

## SUPPORTING PUPILS WITH MEDICAL CONDITIONS

### STATUTORY CENTRAL POLICY

Version and Date		Action/Notes
1.0	Sept 2014	Policy issued
2.0	July 2015	Policy reviewed and updated AoM SENCO
3.0	August 2016	Policy re-formatted and updated for approval
4.0	August 2017	Policy updated for ratification
5.0	May 2020	Policy updated for ratification

Policy Reviewed:	May 2020
Policy Review Frequency:	Every two years
Next Review:	May 2022
Signature of CEO:	<b>Signature of Chair of Trustees</b>




This policy applies to all Dean Trust sites and is the policy document for the administration of medicines and support of pupils with medical conditions.

***The policy framework describes the essential criteria for how a school can meet the needs of children and young people with long-term conditions. It is in line with DfE statutory guidance on Supporting Pupils at School with Medical Conditions (2015) for governing bodies of maintained schools and proprietors of academies in England***

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/349435/Statutory\\_gu...\\_on\\_supporting\\_pupils\\_at\\_school\\_with\\_medical\\_conditions.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/349435/Statutory_gu..._on_supporting_pupils_at_school_with_medical_conditions.pdf)

The named member of school staff responsible for this medical condition policy and its implementation is:

NAME.....

ROLE .....

SCHOOL .....

This school has comprehensive insurance cover against all liabilities

DfE guidance

Governing bodies should ensure that all schools develop a policy for supporting pupils with medical conditions that is reviewed regularly and is readily accessible to parents and school staff.

Governing bodies should ensure that the arrangements they set up include details on how the school's policy will be implemented effectively, including a named person who has overall responsibility for policy implementation.

Details should include:

- Who is responsible for ensuring that sufficient staff are suitably trained.
- A commitment that all relevant staff will be made aware of the child's condition.
- Cover arrangements in case of staff absence or staff turnover to ensure someone is always available.
- Briefing for supply teachers.
- Risk assessments for school visits, holidays, and other school activities outside of the normal timetable.
- Monitoring of individual healthcare plans.

**This school is an inclusive community that supports and welcomes pupils with medical conditions.**

- This school is welcoming and supportive of pupils with medical conditions. It provides children with medical conditions with the same opportunities and access to activities (both school based and out-of-school) as other pupils. No child will be denied admission or prevented from taking up a place in this school because arrangements for their medical condition have not been/cannot be made.
- This school will work collaboratively with pupils, parents and carers.
- Pupils and parents/carers feel confident in the care they receive from this school and that the level of care meets their needs.
- Staff understand the medical conditions of pupils at this school and that they may be serious, adversely affect a child's quality of life and impact on their ability and confidence.
- All staff understand their duty of care to children and young people and know what to do in the event of an emergency.
- The whole school & local health community understand and support the medical conditions policy.
- This school understands that all children with the same medical condition will not have the same needs, our school will focus on the needs of each individual child.
- The school recognises its duties as detailed in Section 100 of the Children and Families Act 2014. (Other related legislation is referenced in DfE guidance p21). Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case, this school complies with their duties under that Act. Some pupils may also have special educational needs and disabilities (SEND) and may have an Education, Health Care Plan (EHCP) plan which brings together health and social care needs, as well as their special educational provision. For children with SEND, this policy should be read in conjunction with the Special Educational Needs and Disability (SEND) code of practice.

The school will support and encourage children, who are able, to take responsibility to manage their own medicines, but the pupils are supervised and medicines are always kept in the named office. If a child refuses medicine, staff do not force them to take it, but will record this and ensure that the parent/carer is aware of it.

**This school's medical conditions policy is drawn up in consultation with a wide range of local key stakeholders within both the school and health settings.**

- Stakeholders include pupils, parent/carers, school nurse, school staff, governors, and relevant local health specialist services.

**This medical conditions policy is supported by a clear communication plan for staff, parent/carers and other key stakeholders to ensure its full implementation.**

- Pupils, parent/carers, relevant local healthcare staff, and other external stakeholders are informed of and reminded about the medical conditions policy through clear communication channels.

