ST MONICA'S CATHOLIC PRIMARY SCHOOL

Supporting pupils with medical needs



'Strive to succeed in the presence of God'

Together – as a Catholic community

Everyone - children, staff, parents, carers and parish

Achieves – in their unique way and tries to be

More - like Jesus

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1. Purpose

The purpose of the policy for supporting pupils at school with medical conditions is to ensure that:

- Pupils, staff and parents understand how our school will support pupils with medical conditions
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities

The Governing Body will implement the policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupil's condition, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- Ensuring that supply teachers are provided with appropriate information about the policy and relevant pupils
- Developing and monitoring individual healthcare plans (IHPs)

This policy meets the school's statutory requirements under section 100 of the <u>Children and Families Act 2014</u> which places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions.

This Policy pays due regard to the Department for Education's statutory guidance <u>Supporting</u> pupils at school with medical conditions.

2. Roles & Responsibilities

2.1 The Governing Board

The Governing Board must make arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed and implemented. They should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.

2.2 The Headteacher

The Headteacher will 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. The Headteacher will ensure that all staff who need to know are aware of the child's condition, 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. This may involve recruiting a member of staff for this purpose.

The Headteacher has overall responsibility for the development of individual healthcare plans, will make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way. The Headteacher will ensure that contact is made with Enfield health care professionals (HCP) in cases where further guidance to support the management of the pupil's health need is required. This may include signposting to other HCP or organisations.

2.3 Parents

Parents will 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 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, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times. Where a child is identified as having complex health needs which may require additional staff funding, or the management of more specialised equipment please consult the NCC Guidance for managing Children and Young People with complex medical care needs in educational settings.

Please note that parents/carers should keep their children at home if acutely unwell or infectious.

Parents are responsible for providing the Headteacher with comprehensive information regarding their child's condition and/or medication requirements.

Prescribed medication will not be accepted in school without complete written and signed instructions from the parent.

Only reasonable quantities of medication should be supplied to the school for the administration by staff (for example, a maximum of four weeks supply at any one time). Where the pupil travels on school transport with passenger assistants, parents should ensure they have written instructions relating to any medication sent with the pupil, including medication for administration/self-administration during respite care.

It is the parents' responsibility to renew the medication when supplies are running low and to ensure that the medication supplied is within its expiry date.

For staff administration - each item of medication must be delivered to the Headteacher or Authorised Person, in normal circumstances by the parent, in a secure and labelled container as originally dispensed. Each item of medication must be clearly labelled with the following information:

- Pupil's Name
- Name of medication
- Dosage
- Frequency of administration
- Date of dispensing
- Storage requirements (if important)
- Expiry date

2.4 Pupils

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.

2.5 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 take into account 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.

Staff must not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect requirements within individual healthcare plans).

2.6 Other Healthcare Professionals

Other healthcare professionals, including GPs, paediatricians and mental health professionals, may communicate with schools when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing individual healthcare plans. Specialist local health teams may be able to provide support in schools for children with particular conditions (e.g. asthma, diabetes, epilepsy).

3. Staff Training & Support

Any member of school staff providing support to a pupil with medical needs should have received suitable training.

This should include references to staff training on:

- the development or review of individual healthcare plans [IHPs]
- an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures
- whole-school awareness training so that all staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing that policy
- relevant healthcare professional should be able to advise on training that will help ensure that all medical conditions affecting pupils in the school are understood fully.
 This includes preventative and emergency measures so that staff can recognise and act quickly when a problem occurs
- Training for specific conditions may be available via external websites for example: www.asthma.org.uk www.anaphylaxis.org.uk www.epilepsy.org.uk

4. Responsibility of school

Staff will not give a non-prescribed medicine to a pupil unless there is specific prior written permission from the parents.

The school will not accept items of medication in unlabelled containers.

Medication will be kept in a secure place, out of the reach of pupils. Unless otherwise indicated all medication to be administered in school will be kept in a lockable medicine cabinet. (NB EpiPen's and inhalers are not locked – for ease of access, but kept out of reach of children)

The school will keep records, which they will have available for parents.

If the pupil refuses to take their medication, staff will not force them to do so, and will inform the parents of the refusal, as a matter of urgency, on the same day.

In this situation the medication record should note the refusal and the parental contact made.

If a refusal to take medicines results in an emergency, the school's emergency procedures will be followed.

