



## SUPPORTING STUDENTS WITH MEDICAL NEEDS POLICY

<b>Status</b>	<b>Statutory</b>	<b>Date created</b>	<b>December 2015</b>
<b>Any other statutory names for this policy (where applicable)</b>		<b>Date first approved</b>	<b>January 2016</b>
<b>Responsibility for this policy (job title)</b>	<b>Deputy Headteacher</b>	<b>Date last reviewed</b>	
<b>Governors' Committee with responsibility for its review</b>	<b>Teaching and Learning Committee</b>	<b>Frequency of review</b>	<b>Every three years</b>
<b>Tick here if Bucks Policy attached in its entirety</b>		<b>To be put on the school website? (Yes/No)</b>	<b>Yes</b>
<b>Approval necessary</b>	<b>Full Governing Body</b>		

### 1 INTRODUCTION

- The Governing Body of Aylesbury High School will ensure that all students with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life. To help achieve this, the school has adopted the Department for Education policy on “Supporting Students at School with Medical Conditions”, which was issued under Section 100 of the Children's and Families Act 2014.
- The aim of this policy is to ensure that the parents of young people with medical conditions feel confident that the school will provide effective support and that students feel safe and reach their full potential.
- Some young people with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. The school will comply with their duties under the Act to make reasonable adjustments to support students with disabilities.
- Some young people with medical conditions may also have special educational needs (SEN) and may have an Education, Health and Care (EHC) Plan which brings together health and social care needs as well as the provision for their special educational needs. Where the young person has a special educational need identified in a statement or EHC plan, the individual Healthcare Plan will be linked to or become part of that statement or EHC plan. The Healthcare Plan will be developed with the student's best interests in mind to ensure that the risks to her education, health and social well-being are managed, and minimises disruption, for young people with medical conditions.

- Supporting a young person with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with parents, students, healthcare professionals (and, where appropriate, social care professionals) and local authorities to ensure that needs of students with medical conditions are met effectively.

## **2 ROLES AND RESPONSIBILITIES**

**2.1** The Governing Body for Aylesbury High School will ensure that students with medical conditions are:

- Properly supported.
- Able to play a full and active role in school life.
- Able to remain healthy and achieve their academic potential.

The Governors will also ensure that:

- Staff are properly trained to provide the support that students need.
- In line with their safeguarding duties, a student's health is not put at unnecessary risk from, e.g. infectious diseases.
- In these circumstances, they do not have to accept a student at a time where it would be detrimental to her health or that of others to do so.

**2.2** The Deputy Headteacher will have overall responsibility for the implementation of this policy and will ensure that:

- All staff are aware of this policy and understand their role in its implementation.
- All staff including supply staff who support students with medical needs, receive sufficient information to provide appropriate support.
- Individual Healthcare Plans are developed, monitored and reviewed annually or earlier if evidence is presented that the student's needs have changed. Where appropriate, Healthcare Plans will be reviewed at the student's Annual Review.
- Sufficient staff are suitably trained and achieve the necessary level of competency before they take on responsibility to support young people with medical conditions.
- Sufficient numbers of trained staff are available to support all individual Healthcare Plans to cover staff absence, contingency and emergency situations.
- A secure register of students in the school is kept by Matron for students who have been diagnosed with asthma and/or prescribed a reliever inhaler.

- All staff are trained to recognise the symptoms of an asthma attack (and are able to distinguish them from other conditions with similar symptoms).
- At least one emergency inhaler kit is maintained and readily available in an emergency situation, where parental permission has been received.
- Risk assessments for school visits, holidays, and other school activities outside of the normal timetable are undertaken for students with medical conditions.
- All staff are aware that medical information must be treated confidentially.
- School staff are appropriately insured and are aware that they are insured to support students in this way.

### **2.3 Appointed Person**

School Matron has been appointed to have overall responsibility for implementing the school's policy for supporting students with medical conditions. They will ensure that young people with medical conditions are appropriately supported.