**All staff understand and are trained and competent in what to do in an emergency for children with medical conditions at this school.**

- All school staff, including temporary or supply staff, are aware of the medical conditions at this school and understand their duty of care to pupils in an emergency.
- All staff receive training in what to do in an emergency and how to prevent one and this is refreshed at least once a year.
- All children with medical conditions that are complex, long-term or where there is a high risk that emergency intervention will be required at this school have an individual healthcare plan (IHCP), which explains what help they need in an emergency. Where a child has an Education Healthcare Plan, the IHCP should be linked or become part of that plan. The IHCP will accompany a pupil should they need to attend hospital. Parental permission will be sought and recorded in the IHCP for sharing the IHCP within emergency care settings. Named staff will monitor IHCPs.
- This school makes sure that all staff providing support to a pupil have received suitable training and ongoing support to ensure that they have confidence to provide the necessary support and that they fulfil the requirements set out in the pupil's IHCP. This should be provided by the specialist nurse/school nurse/other suitably qualified healthcare professional and/or parent/carer. The specialist nurse/school nurse/other suitably qualified healthcare professional will confirm their competence and this school keeps an up to date record of all training undertaken and by whom.
- This school has chosen to hold an emergency salbutamol inhaler for use by pupils who have been prescribed a reliever inhaler and for whom parental written consent for its use has been obtained.

**All staff understand and are trained in the school's general emergency procedures.**

- All staff, including temporary or supply staff should be aware of the content of this policy, know what action to take in an emergency and receive updates at least yearly. The school nurse or another appropriate health professional will provide annual training for common conditions eg asthma, allergies, epilepsy and diabetes.
- If a pupil needs to attend hospital in an emergency, a member of staff (preferably known to the pupil) will stay with them until a parent/carer arrives, or accompany a child taken to hospital by ambulance. They will not take pupils to hospital in their own car.

**This school has clear guidance on providing care and support and administering medication at school.**

- This school understands the importance of medication being taken and care received as detailed in the pupil's IHCP.
- Medication will only be administered when it would be detrimental to a child's health or school attendance not to do so.
- This school will make sure that there are sufficient members of staff who have been trained to administer the medication and meet the care needs of an individual child. This includes escort staff for home to school transport if necessary. This school will ensure that there are sufficient numbers of staff trained to cover any absences, staff turnover and other contingencies.
- This school will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent, and every effort will be made to encourage the pupil to involve their parent/carer, while respecting their confidentiality.

- When administering medication, for example pain relief, this school will check the maximum dosage and when the previous dose was given. Parents/carers will be informed.
- This school will make sure that a trained member of staff is available to accompany a pupil with a medical condition on an off-site visit, including overnight stays.
- Parents/carers at this school understand that they should let the school know immediately if their child's needs change.
- If a pupil misuses their medication, or anyone else's, their parent/carer is informed as soon as possible and the school's disciplinary procedures are followed.

**This school has clear guidance on the storage of medication and equipment at school.**

- This school makes sure that all staff understand what constitutes an emergency for an individual child and makes sure that emergency medication/equipment, eg asthma inhalers, epi-pens etc are readily available wherever the child is in the school and on off-site activities, and are not locked away.
- Pupils may carry their own medication/equipment, or they should know exactly where to access it. Those pupils deemed competent to carry their own medication/equipment with them will be identified and recorded through the pupil's IHCP in agreement with parents/carers.
- Pupils can carry medication if they are deemed competent to do so and it has been agreed by the school, parent/carer, otherwise this school will store the medication securely in a non-portable container, with only named staff having access. Staff at this school can administer medication to a pupil once they have had specialist training.
- This school will make sure that all medication is stored safely, adhering to storage guidelines and that pupils with medical conditions know where they are at all times and have access to them immediately. Under no circumstances will medication be stored in first aid boxes.
- This school will only accept medication that is in date, labelled and in its original container including prescribing instructions for administration. The exception to this is insulin, which though must still be in date, will generally be supplied in an insulin injector pen or a pump.
- Parents/carers are asked to collect all medications/equipment at the end of the school term, and to provide new and in-date medication at the start of each term. It is the parent/carers responsibility to ensure all medication is in date and appropriate, however school will inform parents/carers if they become aware of medication that has passed its expiry date.
- This school disposes of needles and other sharps in line with local policies. Sharps boxes are kept securely at school and will accompany a child on off-site visits. They are collected and disposed of in line with local authority procedures.

