask parents/carers to sign a consent form which clearly details the bodies, individuals and methods through which their child's medical information will be shared. Sharing medical information can be a sensitive issue and we recognise that the pupil must be involved in any decisions being made about them.
- We include Pupil Leadership Groups, and other pupil groups in the development of healthcare needs arrangements, wherever it is appropriate to do so.
- We consider how peers may be able to assist pupils, e.g. they could be taught the triggers or signs of issues for a pupil, know what to do in an emergency and who to ask for help.

(This would be discussed with the pupil and parents first to decide if and which information can be shared.). It is important in all of these cases that peer support is not used as a means to take responsibility for a pupil with a healthcare need.

- We ensure that our pupils (or their friends) know who to tell if they feel ill and where to go if they require medical assistance.
- We listen to concerns of pupils' (or their friends) if they feel ill at **any** point and consider the need for medical assistance (especially in the case of reported head injuries, or breathing difficulties).

Through regular review, the school ensures that it is compliant with the Data Protection Act 1998 and the WASPI Information Sharing Policy (www.waspi.org).

Record keeping

King Henry VIII 3-19 School collects and maintains the following:

- Emergency contact numbers provided by parents/carers
- Contact details for medical professionals and emergency services
- Parental agreements for the administration of prescribed medicine/s (Appendix 3)
- Records of stored medicines to be administered to pupils (Appendix 8)
- Written requests for pupils to administer their own medicine
- A record of staff training linked to healthcare

All information-sharing techniques, such as school intranets, must be agreed by the pupil and parent in advance of being used, to protect confidentiality.

Storage, access and administration

All medicines are stored securely and safely and a Storage of Medication Checklist completed by the Healthcare Lead. King Henry VIII 3-19 School does not store surplus medication. Medicines are kept in their original dispensed container, labelled with the name of the pupil, medicine name, dosage and frequency and expiry date. The school only accepts prescribed medicines and devices.

It is essential that medication is presented in its original container (bottle, packaging) with the original visible and intact label; any medication which does not present as being in the original prescribed form cannot be administered by designated staff. On these occasions, parents will be contacted to collect the medication and determine whether they personally administer it.

Over the counter medication will not be administered by school staff. Administration of medication for any pupils under the age of 16 requires parental consent.

Emergency arrangements

All staff, including temporary staff, are made aware of medical conditions and understand their duty in an emergency.

Where a pupil has an IHP, this will clearly describe what constitutes an emergency and explain the procedures that must be followed. Where there is no IHP, or where there is no formal diagnosis, regular first aid procedures will be followed (see Appendix 1).

All staff receive healthcare updates through staff briefings where necessary and via the Confidential Pupil Update and Healthcare file via TEAMS. If a pupil needs to attend hospital a member of staff will stay with them until the parent / carer arrives or accompany a child taken to hospital in an ambulance. Staff will not take pupils to hospital in their own car; parents / emergency contacts will be contacted, alongside the emergency services.

Training

Training is provided as required to ensure staff are competent and have confidence in their ability to support pupils with healthcare needs, as outlined within Individual Healthcare Plans. The Healthcare Lead will organise healthcare training and keep a record of staff who attend, ensuring that the school is able to meet the identified healthcare needs of pupils. This will include frequent first aid training for a cross-section of staff to ensure first aiders are available throughout the school and can accompany school trips.

The SRB Lead will organise any specialist training that is required for SRB staff who support pupils with more complex medical needs.

Qualifications and assessments

- Teachers are expected to use their professional judgement to support pupils with healthcare needs.
- We recognise that effective liaison is imperative when pupils with healthcare needs are approaching assessments, including those undertaking examinations in hospital or at home. The NEA components may help pupils to keep up with their peers. ***(EOTAS teaching staff may be able to arrange for concentration on this element to minimise the loss of learning while absent from school)***. Liaison between the school and EOTAS provision is important, especially where the pupil is moving from education setting, or home, to the hospital on a regular basis.
- We will ensure that applications for special arrangements will be submitted by school to the awarding bodies as early as possible. These will be made through the Examination Officer.
(Awarding bodies may make special arrangements for pupils with permanent or long-term disabilities and learning difficulties, or temporary disabilities and illnesses, who are taking public examinations such as National Tests, GCSEs or A levels).
- The school will take advice from the Local Authority if required.
- We recognise it is unacceptable practice to request adjustments or additional time at a late stage, unless there is a sudden illness or significant change in a pupil's healthcare needs. Adjustments are therefore applied for in good time. Consideration must also be given to mock examinations or other tests.

