

Sofrydd Primary School Ysgol Gynradd Swffryd

Medical Needs Policy



Article 6- The Right to be healthy.

Article 28- The Right to go to school

Principles

Sofrydd Primary School is committed to ensuring that all our learners 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 promoted.

Sofrydd Primary School has arrangements in place as outlined in this policy to focus on meeting the needs specific to the learner and consider how this impacts on their education, attainment and well-being. The school is committed to ensuring arrangements properly support learners and minimise disruption or barriers to their education. Arrangements should also consider any wider safeguarding duties while seeking to ensure all learners can access and enjoy the same opportunities. Where possible, the school is committed to supporting the learner to build understanding and confidence to increasingly self-manage healthcare needs, depending on their ability to do so.

This policy links directly to Local Authority and Welsh Government guidance.

Roles and responsibilities

The Governing Bodies will oversee the development and implementation of arrangements including:

- complying with statutory duties
- promoting the wellbeing of learners
- supporting learners to uphold their rights
- ensuring a clear understanding of roles and responsibilities
- working collaboratively to meet the needs of the leaner
- developing IHPs and monitoring and reviewing arrangements (Appendix 3-5)
- ensuring a policy is in place which covers emergency situations (Appendix
 1)
- ensuring appropriate training is available
- ensuring appropriate insurance is in place

The Head Teacher will ensure arrangements are developed and effectively implemented including:

- working with the governing body to ensure compliance
- ensuring the school has a relevant policy
- ensuring there is a clearly understood process of communication
- ensuring robust processes for record keeping
- clear emergency arrangements are in place(Appendix 1)
- clear monitoring arrangements are in place
- there is a key member of staff with responsibility for learners with healthcare needs
- ensuring appropriate training is in place (Appendix 6)
- Discuss responsibility for Individual Healthcare Plans (IHP) with partners i.e. Health to decide on the most appropriate lead

- ensure appropriate environment is available (for example in relation to toileting)
- ensuring appropriate dialogue with the LA in relation to insurance
- ensuring annual reports to Governors regarding arrangements in place
- ensuring learners are included in activities unless there is a clear evidenced based reason to the contrary

Teachers and support staff will receive relevant training (from LA and Healthcare professionals as required) and ensure they:

- understand the policies and procedures in place in the setting
- understand and follow communication protocols
- are aware of learners with more chronic needs and those with IHPs
- are aware of what to do in an emergency, the schools emergency procedures, and be aware of the signs of common life threatening emergencies
- listen to the views of learners and parents when putting support in place
- ensure learners know who to tell if they feel unwell
- ensure learners are not excluded from activities
- be aware of the impact of healthcare needs on learning and wellbeing
- keep parents informed of any impact of the learners healthcare needs

Parents and learners will:

- receive updates regarding healthcare issues/changes that occur within the education setting
- be involved in the creation, development and review of an IHP (if any) this includes health.
- provide the education setting with sufficient and up-to-date information about healthcare needs, including any guidance regarding the administration of medicines and/or treatment from healthcare professionals. (see Appendices)
- Where appropriate, learners should be encouraged and enabled to manage their own healthcare needs
- inform the education setting of any changes such as type of medication, dosage or method of administration
- provide relevant in-date medicines, correctly labelled, with written dosage and administration instructions
- ensure a nominated adult is contactable at all times and all necessary forms are completed and signed
- inform the education setting if their child has/had an infectious disease or condition while in attendance.

Accessibility

Sofrydd Primary School will ensure that all learners are supported to participate in trips and visits, structured and unstructured social activities, such as during

breaks, breakfast club, productions, after-hours clubs and residential visits. Dietary requirements of learners with healthcare needs are considered as necessary. Risk assessments and accessibility plans are in place for all learners as appropriate.

(See Equalities Act 2010 and School's Individual Strategic Equality Plan)

(See the Equality Act 2010 (Statutory Duties) (Wales) Regulations 2011 S.I.2011/1064). gov.wales/topics/people-and-communities/equality-diversity

Information Sharing

Sofrydd Primary School will ensure that all information is kept up to date and there is a clear information sharing protocol in place agreed / signed by parents and the learner. 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 use a noticeboard in the staff room to display information on pupils highrisk health needs, first aiders and certificates, emergency procedures, etc.
- We share information with staff about the healthcare needs of pupils on the schools secure intranet or shared drive.
- We use staff meetings to help ensure staff are aware of the healthcare needs of pupils they have or may have contact with
- If a pupil has said they feel ill, all appropriate staff are made aware; e.g. 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 any signs of
 deterioration/further illness. This could include non-teaching staff such as
 lunchtime staff or reception staff, where appropriate.
- We make healthcare needs policies easily available and accessible, online and in hard copy
- We provide the learner/parents with a copy of our information sharing policy. This should state the type of bodies and individuals with whom the learner's medical information may be shared.
- We ask parents to sign a consent form which clearly details the bodies, individuals and methods through which their learner's medical information will be shared. Sharing medical information can be a sensitive issue and the learner should be involved in any decisions. Education settings should keep a list of what information has been shared with whom and why, for the learner/parent to view on request