### **2.4 Transitional Arrangements**

The school has made the following procedures for transitional arrangements:

- Visit the Primary School to meet the student and talk to appropriate member of staff.
- The student visits AHS for Induction Day or additional transitional meetings, as appropriate.
- Meeting with parent/carer to gain appropriate information.

### **2.5 All members of school staff may be asked to provide support to students with medical conditions, including administering medicines.**

- All members of staff should know what to do and respond accordingly if they become aware that a student with a medical condition needs help.
- Although administering medicine is not part of teacher's professional duties, teachers should take into account the needs of students with medical conditions that they teach.
- Staff must not give prescription medication or undertake healthcare procedures without appropriate training.

### **2.6 Where appropriate, students with medical conditions will be:**

- Consulted to provide information about how their condition affects them.

- 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.

**2.7** Parents have the prime responsibility for their daughter's health. Parents include any person who is not a parent of a young person but has parental responsibility for or care of that young person.

- It only requires one parent to request that medicines are administered. As a matter of practicality, this will be the parent with whom the school has day-to-day contact.
- Parents should provide the school with sufficient and up to date information about their daughter's medical needs. Parents should tell the school of any change in prescription which should be supported by either new directions on the packaging of medication or by a supporting letter from a medical professional. This information is kept in a secure place and is regularly updated.
- Parents are key partners and will be involved in the development and review of the Healthcare Plan for their daughter. A request will be sent to parents using the AHS template (see appendix A).
- Parents should provide medicines and equipment as required by the Healthcare Plan. Parents should:
  - bring their daughter's medication and any equipment into school at the beginning of the school year
  - replace the medication before the expiry date.
  - as good practice, take into school the new asthma reliever inhaler when prescribed.
  - dispose of expired items to a pharmacy for safe disposal
  - during periods of high pollen count, encourage their daughter, who has been prescribed anti-histamines, to take their medication before school so that their condition can be better controlled during the school day.
  - keep their daughter at home when they are acutely unwell.
  - ensure that they or another nominated adult are contactable at all times.

### **3 STAFF TRAINING AND SUPPORT**

- The Deputy Headteacher will ensure that all staff are aware of the school's policy for supporting students with medical conditions and their role in implementing the policy.

- Any member of staff who agrees to accept responsibility for administering prescribed medicines to a young person does so voluntarily and will have appropriate training and guidance.
- Training needs will be identified during the development or review of individual Healthcare Plans and will be reviewed annually. The family of a young person will often be key in providing relevant information to school staff about how their daughter's needs can be met, and parents will be asked for their views but will not be the sole trainer.
- Training will be provided for staff to ensure that they are competent and have confidence in their ability to support students with medical conditions and to fulfil the requirements as set out in individual Healthcare Plans. Training for new staff will be provided on induction.
- Training will be provided by appropriate healthcare professional so that staff have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative and emergency measures so that they can recognise and act quickly if a problem occurs.
- Only staff with appropriate training will give prescription medicines or undertake healthcare procedures. (A first-aid certificate does not constitute appropriate training in supporting young people with medical conditions).
- The school will ensure that at least two people have attended 'Supporting Students with Medical Conditions' training to ensure medicines are appropriately managed within the school.

#### **4 INDIVIDUAL HEALTHCARE PLANS**

A Healthcare Plan clarifies for staff, parents and the student the support that can be provided. Individual Healthcare Plans for students with medical conditions, (e.g. asthma, anaphylaxis, diabetes, epilepsy) will be drafted with parents/students and other healthcare professionals where appropriate. The plan will include:

- The medical condition, its triggers, signs, symptoms and treatments.
- The student'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 student'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 students will be able to take responsibility for their own health needs) including in emergencies. If a student is self-managing their medication, then this will be 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 student'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 student's condition and the support required.
- Arrangements for written permission from parents and the Headteacher for medication to be administered by a member of staff, or self-administered by the student 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 student can participate, e.g. risk assessments.
- Confidentiality issues which are raised by the parent/young person, the designated individuals to be entrusted with information about the young person's condition and
- What to do in an emergency, including who to contact and contingency arrangements.