It is the responsibility of parents to notify the school in writing if the pupil's need for medication has ceased.

The school will not make changes to dosages on verbal parental instructions.

Staff will not dispose of medicines. Medicines, which are in use and in date, should be collected by the parent at the end of each term. Date expired medicines or those no longer required for treatment will be returned immediately to the parent for transfer to a community pharmacist for safe disposal.

For each pupil with a long-term or complex medical condition, the Headteacher, will ensure that an Individual Healthcare Plan (IHCP) is drawn up, in conjunction with the pupil's parents and appropriate health professionals.

Some pupils with a medical condition will also require the administration of medicines. The Headteacher will therefore ensure that all appropriate consent forms are completed and appropriate review periods set.

The school will make every effort to liaise with a school nursing service to ensure that pupils with medical conditions are supported.

Where it is appropriate to do so, pupils will be encouraged to administer their own medication, if necessary under staff supervision. Parents will be asked to confirm in writing if they wish their child to carry their medication with them in school.

Staff who assist in the administration of medication will be able to receive appropriate training/guidance through arrangements made with the School Nursing Service.

The school will make every effort to continue the administration of medication whilst on trips away from the premises, even if additional arrangements might be required. However, there may be occasions when it may not be possible to include a pupil on a school trip if appropriate supervision cannot be guaranteed.

All staff will be made aware of the procedures to be followed in the event of an emergency.

5. Record Keeping

Governing bodies will ensure that written records are kept of all medicines administered to children – including medication refusals or errors.

6. Individual Healthcare Plans

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to Dawn Roper, Assistant Headteacher for Inclusion and Romona Elliott Welfare Assistant.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed. Special consideration needs to be given to reviewing the plan when a young person is transitioning to a different setting or reintegrating back into school after a period of absence.

Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the school and parents/carers with advice from a relevant healthcare professional, such as a member of the HCP team, a specialist nurse, allied health professional or paediatrician who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate. If healthcare professionals cannot offer advice in person they may provide written guidance or information.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has SEN but does not have a statement or EHC plan, the SEN will be mentioned in the IHP. The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing board, the Headteacher and Assistant Headteacher for Inclusion who has responsibility for developing IHPs, will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions

- The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- Who in the school needs to be aware of the pupil's condition and the support required
- Who outside the school needs to be aware of the pupil's condition and the support required (with appropriate consent from the young person and family) – for example school transport provided by local authority
- Arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments. Please consider large or split school sites
- Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency (including medication administration errors), including who to contact, and contingency arrangements

7. Emergency Procedures

Governing bodies should ensure that the school's policy sets out what should happen in an emergency situation.

As part of general risk management processes, all schools should have arrangements in place for dealing with emergencies for all school activities wherever they take place, including on school trips within and outside the UK. Where a child has an individual healthcare plan, this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other pupils in the school should know what to do in general terms, such as informing a teacher immediately if they think help is needed. If a child needs to be taken to hospital, staff should stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance. Schools need to ensure they understand the local emergency services' cover arrangements and that the correct information is provided for navigation systems. It is important to ensure emergency treatments (for example asthma inhalers/adrenaline auto injectors) are always available – this may include consideration of when pupils are off-site but also accessing multiple areas across a large school site for different parts of their curriculum.

Example templates for managing medication, IHP's and contacting emergency services are included in Supporting pupils at school with medical conditions.

8. Equal Opportunities

The Governing Board will ensure that the school enables pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

The school acknowledges the <u>Equalities Act 2010 and schools</u> and works proactively to support all its pupils.

9. Unacceptable Practice

Although school staff are encouraged to use their professional discretion and judge each case on its merits with reference to the child's individual healthcare plan, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged)
- send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans
- if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- penalise children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child

10. Attendance

A child or young person with a medical condition may have difficulties attending school at certain times. This could be due to planned appointments or surgery, or as a result of an increase in symptoms or deterioration of their overall health condition. Parents have a responsibility to advise schools of any planned appointments or predicted absence due to surgery/therapeutic intervention. Schools have a responsibility to code this absence appropriately. If a school does not have sufficient information regarding a young persons' health condition, and it is impacting on school attendance, they may contact the school EWO or request a school nurse attendance health check.

11. Liability & Indemnity

The Governing Board will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.

12. Complaints

The Governing Board will ensure that the school's policy sets out how complaints concerning the support provided to pupils with medical conditions may be made and will be handled.