Procedures and record keeping

Sofrydd Primary School collects and maintains the following as appropriate:

Contact details for emergency services

- Parental agreement for educational setting to administer medicine (Appendix 2) and request for learner to administer own medicine
- Record of medicine stored for and administered to an individual learner(Appendix 5)
- Staff training record administration of medicines (Appendix 6)
- Storage and access and administration of medication

Information can be found in the Appendices

Storage, access and administration

All medicines are stored securely and safely. Sofrydd Primary School does not store surplus medication. Medicines should be in their original dispensed container, labelled with the name of the learner, medicine name, dosage and frequency, and expiry date. Sofrydd Primary School only accepts prescribed medicines and devices and will only administer medications that are prescribed to take four or more times a day. Over the counter medication will not be administered. Administration of medication for any learners requires parental consent (appendix 2).

Emergency procedures

All staff including temporary staff are aware of medical conditions and understand their duty in an emergency. This I outlined on our Medical Emergency Forms (appendix 1)

Where a learner has an IHP, this will clearly define what constitutes an emergency and explain what to do. Staff should be made aware of emergency symptoms and procedures. Where there is no IHP or where there is no diagnosis regular first aid will be administered.

All staff know what action to take in an emergency and receive updates as Health Care Plans change. If a learner 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.

Training

Training provided will ensure staff are competent, have confidence in their ability to support learners and fulfil IHP. We keep a training log to ensure we are up to date with all requirements.

Qualifications and assessments

- Teachers are expected to use their professional judgement to support learners with healthcare needs.
- We recognise that effective liaison is imperative when learners with healthcare needs are approaching assessments, including those undertaking examinations in hospital or at home. The coursework element may help learners to keep up with their peers. (The home and hospital)

teachers may be able to arrange for concentration on this element to minimise the loss of learning while they are unable to attend.) Liaison between the school and the hospital teacher or home teacher is important, especially where the learner 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. (Awarding bodies may make special arrangements for learners 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. They will have to be 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 learners 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 learners. Guidance is provided in the current National Reading and Numeracy Tests — Test administration handbook and at:

www.jcq.org.uk/exams-office/access-arrangements-and-special-consideration/regulations-and-guidance/access-arrangements-and-reasonable-adjustments-2016-2017

<u>www.jcq.org.uk/exams-office/access-arrangements-and-special-consideration/regulations-and-guidance/a-guide-to-the-special-consideration-process-2016-2017</u>

<u>www.jcq.org.uk/exams-office/access-arrangements-and-special-consideration</u>

EOTAS

• In the case of a short absence from school (less than 15 days), we will provide work to be completed at home, if the pupils condition permits, and will support the pupil to catch up on their return.

In the eventuality that a pupil is absent for more than 15 days (consecutive
or cumulative) we will work with the local authority to ensure the needs of
the pupil are met.

Integration

At Sofrydd Primary 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 us. We will work with the parent/carer and the hospital to manage the pupils return. We will work with the local authority to follow up with the pupil after reintegration

Monitoring and review

All policies arrangements, and procedures are reviewed regularly. This will be annually or more often where there are changes to the medical condition. IHPs are reviewed in line with the healthcare need and relevant medial guidance.

Complaints

Complaints can be made in line with the schools policy and details can be found on **our school web-site**

Unacceptable practice

We will ensure that staff are made aware of this by bringing the policy to the attention of all staff and Governors on a regular basis.

(Please see the 'Unacceptable Practice' section in the Welsh Government's 'Supporting Learners with Healthcare Needs' statutory guidance:

http://learning.gov.wales/resources/browse-all/supporting-learners-with-healthcare-needs/?lang=en) Additional Guidance is available in the Welsh Government publication as above

Policy agreed on	
Signed: Head teacher	
Signed: Chair of Governors	
Review Date	

Appendix 1: Click here for document







INSERT CHILD'S NAME

INSERT CHILD'S PHOTO

BRIEF OVERVIEW OF CONDITION

WHAT TO DO IN AN EMERGENCY

EMERGENCY CONTACT DETAILS



APPENDIX 2:Click here for document

PARENT/CARER CONSENT FOR SCHOOL TO ADMINISTER MEDICATION TO A PUPIL

- Our school **will not give** your child medication unless you complete and sign this form.
- 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.
- Medication should be administered at home wherever possible. However we understand there will be instances where this is not appropriate.
- Parents/carers will be informed as stated in the school policy 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.