Full guidance on the range of special arrangements available and the procedures for making applications is given in the Joint Council for Qualifications' circulars *Adjustments for candidates with disabilities and learning difficulties* (2016) and *A guide to the special consideration process* (2016), which are both accessible from the Joint Council for Qualifications' website.)

(Adjustments, adaptations or additional time for pupils taking the National Reading and Numeracy Tests should be based on normal classroom practice for particular needs).

Teachers are expected to use their professional judgement to support pupils.

Guidance is provided in the current National Reading and Numeracy Tests – Test administration handbook.

EOTAS

- In the eventuality that a pupil is absent from school and supported by EOTAS the Local Authority will work with the school to ensure the needs of the pupil are met. Liaison between the school and EOTAS provision in these cases will be very important, especially where the pupil is moving from education setting, or home, to the hospital on a regular basis.
- When pupils with healthcare needs are completing NEA components in hospital or at home, EOTAS teaching staff may be able to arrange for concentration on this element to minimise the loss of learning while absent from school.

Integration

At King Henry VIII 3-19 School we recognise that we have a key role to play in the successful integration after diagnosis or reintegration of pupils with healthcare needs. We will be proactive and work with health professionals and the Local Authority as appropriate, as well as other pupils in supporting the transition. We will train staff in a timely manner to assist the pupils return. The support will be considered by key parties including the pupil and parent/carer, and will be reflected in the pupil's IHP.

When a pupil is discharged from hospital, appropriate information should be provided to parent/carers which should be shared with the school. The Healthcare Lead and appropriate Wellbeing Lead will work with the parent/carer and the hospital to manage the pupil's return.

Monitoring and review

The Healthcare Policy and Protocol are regularly reviewed and updated where necessary and are presented to the Governing Body each year for approval. Individual Healthcare Plans are reviewed every 6 months, or when the school is made aware of a change in healthcare needs following guidance from medical professionals.

Complaints

Complaints can be made in line with the school's Complaints Policy. Details can be found on the school website.

Unacceptable practice

Please see the 'Unacceptable Practice' section in the Welsh Government's 'Supporting Pupils with Healthcare Needs' statutory guidance: <http://learning.gov.wales/resources/browse-all/supporting-pupils-with-healthcare-needs/?lang=en>

APPENDIX 1



King Henry VIII 3-19 School First Aid Protocol

Accessing First Aid Support

Lower Phase Building

- Use Radio Channel 2, or phone 52026, to contact the Healthcare Lead.
- Each classroom displays a list of qualified first aiders and their contact numbers. These lists identify the learning spaces each first aider supports.

Middle and Upper Phase Buildings

- Use Radio Channel 2 to contact the Healthcare Lead.
- Contact Reception who will issue a radio call to the nearest available first aider.

2. Responding to an Accident or Illness

- When an incident occurs, a first aider will assess the pupil and decide whether:
 - First aid can be administered immediately, or
 - Support is required from the Healthcare Lead.
- The first aider will ask the Healthcare Lead (or Reception staff if unavailable) to check the pupil's medical history to inform decision-making.
- Following treatment, staff must decide whether the incident requires:
 - A **First Aid Book** entry, or
 - Completion of an **Accident Form**.

3. Recording Incidents

First Aid Book

Used for minor, day-to-day issues, including:

- Headaches
- Stomach aches
- Small cuts, bumps and grazes

Procedures:

- Record the illness and/or treatment provided.
- For pupils in **Year 6 or below**, a First Aid Slip must be completed and placed in the pupil's school bag.
- **All head injuries, however minor, require a phone call home.** Staff must inform the Healthcare Lead, who will complete this.