Appendix A1: model letter inviting parents to contribute to 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/is available on the school's website of the school's policy for supporting pupils at school 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 the pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we 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, and the level of detail within plans will depend on the complexity of their 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 xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely

Appendix B1: checklist – developing an IHCP

Ens	ure your IHCP template	Curr	rent situation	task	completed
includes: yes			in development	delegated to	·
NB: You should ensure that plans are reviewed at least annually or earlier if evidence is presented that the					
pup	il's needs have changed. T	hey sh	nould be developed w	ith the pupil's b	est interests in mind and ensure
that	the school assesses and r	manag	es risks to the pupil's	education, hea	Ith and social well-being and
min	imises disruption				
•	the individual pupils				
	medical condition, its;				
•	triggers,				
•	signs,				
•	symptoms and				
•	treatments				
•	the pupil's resulting				
	needs, including;				
•	medication (dose, side-				
	effects and storage)				
•	other treatments,				
•	time,				
•	facilities,				
•	equipment,				
•	testing,				
•	access to food and drink				
	where this is used to				
	manage their condition,				
•	dietary requirements				
	and environmental				
	issues e.g. crowded				
	corridors, travel time				
	between lessons				
•	specific support for the				
	pupil's educational,				
	social and emotional				
	needs – for example;				
•	how absences will be				
	managed,				
•	requirements for extra				
	time to complete exams,				
•	use of rest periods or				
	additional support in				
	catching up with				
	lessons,				
•	counselling sessions				
•	the level of support				
	needed, (some pupils				
	will be able to take				
	responsibility for their				
	own health needs).				
•	where a pupil is self-				
	managing their				
	medication, this should				
	be clearly stated with				
	appropriate				
	arrangements for				
	monitoring				
•	the staff who will				
1	provide this support –				
	while identifying:				

•	their training needs				
•	expectations of their role				
	and confirmation of				
•	proficiency to provide				
	support for the pupils				
	medical condition from a				
	healthcare professional				
•	cover arrangements for				
	when they are				
	unavailable				
•	who in the school needs				
	to be aware of the pupils				
	condition and the				
	support required				
Co	nsent procedures;				
•	arrangements for written				
	permission from parents				
	and the headteacher for				
	medication to be				
	administered by a				
	member of staff,				
•	or self-administered by				
	the pupil during school				
	hours				
	NB: suggested				
	templates are provided				
	later in this document				
•	that separate				
	arrangements or				
	procedures been made				
	for school trips or other				
	school activities outside				
	of the normal school				
1	timetable that will				
1	ensure that pupils can				
	participate, e.g. risk				
	assessments				
Co	nfidentiality;				
•	how will the parent/pupil				
	know who they can go				
	to if they need to raise				
1	confidentiality issues				
•	does the plan confirm				
	what to do in an				
	emergency, including				
	whom to contact, and				
	contingency				
	arrangements				
	arrangomonto]	l	1	

Name of school/setting	
Pupil's name	
Group/class/form	
Date of birth	
Pupils address	
Medical diagnosis or condition	
Date	
Bate Review date	
Review date	
Family Contact Information	
Name	
Phone no. (work)	
(home)	
(mobile)	
Relationship to pupil	
Name	
Relationship to pupil	
Phone no. (work)	
(home)	
(mobile)	
Clinic/Hospital Contact	
Name	
Phone no.	
G.P.	
Name	
Phone no.	
Who is responsible for providing support in school	
escribe medical needs and give details of th evices, environmental issues etc	ne pupil's symptoms, triggers, signs, treatments, facilities, equipment

Daily care requirements
Specific support for the pupil's educational, social and emotional needs
Arrangements for school visits/trips etc
Other information
Describe what constitutes an emergency, and the action to take if this occurs
Who is responsible in an emergency (state if different for off-site activities)
Plan developed with
Staff training needed/undertaken – who, what, when
Form copied to

Appendix C1: Parental agreement for school to administer medicine
The school will not give your child medicine unless you complete and sign this form in line with school policy which can be found on our website https://www.st-monicas.enfield.sch.uk/parents/forms/