• Medication must be sent into school in a clear, sealable plastic tub with your child's name clearly written on the front and a description of dosage and times.

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Name of child	
Date of birth	
Class / form	
Healthcare need	
Routine or emergency medication	
Medicine	
Note: medication must be in the origin	al container if dispensed by the pharmacy.
Name, type and strength of medicine (as described on the container)	
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	Yes / No	(please circle	<u>-)</u>
medication under supervision from a	103 / 110	If yes, pupil n	•
stored location		declaration*	<u> </u>
Pupil to carry and self-administer	Yes / No	(please circle	e)
medication ,		if yes, pupil n	•
		declaration*	
Procedures to take in an emergency			
Agreed review date			
Name of member of staff responsible			
for the review			
INDIVIDUAL HEALTHCARE PLANS (IHP)			
Healthcare Plan from health professional attached if appropriate	Yes / No	(please circle	e)
IHP created by school attached if	Yes / No	(please circle	
appropriate (appendix 3)	103/110	(Picase circle	~1
Guidelines provided by health	Yes / No	(please circle	5)
attached if appropriate e.g. patient	. 53 / 140	(Picaso circit	~1
information sheet			
Review date of the above			
Contact details	Contact 1		Contact 2
Name			
Daytime telephone number			
Relationship to the child			
	<u> </u>		

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.	Yes / No	(please circ	cle)
Do you consent to this information being shared?			
 I have read and agree to the the school policy. I understand my p Government guidelines (http://learnlearners-with-healthcare-needs/?skip The above information is, to the of writing and I give consent to school accordance with the information give I will inform school of any new to my child, e.g. if there are any chall will ensure that this is in writing from the school and collect expired or une. Where correct medication is reschool until said medication is provided at risk, the head teacher has school until said medication is provided labelled. I consent for the information in professionals/emergency care. If my child has received any expressions the head teacher/delegated starts. 	arental/car ing.gov.wal ing.gov.wal ing.gov.wal ing.gov.wal ing.gov.wal ing.gov.wal ing.gov.wal ing.gov.wal ing.gov.gov.gov.gov.gov.gov.gov.gov.gov.go	er obligations es/resources/en). by knowledge dminister the land the school from health age or freque rofessional. Explenish the restion. by a vailable on a conference of the school from the restion of the refuse to a conference of the school from the restion of the refuse to a conference of the school from the sch	s under the Welsh /browse-all/supporting- e, accurate at the time medicine in ol policy. professionals in regard ency or if it is stopped. I medication supply in a given day and places dmit my child into the ich is correctly with health prior to school, I will
Parent/carer signature:			
Date:			
I would like my child to administer an Parent/carer signature:	id/or carry t	heir medicati	ion
Date:			
*If yes to these questions: I agree to a to administer my medication as agre Pupil signature:		•	•
Date:			

<u>Individual Healthcare Plan</u>

NAME

1. PUPIL INFORMATION

1.1 Pupil details

Pupil's name:	
Date of birth:	
Year group:	
Nursery/School/College:	
Address:	
Town:	
Postcode:	
Medical condition(s):	
Give a brief description of the medical condition(s) including description of signs, symptoms, triggers, behaviours.	
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' l	health needs	1	
	Name		Cont	act 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	school to d		dicatio	agreement for on form (appendix

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.	Yes / No	(please circle)
Do you consent to this information being shared?		
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	ON AND MEDICATION	N ON PUPIL'S LEARNING
(Impact statement to be jointly	y produced by healt	h professional and a teacher)
How does the pupil's medical condition or treatment affect learning?		
i.e. memory, processing speed, coordination etc.		
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 T	IMES
	Time	Note
Arrive at school	Time	Note
Arrive at school Morning break	Time	Note
	Time	Note
Morning break	Time	Note
Morning break Lunch	Time	Note
Morning break Lunch Afternoon break	Time	Note
Morning break Lunch Afternoon break School finish	Time	Note
Morning break Lunch Afternoon break School finish After school club (if applicable) Other Please refer to home-school Please refer to school plan	pol communication o	
Morning break Lunch Afternoon break School finish After school club (if applicable) Other Please refer to home-school	pol communication o	

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	
When does it need to take place?	
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 everall responsibility for the	
Who will take overall responsibility for the pupil on the trip?	
pupil on the trip?	
9. SCHOOL ENVIRONMENT Can the school environment affect the	
9. SCHOOL ENVIRONMENT Can the school environment affect the pupil's medical condition? How does the school environment affect	

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.

not count towards a pupil's attendance re	ecora.
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 Governing bodies are responsible for maki training to look after a pupil with regard to adaptive technologies. School staff should training sessions it is agreed they need.	healthcare administration, aids and
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 t	heir IHP, please	refer to the	schools
intimate care policy.				