Some students may have an emergency Healthcare Plan prepared by their lead clinician that could be used to inform development of their individual Healthcare Plan. Healthcare Plans will be reviewed at least annually but some may need to be reviewed more frequently. Where appropriate the Healthcare Plan will be reviewed at the student's Annual Review.

## **5 THE STUDENT'S ROLE IN MANAGING THEIR OWN MEDICAL NEEDS**

- After discussion with parents, students who are competent will be encouraged to take responsibility for managing their own medicines and procedures. Parents will be asked to sign the 'Parental Request for Student to Carry Medicine for Students with Life Threatening Conditions' form to acknowledge that their daughter is mature and responsible to manage her own medication. This information will be recorded in the Healthcare Plan.

- Parents should be aware that if their daughter holds their own medication then school staff will not be recording the doses self-administered.
- If it is not appropriate for a daughter to self-manage, then relevant staff will help to administer medicines and manage procedures for them; a record of administration will be made.
- If a student refuses to take medicine or carry out a necessary procedure, staff will not force them to do so but will contact the parents and follow the procedure agreed in the individual Healthcare Plan.
- Parents will be contacted where a student is seen to be using their asthma inhaler more frequently than usual, as this may indicate their condition is not well controlled.
- Students can carry life-saving prescribed medication, all other prescribed medication can be lodged in the medical office for quick self-administration.

## **6 MANAGING MEDICINES ON SCHOOL PREMISES**

- Students will only be given prescription or non-prescription medicines after parents have completed a consent form – (except in exceptional circumstances where the medicine has been prescribed to the daughter without the knowledge of the parents. In such cases the school will encourage the student to involve their parents while respecting their right to confidentiality).
- When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes will be used for the disposal of needles and other sharps. Medicine brought into school must be given to School Matron.
- The school will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date, but will be available inside an insulin pen or a pump, rather than in its original container.
- Parents should note the expiry date so that they can provide a new prescription as and when required.
- Medicines will only be administered at school when it would be detrimental to a young person's health or school attendance not to do so.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.

### **Short-Term Medical Needs**

Many young people will need to take medicines during the day at some time during their time in the school. This will usually be for a short period only, perhaps to finish a course of antibiotics, which will minimise the time that they need to be absent.

**Antibiotics** prescribed three times a day can be taken out of the school day. The school will support young people who have been prescribed antibiotics that need to be taken **four** times a day.

### **Controlled Drugs**

- Some medicines prescribed for students (e.g. methylphenidate, known as Ritalin) are controlled by the Misuse of Drugs Act, 1971. A student who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another student for use is an offence.
- The school will keep controlled drugs in a locked cabinet, to which only named staff have access but will ensure they are easily accessible in an emergency.
- School staff may administer a controlled drug to the student for whom it has been prescribed in accordance with the prescriber's instructions.
- A record will be kept of any doses used and the amount of the controlled drug held in school, i.e. total number of doses (tablets) provided to the school, the dose given and the number of doses remaining.
- A controlled drug, as with all medicines, will be returned to the parent when no longer required to arrange for safe disposal. If this is not possible, it will be returned to the dispensing pharmacist.
- Some students with epilepsy are prescribed rectal diazepam or buccal midazolam. See Appendix B for forms used to gain authorisation for administration from parents.

### **Non-prescription Medication**

Parents will be asked to sign a consent form confirming that the medicine has been administered without adverse effect to the daughter in the past and that they will inform the school immediately if this changes.

### **Pain Relief**

Students sometimes ask for pain relief (analgesics) at school, i.e. paracetamol tablets or liquid.

- Parents will be asked to sign a consent form confirming that the medicine has been administered without adverse effect to their daughter in the past and that they will inform the school immediately if this changes.
- The school holds a supply of paracetamol based pain relief, which will be issued to those students on request, whose parents have signed a consent form.
- The school will hold non-prescription analgesics on behalf of students on request. The medication must be brought into school in the original packaging and a consent form signed.
- The school will only administer paracetamol to those students requesting analgesics; generally non-prescription ibuprofen will not be given.
- If ibuprofen is the analgesic of choice then students/parents will be advised that a dose could be taken before school (ibuprofen is effective for six hours); if required the school will 'top up' the pain relief with paracetamol.
- A student under 16 will never be given aspirin-containing medicine unless prescribed by a doctor.
- When a student requests pain relief, staff will first check maximum dosages and when the previous dose was taken. Parents will be contacted for confirmation. If parents are unavailable, a dose will not usually be given before 12 noon.
- A record will be made of all doses given using appendix D.