Accident Form

Used for serious or reportable injuries, including:

- Suspected fractures
- Pulled or torn ligaments
- Significant trauma
- Large or deep cuts
- Head injuries

Procedures:

- Complete the Accident Form as soon as first aid is given.
- Parents/carers must be notified immediately.
- In most cases, parents/carers will be required to attend school and collect the pupil.
- Once completed, the form must be passed to the Healthcare Lead, who will:
 - Update the online Accident Spreadsheet
 - Obtain Deputy Headteacher review and signature
 - Provide a hard copy to the Site and Safety Manager
 - File and submit documentation to the Local Authority

The same procedures apply to staff injuries.

4. Locations of Equipment and Records

- **First Aid Books and Accident Forms:** Located at both Reception areas.
 - **Medical Rooms:** Fully stocked with basic first aid supplies (e.g. antiseptic wipes, plasters, sterile dressings).
 - **Classroom First Aid Kits:**
 - Lower Phase: All classrooms
 - Middle and Upper Phase: Year 5 and 6 classrooms, Rooms 128, 235 and 324
-

5. Unwell Pupils (who are unable to stay within the classroom)

- If a pupil is too unwell to remain in class, staff should contact Reception or the Healthcare Lead (Channel 2).
 - The pupil will be taken to the appropriate medical room for monitoring.
-

6. Medication in School

- Medication may only be administered where parents/carers have completed a medical consent form, issued by the Healthcare Lead.
- Details are recorded in the pupil's Individual Healthcare Plan (where applicable) and shared with relevant staff.
- All medication administration must be logged on the **Administration of Medication Spreadsheet**.
- The Healthcare Lead:
 - Checks and logs expiry dates regularly
 - Liaises with parents/carers to ensure medication is current and available

Medication Storage:

- Lower Phase pupils: Lower Phase Medical Room
 - Middle and Upper Phase pupils: Medical Room next to Reception
-

7. Asthma Management

- Pupils must have access to their asthma inhalers at all times.
- Parents/carers are responsible for providing in-date inhalers.
- Forgotten or out-of-date inhalers must be reported to the Healthcare Lead immediately.

Storage

- Lower and Lower Middle Phase (Years 5 and 6): Inhalers stored securely in classrooms in labelled clear bags.
- Upper Phase: Pupils must carry inhalers at all times.
- Spare inhalers are stored in the Medical Room for emergencies.

Pupils cannot attend school without an in-date inhaler where one is required.

Unstructured Times

- Lower and Lower Middle Phase: Inhalers held by the supervising staff member at break and lunchtime.
 - Upper Phase: Pupils carry inhalers; spares available from the Medical Room.
-

8. Epi-Pens and Severe Allergies

- Epi-pens are stored securely and clearly labelled:
 - Lower and Lower Middle Phase: In classrooms
 - Additional pens: Relevant Medical Rooms
- Upper Phase pupils must carry their Epi-pen at all times.
- Spare pens are held in the Medical Room.
- The Healthcare Lead checks and logs expiry dates.

Pupils cannot attend school if required Epi-pens are not present and in date.

Unstructured Times

- Lower and Lower Middle Phase: Pens held by supervising staff.
 - Upper Phase: Pupils carry pens; spares accessible from the Medical Room.
-

9. SEIZURE FIRST AID – WHAT TO DO

If a pupil has a seizure

1. STAY CALM and KEEP THEM SAFE

- ✓ Time the seizure
- ✓ Move nearby hazards away
- ✓ Gently lower the pupil to the floor
- ✓ Place something soft under their head
- ✓ Loosen tight clothing around the neck

2. DO NOT

- ✗ Do NOT restrain or hold them down
- ✗ Do NOT put anything in their mouth
- ✗ Do NOT give food, drink, or medication
- ✗ Do NOT try to stop the movements

3. DURING THE SEIZURE

- ✓ Let the seizure run its course
- ✓ Keep other pupils calm and give privacy
- ✓ Observe what happens (duration, movements, breathing)

4. WHEN THE SEIZURE STOPS

- ✓ Place the pupil **on their side (recovery position)** if sleepy or unconscious
- ✓ Check breathing
- ✓ Stay with them as they recover

- ✓ Speak calmly – they may be confused or tired
- ✓ Allow rest – do not rush them to stand

5. CALL 999 IF:

- 🚨 A seizure lasts **5 minutes or more**
- 🚨 Seizures happen back-to-back
- 🚨 Breathing is difficult after the seizure
- 🚨 The pupil is injured
- 🚨 This is their **first known seizure**
- 🚨 You are unsure or concerned

6. AFTERCARE

- ✓ Do not allow the pupil to leave the room/school unattended
- ✓ Inform the Healthcare Lead who will:
 - Record the incident according to school policy
 - Inform parents/carers

REMEMBER:

- Your role is safety, observation, and reassurance.
- Most seizures stop on their own and are not life-threatening.