**This school has clear guidance about record keeping.**

- As part of the school's admissions process and annual data collection exercise, parents/carers are asked if their child has any medical conditions. These procedures also cover transitional arrangements between schools.
- This school uses an IHCP to record the support an individual pupil needs around their medical condition. The IHCP is developed with the pupil, parent/carer, designated named member of school staff, specialist nurse (where appropriate) and relevant healthcare services. Where a child has SEND but does not have a statement or EHC plan, their special educational needs are mentioned in their IHCP. Appendix 8 is used to identify and agree the support a child needs and the development of an IHCP.
- This school has a centralised register of IHCPs, and an identified member of staff has the responsibility for monitoring this register.
- IHCPs are annually reviewed, or whenever the pupil's needs change. It is the parents/carers responsibility to keep the school updated with any changes in a child's health such a medication/dosage if this occurs before the review of the annual health care plan.

- The pupil (where appropriate) parents/carers, specialist nurse (where appropriate) and relevant healthcare services hold a copy of the IHCP. Other school staff are made aware of and have access to the IHCP for the pupils in their care.
- This school makes sure that the pupil's confidentiality is protected abiding by data protection laws.
- This school seeks permission from parents/carers before sharing or requesting any medical information with any other party, such as the school nurse. In an emergency school will pass on vital information in the IHCP to emergency services.
- This school keeps an accurate record of all medication administered, including the dose, time, date and supervising staff.

**This school ensures that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.**

- This school is committed to providing a physical environment accessible to pupils with medical conditions and pupils are consulted to ensure this accessibility. This school is also committed to an accessible physical environment for out-of-school activities.
- This school makes sure the needs of pupils with medical conditions are considered in order to be inclusive and to ensure their involvement in structured and unstructured activities, extended school activities and residential visits.
- All staff are aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside the school's anti bullying policy, to help prevent and deal with any problems. They use opportunities such as Personal, Health and Social Education (PHSE) and science lessons to raise awareness of medical conditions to help promote a positive environment.
- This school understands the importance of all pupils taking part in off site visits and physical activity and that all relevant staff make reasonable and appropriate adjustments to such activities so they are accessible to all pupils. This includes out-of-school clubs and team sports. Risk assessments will be conducted as part of the planning process to take account of any additional controls required for individual pupil needs.
- This school understands that all relevant staff are aware that pupils should not be forced to take part in activities if they are unwell. They should also be aware of pupils who have been advised to avoid/take special precautions during activity, and the potential triggers for a pupil's medical condition when exercising and how to minimise these.

**This school makes sure that pupils have the appropriate medication/equipment/food with them during physical activity and offsite visits.**

- This school makes sure that pupils with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at school as any other child, and that appropriate adjustments and extra support are provided.
- All school staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition.
- This school will not penalise pupils for their attendance if their absences relate to their medical condition as long as appropriate, agreed medical evidence is provided
- This school will refer pupils with medical conditions who are finding it difficult to keep up educationally to the SENCO or Inclusion Manager, who will liaise with the pupil (where appropriate), parent/carer and the pupil's healthcare professional.
- Pupils at this school learn what to do in an emergency via annual health care reviews.

- This school makes sure that a risk assessment is carried out before any out-of-school visit, including work experience and educational placements. The needs of pupils with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required.

For pupils who access Alternative Provision, the provider will sign a Service Level Agreement and as part of the induction process key information regarding the pupils' medical needs is shared along with the school's policy and guidelines.