Date completed:	Completed by: (member of staff)
Date for review:	To be initiated by: (member of staff)
Name of school	
Name of pupil	
Date of birth	
Group/class/form	
Medical condition or illness	
Does the pupil require or already have an IHCP	Yes No
Medicine	
Name/type of medicine (as described on the container)	
Expiry Date	
Dosage and method	
Timing	
Length of course	
Date of dispensing	
Storage instructions	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	NB: If YES to this question then form C2 should be completed instead
Procedures to take in an emergency	
Name and phone number of G.P:	
NB: Medicines must be in the original container	as dispensed by the pharmacy
Contact Details of Parent/Carer:	
Name	
Daytime telephone no.	
Relationship to pupil	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff]
	e, accurate at the time of writing and I give consent to school school policy. I will inform the school immediately, in writing, if edication or if the medicine is stopped.
Signature(s) Dat	te
Print Name:	

Appendix C2: parental agreement for pupil to **self-administer** medicine The school will not allow your child to self-administer medicine unless you complete and sign this form in line with

school policy which can be found on our website

concer pency willow can be really on ear weber	
Date completed:	Completed by: [member of staff]
Date for review:	To be initiated by: [member of staff]
Name of school	
Name of pupil	
Date of birth	
Group/class/form	
Medical condition or illness	
Does the pupil require or already have an IHCP	Yes No
Self-administered Medicine	
Name/type of medicine (as described on the container)	
Expiry date	
Dosage and method	
Timing	
Length of course	
Date of dispensing	
Storage instructions	
Special precautions/other instructions	
Are there any side effects that the school needs to know about?	
Requires consent to carry around with them	
Does the self-medication need to be administered with a member of staff present	
Procedures to take in an emergency	
Name and phone number of G.P:	

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

Contact Details of Parent/Carer:		
Name		
Daytime telephone no.		
Relationship to pupil		
Address		

I understand that I am requesting that my child self-administers their own medication	[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent for my child to self-administer their medication.

Delete as required:

- 1. I will inform the school immediately, in writing, if there is (a) any change in dosage or frequency of the medication or (b) if the medicine is stopped and my child no longer needs to self-administer.
- 2. This is a short course of medication but I will inform the school in writing, (a) if there is any change in dosage or frequency of the medication or (b) if the medicine has to be continued after:

Date:	
Signature(s)	Date
Print Name	

Appendix C3: confirmation of the Headteachers agreement for either a member of staff to administer medicine or for the pupil to self-administer their medication

Name of School:	
It is agreed thatadminister	[name of pupil] will receive / may self
[quan	tity and name of medicine] every day at
[time medici Lunchtime - afternoon break – as required].	ne to be administered/self-administered e.g.
[name of pupil] will	be given/supervised whilst he/she takes
their medication by	[name of member of staff].
This arrangement will continue untilmedicine or until instructed by parents].	[either end date of course of
Date:	
Signed:	
[The Headteacher/ /Named Member of Staf	ff]

Appendix D1: record of medicine administered to an individual pupil

Name of school	
Name of pupil	
Date medicine provided by parent	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	
Staff signature	Date
Signature of parent	
(Template D1 continued over page)	

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Appendix D1: record of medicine administered to an individual pupil (continued)

Name of child		 Date of Birth
	Class	 _
		_
Date		
Time given		
Dose given		
Name of staff member		
Staff initials		
Medication		 _
Date		
Time given		
Dose given		
Name of staff member		
Staff initials		
Medication		_
Date		
Time given		
Dose given		
Name of staff member		
Staff initials		

Appendix D2: record of medicine administered to all pupils

Name of school:

St Monica's Catholic Primary School, N14 7HE

Date	Pupil's name	Time	Name of medicine	Dose given	Any reactions	Signature of staff	Print staff name

Appendix D3: staff training record – administration of medicines

Name of school		
Staff member's name		
Type of training received		
Date of training completed		
Review/training up-date		
Training provided by		
Profession and title		
	f] has received the training detailed above and is of recommend that the training is updated [date rec	
Trainer's signature		
Date		
I confirm that I have received the tra	nining detailed above.	
Staff signature		
Date		
Suggested review date		

Appendix E1: 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. your telephone number
- 2. your name
- 3. your location as follows [insert school/setting address]
- 4. state what the postcode is please note that postcodes for satellite navigation systems may differ from the postal code
- 5. provide the exact location of the patient within the school setting
- 6. provide the name of the pupil 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 the patient
- 8. put a completed copy of this form by medical room phone

Appendix E2: other contacts

Local Contacts

Council's Insurance Service

Contact: Kay Osborne Tel: 020 8379 1476

Email: Kay.osborne@enfield.gov.uk

Health Services

Community Paediatric Services:

Some children with medical needs receive dedicated support from specialist nurses or community children's nurses, for instance a children's oncology nurse. These nurses often work as part of a NHS Trust or PCT and work closely with the primary health care team – general description – what happens in Enfield. They can provide advice on the medical needs of an individual child, particularly when a medical condition has just been diagnosed and the child is adjusting to new routines.