10. Seizure Management (Buccolam)

- Staff must be familiar with Individual Healthcare Plans.
- Where Buccolam is prescribed, **only staff trained in administration** may administer it.
- Trained staff will be directed to the pupil by first aiders, Reception staff or the Healthcare Lead.

11. Diabetes (Type 1)

- Pupils are supported by trained staff in accordance with Individual Healthcare Plans.
- Staff assist with blood glucose monitoring and insulin administration where required.

Hypoglycaemia (Low Blood Sugar)

Symptoms may include:

- Shakiness, sweating, dizziness, headache, irritability, pallor, lethargy, confusion

Response:

- Provide immediate access to glucose snacks/drinks (e.g. juice, glucose sweets).
- Supervise the pupil until levels stabilise.

Hyperglycaemia (High Blood Sugar)

Symptoms may include:

- Excessive thirst, frequent urination, fatigue, nausea, blurred vision

Response:

- Allow access to water and toilets (accompanied).
- Administer insulin as per the Healthcare Plan.

- Parents/carers must be informed of all hypo/hyperglycaemic episodes and treatments.
 - Pupils do not usually need to be collected early unless symptoms persist or worsen.
-

12. First Aid on School Trips

- At least one qualified first aider (PFA or EFAW) must be available at the trip venue.
 - Additional trained staff are required where pupils have specific medical needs (e.g. diabetes, epilepsy).
 - A fully stocked HSE-compliant first aid kit must be taken on each trip.
 - Relevant Healthcare Plans and emergency contact details must be carried.
 - Named staff are responsible for medication storage and administration.
 - Parents/carers must be informed of any injury or medical incident as soon as practicable.
 - All accidents must be recorded using the school's Accident Form.
 - Staff must know how to access emergency medical services and local facilities.
 - A completed risk assessment must identify medical and first aid needs.
 - Emergency transport and supervision plans must be in place.
-



APPENDIX 2

Contacting Emergency Services

King Henry VIII 3-19 School

Contacting Emergency Services

Request for an Ambulance

The ambulance request must come from the location of the injured / unwell person and the first aider supporting. Dial **999**, ask for an ambulance, and be ready with the following information where possible.

1. State your telephone number:
 - Mobile number
 - Primary Site Reception: 01873 735010
 - Secondary Site Reception: 01873 735373
2. Give your location as follows:

King Henry VIII 3-19 School
Old Hereford Road,
Abergavenny,
NP7 6EP
3. Give the exact location in the education setting:
 - Which building (Lower Phase, of Middle/Upper Phase)
 - Which Floor
 - Room Number
4. Give your name.
5. Give the name of the pupil and a brief description of symptoms.
6. Inform Ambulance Control of the **best entrance** and state that the crew will be met at that entrance by a member of the school staff.
7. Don't hang up until the information has been repeated back to you.

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

Ensure Reception are aware that an ambulance has been called and the location of the injured person.



APPENDIX 3

Consent for Prescribed Medication

King Henry VIII 3-19 School

Parent/Carer consent for the school to administer prescribed medication to a pupil

- Our school **will not give** your child medication unless you complete and sign this form. If your child requires medication and this form is not completed, your child could be refused attendance at school in-line with Health and Safety.
- If more than one medication is to be given, a separate form should be completed for each one.
- A new form must be completed when dosage changes are made.
- Where medication is prescribed to be taken in frequencies which allow the daily course of medicine to be administered at home, parents should seek to do so, e.g. before and after school and in the evening. (However, we understand there will be instances where this is not appropriate.)
- Parents/carers will be informed when a child refuses their medication or when emergency medication is administered.
- Parents/carers can request sight of records.
- Without exception pupils must not share their medication for any reason with another pupil.