**This school is aware of the common triggers that can make common medical conditions worse or can bring on an emergency. The school is actively working towards reducing or eliminating these health and safety risks and has a daily schedule of reducing specific triggers to support this.**

- This school is committed to identifying and reducing triggers both at school and on out-of-school visits.
- School staff will be given advice and guidance on medical conditions which includes avoiding/reducing exposure to common triggers.
- The IHCP details an individual pupil's triggers and details how to make sure the pupil remains safe and well throughout the whole school day and on out-of-school activities. Risk assessments are carried out on all out-of-school activities, considering the needs of pupils with medical needs.
- This school reviews all medical emergencies and incidents to see how they could have been avoided, and changes school policy or plans training according to these reviews, in order to prevent future re-occurrences.

**Each member of the school and health community knows their roles and responsibilities in maintaining and implementing an effective medical conditions policy.**

- This school works in partnership with all relevant parties including the pupil (where appropriate), parent/carer, school's governing body, all school staff, employers and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.

• Key roles and responsibilities are outlined in Appendix 9.

**The medical conditions policy is reviewed, evaluated and updated by the named Governor and Senior Leader. Updates are produced every two years.**

- In evaluating the policy, this school seeks feedback from key stakeholders including pupils, parents/carers, school nurses, specialist nurses and other relevant healthcare professionals, school staff, local emergency care services and governors. The views of pupils with medical conditions are central to the evaluation process.
- In response to requests from stakeholders during discussions about the development of the statutory guidance, we have prepared the following templates. They are provided as an aid to schools.

Appendix:	1	Individual Healthcare Plan
Appendix:	2	Asthma Management Plan
Appendix:	3	Parental Agreement for the administration of medicine
Appendix:	4	Record of Medicine Administered to all Children
Appendix:	5	Staff Training Record – Administration of Medicines
Appendix:	6	In an Emergency situation
Appendix:	7	Model Letter Inviting Parents to Contribute to Individual Healthcare Plan Development
Appendix:	8	Model process for developing individual healthcare plans
Appendix:	9	Roles and Responsibilities
Appendix:	10	Salbutamol inhaler protocol

Appendix:	11	Complaints
Appendix:	12	Asthma guidance for staff

## Appendix 1

*(Insert school name)*

### Individual Health Care Plan

<b>Pupil Name</b>	
Date of Birth	
Year/Form	
Head of Year	
Address and Post Code	
Medical condition	
Date completed	
Review Date	

<b>Family Contact Information</b>	
Name	
Relationship	
Phone - Work	
Phone - Home	
Phone - Mobile	
Name	
Relationship	
Phone - Work	
Phone - Home	
Phone - Mobile	

*(Insert school name)*

## Individual Health Care Plan

<b>Pupil Name</b>	
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### Medical Contact Information

GP Name	
Phone	
Hospital Doctor/s	
Phone	
Nurse	
Phone	

### Medical Information

Recognisable Symptoms	
Emergency Actions	
Daily Care Requirements	
Medication Taken	
Who is responsible in Emergency	
Emergency evacuations procedures applicable	

*(Insert school name)*

## Individual Health Care Plan

**Pupil Name**

<b>Communication Plan</b>	
<b>Does your child need to see the school nurse?</b>	
<b>Nurse visited, name and when</b>	
<b>Actions:-</b>	

**I understand that it is my responsibility to notify school, in writing, of any changes.**

**I allow my GP to share medical information with the school nurse about my child to support their health care plan.**

Parent Signature ..... date .....

Print name .....

Staff Signature ..... date .....

Print name .....

### **Review**

Parent Signature ..... date .....

Print name .....

Staff Signature ..... date .....

Print name .....