## **7 RECORD KEEPING**

- The school will keep a record of all medicines administered to individual students, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school will be noted.
- A record of administration of medicine will not be recorded where the student has taken responsibility for their own medication, e.g. asthma inhalers and take their medication, as and when it is required.
- A record will be made where medication is held by the school but self-administered by the student.

## **8 SAFE STORAGE OF MEDICINES**

- Medicines will be stored strictly in accordance with product instructions - paying particular note to temperature and in the original container in which dispensed.
- Students know where their medication is stored and are able to access them immediately or where relevant, know who holds the key.

- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens are always readily available and not locked away.
- A few medicines require refrigeration. They will be kept in a clean storage container, clearly labelled, and stored in a refrigerator, which is not accessible to students.
- Medication will never be prepared ahead of time and left ready for staff to administer.
- An audit of a student's medication will be undertaken every half term disposing of any medication that is no longer required.
- It is the parent's responsibility to ensure their young person's medication remains in date. The school will not remind parents when their young person's medication is due to expire.

## **9 DISPOSAL OF MEDICINES**

- Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. The return of such medicines to parents will be recorded.
- Parents should also collect medicines held, at the end of the summer term. If parents do not collect all medicines, they will be taken to a local pharmacy for safe disposal.
- Sharp boxes will always be used for the disposal of needles.

## **10 HYGIENE AND INFECTION CONTROL**

All staff should be familiar with normal precautions for avoiding infection and follow basic hygiene procedures. See Appendix E.

## **11 DAY VISITS, RESIDENTIAL VISITS AND SPORTING ACTIVITIES**

- The school will actively support students with medical conditions to participate in school trips and visits or in sporting activities.
- The school will make reasonable adjustments for the inclusion of students in such activities.
- Some young people may need to take precautionary measures before or during exercise, and may need access, for example, to asthma inhalers. Staff supervising sporting activities will be made aware of relevant medical conditions and will consider the need for a risk assessment to be made.
- The school will consider the reasonable adjustments that can be made to enable students with medical needs to participate fully and safely in visits. These arrangements will be included in the risk assessment for the event.

- One member of staff accompanying the visit will be asked to take on the lead role for administering medicines or healthcare procedures. Individual Healthcare Plans, medicines, equipment and consent forms will be taken on school visits.
- Medicines are administered, witnessed and recorded. This form is added to the file on return from the visit.

## **12 SCHOOL'S ARRANGEMENTS FOR COMMON CONDITIONS**

### **12.1 Asthma**

- An inventory of all students with asthma will be compiled.
- An Individual Healthcare Plan will be developed.
- All staff will be trained annually to recognise the symptoms of an asthma attack and know how to respond in an emergency.

Procedures for students who have been prescribed reliever inhalers:

- Emergency salbutamol inhalers and spacers are kept in the medical cupboard in the medical office
- Emergency salbutamol inhalers will only be given to students previously diagnosed with asthma whose reliever inhaler is not in school or whose inhaler has run out, who are on the register and whose parents have signed the consent form.
- All staff will know how and when to use the emergency salbutamol inhaler.
- Parents will be asked to sign to give permission to administer an emergency dose(s).
- Parents will be informed of any emergency dosages given.

### **12.2 Anaphylaxis (Severe Allergic Reaction)**

- All staff will attend annual training on the symptoms of anaphylaxis, which includes information and practise on when and how to use the adrenaline auto-injector.
- An Individual Healthcare Plan will be developed which includes the arrangements the school will make to control exposure to allergens.
- Auto-injectors will be kept readily available and should be carried by the student.
- Personal emergency epi-pens stored at school are kept in the medical cupboard in the medical office.
- Epi-pens will be administered following the requirements of the individual health care plan - where possible these will be self-administered, if not by a trained member of staff.
- If an Epi-pen is administered 999 will be called and parents notified.