Name of child	
Date of birth	
Class / form	
Healthcare need	
Routine or emergency medication	
Medicine	
Note: medication must be in the original container if dispensed by the pharmacy.	
Name, type and strength of medicine (<i>as described on the container</i>)	
Date dispensed	
Expiry date	

Dose and frequency of medication	
Method of administration	
Timing of medication	
Duration of treatment	
Special precautions	
Special requirements for administering medication e.g. two staff present, same gender as pupil.	
Storage requirements	
Who will deliver the medication to school and how frequently?	
Who will receive the medication?	
Does treatment of the medical condition affect behaviour or concentration?	
Are there any side effects that the school needs to know about?	
Is there any medication that is being administered outside of school day that we need to know about? Are there any side effects that we should be aware of?	
Any other instructions	
Pupil to self-administer medication under supervision from a stored location	Yes / No (please circle) <i>If yes, pupil must also sign declaration*</i>
Pupil to carry and self-administer medication	Yes / No (please circle) <i>If yes, pupil must also sign declaration*</i>
Procedures to take in an emergency	
If the school has an emergency inhaler- If your child is prescribed an inhaler have you given consent for your child to use a school emergency inhaler on a separate consent form?	Yes / No (please circle)

Agreed review date	<i>To be completed with the school</i>	
Name of member of staff responsible for the review	<i>To be completed with the school</i>	
INDIVIDUAL HEALTHCARE PLANS (IHP)		
Healthcare Plan from health professional attached if appropriate	Yes / No (please circle)	
IHP created by school attached if appropriate (appendix 3)	Yes / No (please circle)	
Guidelines provided by health attached if appropriate e.g. patient information sheet	Yes / No (please circle)	
Review date of the above		
Contact details	Contact 1	Contact 2
Name		
Daytime telephone number		
Relationship to the child		
Address		
Post Code		
In the best interests of the pupil the school might need to share information with school staff and other professionals about your child's healthcare needs e.g. nursing staff. Do you consent to this information being shared?	Yes / No (please circle)	
- I have read and agree to the school giving medication in accordance with the school policy. I understand my parental/carer obligations under the Welsh Government guidelines. https://www.gov.wales/supporting-learners-healthcare-needs-0 - The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff to administer the medicine in accordance with the information given above and the school policy. - I will inform school of any new information from health professionals in regard to my child, e.g. if there are any changes in dosage or frequency or if it is stopped. I will ensure that this is in writing from the health professional. - I understand that it is my responsibility to replenish the medication supply in the school and collect expired or unused medication.		

- Where correct medication is not readily available on a given day and places the child at risk, the head teacher has the right to refuse to admit my child into the school until said medication is provided.
- It is my responsibility to provide in-date medication which is correctly labelled.
- I consent for the information in the form to be shared with health professionals/emergency care.
- If my child has received any emergency medication prior to school, I will inform the head teacher/delegated member of the school staff before school starts.

Parent/carer signature:

Date:

I would like my child to administer and/or carry their medication

Parent/carer signature:

Date:

*If yes to these questions: I agree to administer and/or carry my medicine. If I refuse to administer my medication as agreed, then this agreement will be reviewed.

Pupil signature:

Date:

HEALTHCARE LEAD FOR THE SCHOOL - AGREEMENT TO ADMINISTER MEDICATION

It is agreed that <insert child's name>..... will receive <insert name and quantity of medication>at <insert time medicine is to be administered>

(Name of pupil).....will be given their medication / supervised while they take their medication by <insert name of member of staff>.....
.....

This arrangement will continue until (e.g. either end date if course of medication or until instructed by parents/carers).....

School Healthcare Lead:

Signed:.....Date:

- ☐ Individual Healthcare Plan in place; OR
- ☐ Individual Healthcare Plan not required

APPENDIX 4

Individual Healthcare Plans (IHPs)

Purpose of an IHP

- IHPs set out what support is required by a pupil. They do not need to be long or complicated.
- Our school will ensure our healthcare needs policy includes information on those people who have responsibility for the development of the IHPs.
- IHPs are essential where healthcare needs are complex, fluctuating, long term or where there is a high risk that an emergency intervention will be needed.
- Not all pupils with healthcare needs require an IHP and there should be a process in place to decide what interventions are most appropriate.

When an IHP is appropriate

In most cases, especially concerning short-term illnesses such as those requiring a course of antibiotics, a detailed IHP may not be necessary. In such circumstances it may be sufficient to only complete a Consent for Prescribed Medication form (Appendix 3).