## Appendix 2

<b>Asthma Management Plan</b>			
<b>Pupil Name</b>			
<b>Date of Birth</b>			
Name of inhaler		Inhaler expiry date	
Dose to be given		When to be given	
Via plastic volume spacer		Self-administration	
Are you aware of anything that may trigger your child's asthma?		Are there any side effects and/or other information that school needs to know about?	
<b>Parental consent:</b>			
<b>I understand that it is my responsibility to notify school, in writing, of any changes to my child's health or medication.</b>			
I give my consent for:			
<ul style="list-style-type: none"> <li>• My child to receive Salbutamol from an emergency inhaler held at school if their own inhaler is not available (for example, lost, broken or empty).</li> <li>• School nurse to meet with my child during school time to monitor their health condition, if necessary.</li> <li>• School to follow the asthma management plan outlined in the IHCP (if one is needed)</li> <li>• The school to share medical information with key personal if necessary.</li> </ul>			
Parent Signature .....		date .....	Print name .....
Staff Signature .....		date .....	Print name .....
<b>Review</b>			
Parent Signature .....		date .....	Print name .....

Staff Signature ..... date ..... Print name

## Appendix 3

### **Parental agreement for the administration of medicine**

The school/setting will not give your child medicine unless you complete and sign this form, the school will only administer medicines in accordance with the policy to enable staff to administer medicine.

Date for review to be initiated by


Name of school/setting

Name of child

Date of birth

Group/class/form

Medical condition or illness

#### **Medicine**

**NB: Medicines must be in the original container as dispensed by the pharmacy**

Name/type of medicine  
(As described on the container)


Expiry date

Dosage and method

Timing

Special precautions/other instructions


Are there any side effects that the school/setting needs to know about?

Self-administration – Y/N

Procedures to take in an emergency

### Contact Details

Name


Daytime telephone no.

Relationship to child

Address

I understand that I must deliver the medicine personally to

(agreed by member of staff)

The above information is, to the best of my knowledge, accurate at the time of writing. I give consent to the school staff to administer medication. I will confirm immediately, in writing, if there is any change in dosage or frequency of the medicine or if the medicine is stopped.

Signature(s) \_\_\_\_\_

Date \_\_\_\_\_

### Appendix 4

#### **Record of medicine administered to all children (Daily Record)**

Name of school/setting

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Date	Time	Child's name	Name of Medicine	Dose given	Any reactions	Signature of Staff	Print name


## Appendix 5

### Staff training record –

### Administration of Medicines

Name of school/setting

Name of school/setting
Name
Type of training received
Date of training completed
Training provided by
Profession and title

Name

Type of training received

Date of training completed

Training provided by

Profession and title

I confirm that (*name of member of staff*) has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated for (*name of member of staff*) by (*insert date*)

Trainers' signature \_\_\_\_\_

Date \_\_\_\_\_

I confirm that I have received the training detailed above:

Staff signature\_\_\_\_\_

Date \_\_\_\_\_

Suggested review date

## Appendix 6

Contacting emergency services

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

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

1. The schools telephone number
2. Your name
3. Your location as follows (*insert school/setting address*)
4. State if the postcodes for satellite navigation systems may differ from the postal code
5. Provide the exact location of the child within the school setting
6. Provide the name of the child and a brief description of their symptoms
7. Inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to patient
8. Have a copy of the child's individual healthcare plan to pass to ambulance crew

Having dealt with the casualty please: -

- A) Ensure that the child's parent/carer is notified
- B) Complete a report including a record of medicine administered to an individual child and log with the teacher and person who is responsible for Health & Safety

## Appendix 7

### **Model letter inviting parents to contribute to an individual healthcare plan development**

Dear Parent,

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

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

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support your child needs and how this will be implemented. Individual healthcare plans are developed in partnership between the school, parent/carer, pupil, and any relevant healthcare professional who can advise on your child's needs. The aim is to ensure that the school know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life. The level of detail within the plan will depend on the complexity of your child's condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for (*insert date*). I hope that this is convenient for you. I would be grateful if you could confirm whether you are able to attend. The meeting will involve (*insert names*). Please let me know if you would like me to invite any other medical practitioner, healthcare professional or specialist. Please bring to the meeting any other supporting information you would like to be considered.