Contact:

Paediatric Nursing Service Cedar House

St.Michael's Gater Drive

Enfield EN2 0JB

Tel: 020 8702 5620

School Nurses:

School nurses are qualified public health nurses, who work in partnership with schools, parents and healthcare professionals to provide health promotion and protection for school aged children. The school nurse can advise, or will know where help can be sought on many health matters. Enfield School Nursing Service is accessible through self-referral from children or families, referral from education staff, social services, LAC Nurse Specialist, Child Protection Named Nurse, medical colleagues and Health Visitors

Contact: Kathy Soderquist

Divisional Manager

Universal Children's Service

Cedar House

St Michael's Hospital

Gater Drive

Enfield

EN2 0JB

Tel: 02083758783

Local Community Health Centres:

Bowes Road Clinic 269 Bowes Road, Enfield, N11 1BD

Evergreen Health Centre 1 Smythe Close, Edmonton, N9 0TW

Forest Primary Care Centre, 308A Hertford Road, Edmonton, N9 7HD

Highlands Health Centre, 3 Florey Square, Winchmore Hill, N21 1UJ

Moorfield Road Health Centre Moorfield Road, Enfield, EN3 5PS

St Michael's Primary Care Centre Gater Drive, Enfield, EN2 0JB

School Health and Safety:

Contact: Paul Bishop

Schools Health and Safety Manager

Tel: 020 8379 4731 **Mobile:** 07939995806

Email: paul.bishop@enfield.gov.uk

Joint Service for Disabled Children:

The Joint Service for Disabled Children is an important partnership developed by Enfield's Children's Trust, to support and promote opportunities for all disabled children and their families in Enfield.

The Joint Service includes:

- Enfield Community Services
- The Early Intervention Support Service (EISS)
- Cheviots Specialist Children's Disability Centre/Service.

Environmental Health:

Address: PO Box 57

Civic Centre Silver Street Enfield EN1 3XH

Tel: 020 8379 1000

National Contacts:

Allergy UK	The Anaphylaxis Campaign
Allergy Help Line: (01322) 619898	Helpline: (01252) 542029
Website: www.allergyuk.org	Websites: www.anaphylaxis.org.uk
Asthma UK	SHINE
Adviceline: 0800 121 6244	Tel: Tel: 01733 555988
Website: www.asthma.org.uk	Website: http://www.shinecharity.org.uk/
Council for Disabled Children	Contact a Family
Tel: 0207 843 1900	Helpline: 0808 808 3555
Website:	Website: www.cafamily.org.uk
http://www.councilfordisabledchildren.org.uk/	
Cystic Fibrosis Trust	Diabetes UK
Tel: 0300 373 1000	Careline: 0345 123 2399
Website: www.cysticfibrosis.org.uk	Website: www.diabetes.org.uk
Public Health England	Department for Education
https://www.gov.uk/government/organisati	Website:
ons/public-health-england	https://www.gov.uk/government/organisations/de
	partment-for-education
Epilepsy Action	Equalities and Human Rights Commission
Freephone Helpline: 0808 800 5050	EHRC
Website: www.epilepsy.org.uk	helpline: 08457 622633
	Textphone: 08457 622 644 Website: https://www.equalityhumanrights.com/
	website. https://www.equalitynumaringhts.com/
Health and Safety Executive (HSE)	Health Education Trust
Website: www.hse.gov.uk	Tel: (01789) 773915
	Website: https://healtheducationtrust.org.uk/
Hyperactive Children's Support	Mencap
Group	Telephone: 0300 333 1111
Tel: (01243) 539966	Website: www.mencap.org.uk
Website: www.hacsg.org.uk	
National Eczema Society	Psoriasis Association
Helpline: 0800 089 1122	Tel: 0845 676 0076
Website: https://eczema.org/	Website: www.psoriasis-association.org.uk/
British Thyroid Foundation	Sickle Cell Society
www.btf-thyroid.org	http://sicklecellsociety.org/
NHS Choices	<u> </u>
http://www.nhs.uk/Pages/HomePage.aspx	