In such circumstances it may be sufficient to record the name of medication, dosage, time administered and any possible side effects. These procedures should be confirmed in writing between the pupil (where appropriate), the parents and the education setting.

However, when a pupil has continual or episodic healthcare needs, then an IHP may be required. If these needs are complex and the pupil is changing settings, then preparation should start early to help ensure the IHP is in place at the start of the new term. A Personal Evacuation Plan and Risk Assessment may also be attached.

Individual Healthcare Plan (IHP) Requirement

The following diagram outlines the process for identifying whether an IHP is needed

Identify pupils with healthcare needs

- Pupil is identified from enrolment form or other route.*
- Parent or pupil informs education setting of healthcare need.
- Transition discussions are held in good time, e.g. eight weeks before either the end of term or moving to a new education setting.
- Pupil is identified by healthcare professional



Gather information

If there is a potential need for an IHP; the school should discuss this with the parent/carer and the pupil themselves. This must be done where appropriate in conjunction with the relevant healthcare professional. This will support the decision-making process about whether an IHP is needed.



Establish if an IHP should be made

- The education setting should organise a meeting with appropriate staff, the parents, the pupil and appropriate clinicians to determine if the pupil's healthcare needs require an IHP, or whether this would be inappropriate or disproportionate. If consensus cannot be reached, the head teacher should take the final decision, which can be challenged through the complaint's procedure.



If an IHP should be made

- The education setting, under the guidance of the appropriate healthcare professionals, parents and the pupil, should develop the IHP in partnership.
- The education setting should identify appropriate staff to support the pupil, including identifying any training needs and the source of training, and implement training.
- The education setting should circulate the IHP to all appropriate individuals.
- The education setting should set an appropriate review date and define any other triggers for review.



King Henry VIII 3-19 School

Individual Healthcare Plan (IHP)

Please note: this is a very comprehensive IHP. Not all sections will be applicable. The school only needs to use the sections that are relevant and helpful to the care of the pupil.

If health professionals have already provided their own health care plan, the school might not need to create an IHP as long as the one from the health professional covers all the information that the school needs.

1. PUPIL INFORMATION

1.1 Pupil details

Pupil's name:	
Date of birth:	
Year group:	
Nursery/School/College:	
Address:	
Town:	
Postcode:	
Medical condition(s): <i>Give a brief description of the medical condition(s) including description of signs, symptoms, triggers, behaviours.</i>	
Allergies:	
Date:	
Document to be updated/reviewed:	
Review triggers:	

1.2 Family contact information

Name:			
Relationship:			
Home phone number:			
Mobile phone number:			
Work phone number:			
Email:			

1.3 Essential information concerning this pupils' health needs

	Name	Contact details
Specialist nurse (if applicable):		
Key worker:		
Consultant paediatrician (if applicable):		
GP:		
Head teacher:		
Link person in education:		
Class teacher:		
Health visitor/ school nurse:		
ALNco:		
Other relevant teaching staff:		
Other relevant non-teaching staff:		
Person with overall responsibility for implementing plan:		
Person responsible for administering/supervising medication:		
Arrangements for cover in these two peoples absence:		
Any provider of alternate provision:		

This pupil has the following medical condition(s) requiring the following treatment.	
Medication administration	Please complete parent/carer agreement for school to administer medication form (appendix 2) and attach to this IHP.

1.4 Sharing information and record keeping

In the best interests of the pupil the school might need to share information with school staff and other professionals about your child's healthcare needs e.g. nursing staff. Do you consent to this information being shared?	Yes / No (please circle)
What records will be kept about the pupil's healthcare needs, and how it will be communicated with others?	

2. ROUTINE MONITORING (IF APPLICABLE)

Some medical conditions will require monitoring to help manage the pupil'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?	

3. EMERGENCY SITUATIONS

An emergency situation occurs whenever a pupil needs urgent treatment to deal with their condition.

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

4. IMPACT OF MEDICAL CONDITION AND MEDICATION ON PUPIL'S LEARNING

(Impact statement to be jointly produced by health professional and a teacher)

How does the pupil's medical condition or treatment affect learning? <i>i.e. memory, processing speed, coordination etc.</i>	
Actions to mitigate these effects	
Does the pupil require any further assessment of their learning?	