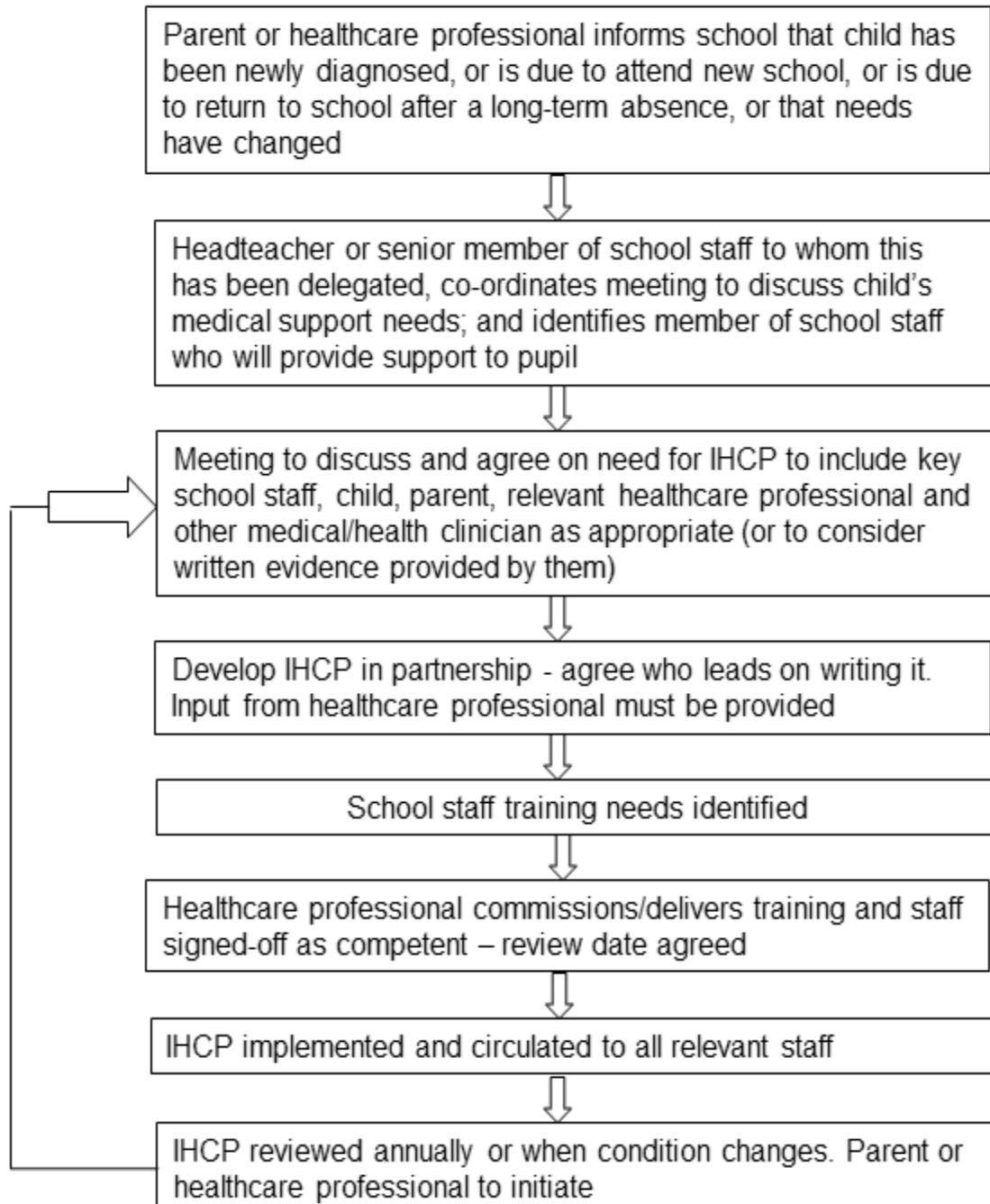
If you are unable to attend the proposed meeting please contact me at school to make a mutually convenient appointment.