plac	at arrangements have been put in ce in relation to any personal care eds across the school day?	
14. P	PLEASE USE THIS SECTION FOR ANY ADDIT	IONAL INFORMATION FOR THE PUPIL.
We s	suggest the following are stored togethe	r:
	IHP from health	
	Medication consent form (if applicat	ole)
	Statement of SEN/ ALN IDP /individuo	l education plan
	One page profile	
	Risk assessment	

15. SIGNATURES

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

Appendix 3:

Specific Guidance

Model Individual Healthcare Plan (IHP)

Purpose of an IHP

- IHPs set out what support is required by a learner. They do not need to be long or complicated.
- Our school will ensure our healthcare needs policy include information on who has overall 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.
- However, not all learners 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 the form in see **Appendix 2**.

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 learner (where appropriate), the parents and the education setting.

However, when a learner has continual or episodic healthcare needs, then an IHP may be required. If these needs are complex and the learner is changing settings, then preparation should start early to help ensure the IHP is in place at the start of the new term.

Links to IHP templates for specific medical conditions:

- http://medicalconditionsatschool.org.uk/
- Many third sector organisations have produced condition-specific template IHPs that could be used e.g. Asthma UK https://www.asthma.org.uk/advice/child/manage/action-plan/ or Diabetes UK https://www.diabetes.org.uk/Guide-to-diabetes/Your-child-and-diabetes/Schools/IHP-a-childs-individual-healthcare-plan/

- Where a pupil has an additional educational need (ALN) the IHP will be linked or attached to any Statement of ALN/ individual education plan/individual development plan or learning and skills plan (post 16).
- Many third sector organisations have produced condition-specific template IHPs that could be used e.g. Asthma UK https://www.asthma.org.uk/advice/child/manage/action-plan/ or Diabetes UK https://www.diabetes.org.uk/Guide-to-diabetes/Your-child-and-diabetes/Schools/IHP-a-childs-individual-healthcare-plan/
- Where a pupil has an additional educational need (ALN) the IHP will be linked or attached to any Statement of ALN/ individual education plan/individual development plan or learning and skills plan (post 16).
- A personal evacuation plan and risk assessment may also be attached
- The governing body will ensure that all IHPs are reviewed at least annually or more frequently should the IHP state otherwise or should there be new evidence that the needs of the pupil have changed.
- Our Governing body will ensure that healthcare needs arrangements, both wider education settings' policies and IHPs, are supported by clear communication with staff, parents and other key stakeholders to ensure full implementation. It is essential that all information is kept up to date. All information-sharing techniques such as staff noticeboards and school intranets must be agreed by the learner and parent in advance of being used, to protect confidentiality.
- We are compliant in line with the Data Protection Act 1998 and the WASPI Information Sharing Policy (www.waspi.org
- Our managing healthcare needs policy and the information sharing policy is made available to parents/carers via insert details here e.g. website, regular letters to parents/carers, web link in an IHP.

APPENDIX 4:

The following diagram (figure 1) outlines the process for identifying whether an IHP is needed

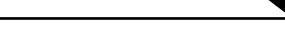
Identify learners with healthcare needs

- Learner is identified from enrolment form or other route.*
- Parent or learner 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

J

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 learner and appropriate clinicians to determine if the learner'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 complaints procedure.



If an IHP should be made

- The education setting, under the guidance of the appropriate healthcare professionals, parents and the learner, should develop the IHP in partnership.
- The education setting should identify appropriate staff to support the learner, 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.

APPENDIX 5:

Good practice suggests that this form should be contained in a bound and numbered book to avoid a threat of tampering.

Good practice suggests that only one form is used per child in case a parent/carer wishes to see it.

APPENDIX 5 -RECORD OF MEDICATION ADMINISTERED TO A PUPIL

Name:	Class:
Amount of controlled drugs received:	Date:
Amount of controlled drugs handed ba	ck to parent/carer:
Signature <u>:</u>	Date:

CHECKS: a) Check consent form first; b) Medication must be in its original container with the label attached; c) If prescribed, it must have been dispensed by a pharmacist; d) Must have the expiry date and be in date; e) Must have the name of the child; f) Must have the name of the drug; g) Must have the dosage size and frequency; h) The medication has been stored according to the storage instructions; i) How much medication is left; j) Check the maximum dosage; k) Check the amount and time of any prior dosage administered. If there is a problem, contact head teacher/delegated person and then parent/carer.

ne	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

Appendix 6

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 me above and is competent to carry administration of medication.	ember(s) have received the training detailed out any necessary treatment /
Trainer's signature:	
Date:	
I confirm that I have received the	e training detailed above.
Staff signature:	
Date:	
Suggested review date:	