5. IMPACT ON PUPIL'S LEARNING and CARE AT MEAL TIMES

	Time	Note
Arrive at school		
Morning break		
Lunch		
Afternoon break		
School finish		
After school club (if applicable)		
Other		

- ☐ Please refer to home-school communication diary
- ☐ Please refer to school planner

6. CARE AT MEAL TIMES

What care is needed?	
When should this care be provided?	
How's it given?	
If it's medication, how much is needed?	
Any other special care required?	

7. 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	

8. TRIPS AND ACTIVITIES AWAY FROM SCHOOL

What care needs to take place?	
When does it need to take place?	
If needed, is there somewhere for care to take place?	
Who will look after medication and equipment?	
Who outside of the school needs to be informed?	
Who will take overall responsibility for the pupil on the trip?	

9. SCHOOL ENVIRONMENT

Can the school environment affect the pupil's medical condition?	
How does the school environment affect the pupil's medical condition?	
What changes can the school make to deal with these issues?	
Location of school medical room	

10. EDUCATIONAL, SOCIAL & EMOTIONAL NEEDS

Pupils with medical conditions may have to attend clinic appointments to review their condition. These appointments may require a full day's absence and should not count towards a pupil's attendance record.

Is the pupil likely to need time off because of their condition?	
What is the process for catching up on missed work caused by absences?	
Does this pupil require extra time for keeping up with work?	
Does this pupil require any additional support in lessons? If so what?	
Is there a situation where the pupil will need to leave the classroom?	
Does this pupil require rest periods?	
Does this pupil require any emotional support?	
Does this pupil have a 'buddy' e.g. help carrying bags to and from lessons?	

11. STAFF TRAINING

The Governing Body are responsible for making sure staff have received appropriate training to look after a pupil with regard to healthcare administration, aids and adaptive technologies. School staff should be released to attend any necessary training sessions it is agreed they need.

What training is required?	
Who needs to be trained?	
Has the training been completed?	
Head teacher/delegated person signature	

12. TRANSPORT TO SCHOOL

What arrangements have been put in place?	
Who will meet the pupil in school?	

13. PERSONAL CARE

For pupils requiring intimate care as part of their IHP, please refer to the schools intimate care policy.

What arrangements have been put in place in relation to any personal care needs across the school day?	
--	--

14. PLEASE USE THIS SECTION FOR ANY ADDITIONAL INFORMATION FOR THE PUPIL.

--

We suggest the following are stored together:

- ☐ IHP from health
- ☐ Medication consent form (if applicable)
- ☐ Statement of SEN/ ALN IDP /individual education plan / learning and skills plan
- ☐ One page profile
- ☐ Risk assessment
- ☐ Personal evacuation plan

15. SIGNATURES

	Name	Signature	Date
Head teacher/delegated person			
Young person			
Parents/ carer			
Health professional			
School representative			
School nurse			



APPENDIX 5 Staff Training Record

King Henry VIII 3-19 School

STAFF TRAINING RECORD – ADMINISTRATION OF MEDICATION / TREATMENT

Please ensure that the Education Workforce Council registration is updated accordingly (if appropriate).

Name (s)	
Type of training received	
Date training received	
Date training completed	
Training provided by	
Profession and title	

I confirm that the above staff member(s) have received the training detailed above and is competent to carry out any necessary treatment / administration of medication.

I recommend that the training is updated (*please state how often*):

Trainer's signature:

Date:

I confirm that I have received the training detailed above.

Staff signature:

Date:

Suggested review date:



APPENDIX 6

Record of Administration of Medication

King Henry VIII 3-19 School - This information is stored on our secure staff-share area

Record of medication administered to a pupil

Name: _____ Form Class: _____

Date	Time	Name of medication	All checks above undertaken	Dose Given	Controlled drugs only: amount remaining	Any reactions	Medication refused/not administered	Reason	Parent/carer informed & how	Staff 1 signature	Staff 2 signature



APPENDIX 7

Storage of Medication Check List

King Henry VIII 3-19 School
Record of medication stored on the school site for a pupil

Pupil Name	Date of Birth	Name of medication	Date placed in Reception	Expiry date of medication	Date of check 1	Date of check 2	Staff signature