Yours sincerely,

(*Insert name and position*)

## Appendix 8

### Model process for developing individual healthcare plans



## Appendix 9

### Roles and responsibilities

#### Supporting pupils with medical conditions policy

**Governors must ensure that pupils are properly supported in order that they have full access to education, including trips and physical education.**

- School activities should be accessible to all.
- How pupils' medical conditions affect their learning and social needs must be demonstrated.
- Staff roles and responsibilities must clearly identify and show how pupils' needs are being met.

**Governors must ensure arrangements are in place to support pupils.**

- Governors must ensure there is a medications policy, staff are trained to support pupils, there is whole school awareness of health needs and it is included in induction.
- Governors must ensure staff are supported and the support, training and materials they need to support pupils with health needs are reviewed.
- Governors must ensure that there are plans for emergencies, contingencies and preventative measures in place for pupils, as well as pupils being supported in self-management of their conditions.
- Governors must ensure the school insurance reflects all risk levels.

**Governors must ensure school leaders consult health and social care professionals and parents in order to understand the condition and therefore how to support the pupil effectively.**

- Governors must monitor IHCPs are developed in collaboration with pupils, parents/carers and health care professionals.
- Governors must monitor that pupils' social and emotional needs are considered, as an important part of participating in school life.
- Governors must monitor that there is a named person on IHCPs and there is confidence in the support/provision.
- Governors must monitor that procedures, notifications, timescales and reviews are kept to, and that risk assessments and management is carried out.
- Governors must ensure parental responsibilities are communicated.

**Headteacher** – should ensure that their school's policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. Headteachers should ensure that all staff who need to know are aware of the child's condition. They should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. Headteachers have overall responsibility for the development of individual healthcare plans. They should also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way. They should contact the school nursing service in the case of any child 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.

**School staff** – any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should consider the needs of pupils with medical conditions that they teach. School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions.

Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

**School nurse** – every school has access to school nursing services. They are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they will do this before the child starts at the school. They would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with medical conditions, but may support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training. School nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs - for example, there are good models of local specialist nursing teams offering training to local school staff, hosted by a local school. Community nursing teams will also be a valuable potential resource for a school seeking advice and support in relation to children with a medical condition.

**Other healthcare professionals** - including GPs, paediatricians, nurse, specialists/community paediatric nurses – should notify the school nurse and work jointly when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans. Anyone dealing with the medical care of a pupil in school should contact the named school nurse for that school to ensure a coordinated approach.

**Pupils** – with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other pupils will often be sensitive to the needs of those with medical conditions.

**Parents/carers** – should provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents/carers are key partners and should be involved in the development and review of their child's individual healthcare plan, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, eg provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

## Appendix 10

The school has chosen to hold an emergency salbutamol inhaler for use by pupils who have been prescribed a reliever inhaler and for whom written parental consent for its use has been obtained.

The protocol for the use of this inhaler is detailed below, following the Department of Health Guidance on the use

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/416468/emergency\\_inhalers\\_in\\_schools.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/416468/emergency_inhalers_in_schools.pdf) emergency salbutamol inhalers in schools.

The use, storage, care and disposal of the inhaler and spacers will follow the school's policy on supporting pupils with medical conditions. Specific guidance on storage and care is provided on page 12 of the Department of Health Guidance on the use of emergency salbutamol inhalers in schools.

The school hold a register of children prescribed an inhaler and this list is kept with the emergency inhaler.

Written parental consent is sought for the use of the emergency inhaler. Where consent is received the use of the emergency inhaler will be included in the pupils IHCP.

Parents/carers will be informed if their child has used the emergency inhaler.

School staff responsible for ensuring this protocol is followed are **(insert names)**.

Appropriate support and training will be provided to key staff in line with the school's policy on supporting pupils with medical conditions.

## Appendix 11

### **Complaints**

Should a parent/carer or pupil be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may wish to make a formal complaint via the school's complaints procedure. Details for this can be found on the school web site.

Making a formal complaint to the Department for Education should only occur if it comes within scope of section 496/497 of the Education Act 1996 and after all other attempts at resolution have been exhausted.

## Appendix 12