- A record of the medication will be written in the medicines book.

### 12.3 Epilepsy

- An Individual Healthcare Plan will be developed.
- An appropriate number of staff will be trained in identifying the symptoms and triggers for epilepsy, including administering medication.
- There will be a trained member of staff available **at all times** to deliver emergency medication. Details will be recorded on the student's Healthcare Plan.
- A medical room with a bed will be kept available so that if needed the student will be able to rest following a seizure, in a safe supervised place
- The school will enable students to take a full part in all outings and activities
- The school will make necessary adjustments e.g. exam timings, coursework deadlines, timetables
- The school will liaise fully with parents and health professionals
- The administration of medication will be recorded as appropriate
- If appropriate, a record will be kept of the student's seizures, so that any changes to seizure patterns can be identified and so that this information can be shared with the student's parents and healthcare team.
- Medicines will be stored in a medical cabinet the medical room.
- All medicines taken will be recorded in the medicine book.

### 12.4 Diabetes

- An Individual Healthcare Plan will be developed.
- Students diagnosed with Type 1 diabetes and have been prescribed insulin will be supported by staff who have specifically agreed to this responsibility and have received training and support from the Diabetic Nurses Team.
- A suitable private place will be provided for students to carry out blood tests and administer doses, e.g. Medical Room.
- Students will not be prevented from eating, drinking or taking toilet breaks whenever they need to in order to manage their medical condition effectively.
- If a student has a hypo, they will not be left alone; a fast acting sugar, such as glucose tablets, a glucose rich gel, or a sugary drink will be given immediately.
- Once the student has recovered, slower acting starchy food, such as a sandwich or two biscuits and a glass of milk, will be given, some 10-15 minutes later.

### **13 LIABILITY AND INDEMNITY**

The Governing Body will ensure that the appropriate level of insurance is in place for staff providing support to students with medical conditions and appropriately reflects the level of risk.

The school will contact their insurers to extend their cover should a medical intervention fall outside the conditions covered by this policy.

### **14 COMPLAINTS**

Parents/students should discuss any concerns directly with the school if they become dissatisfied with the support provided. If for whatever reason, this does not resolve the issue, they may make a formal complaint via the school's Complaints Procedure.

### **15 SCHOOL PROCEDURES FOR MANAGING MEDICINES**

- Medicines should be brought to the school office/medical room by parents/carers or students. Matron will ask the parent to sign the relevant consent form or check the form downloaded from the school's website.

Matron will check that the:

- Medicine is in its original container, as dispensed by a chemist and the details match those on the authorisation form and record sheet.
- Label clearly states the young person's first and last name, the name of the medicine, the dose required and the method and frequency of administration.
- Patient information leaflet is present to identify any side effects
- Medication is in date; this will be checked and read out.
- Medicine is logged in the record book and stored appropriately.
- Medicines that require refrigeration will be kept in the fridge in a clean storage container.
- Temperature of the fridge is taken and recorded.
- Medication is administered at the appropriate time.

Matron will also:

- Ask the student to state their name – this is checked against the label on the bottle, the authorisation form and the record sheet.
- Check the time, dosage and method of administration against the authorisation form and record sheet.

- Administer the medicine.
  - Sign the record sheet.
  - Note possible side effects.
  - Return the medicine to the appropriate storage.
- 
- If a young person refuses to take their medicine, staff will not force them to do so. Staff will record the incident and follow agreed procedures (which are set out in the student's Healthcare Plan) and contact parents. If a refusal results in an emergency, the emergency procedures detailed in the Healthcare Plan will be followed.
  - If the designated person has concerns about a procedure or a medication that they are being asked to administer they will not administer the medicine, but check with the parents or a health professional before taking further action.

## APPENDICES

### 8 STEP HAND WASHING TECHNIQUES



## Parental Request for Student to Carry Medicine for Students with Life Threatening Conditions

This form must be completed by parents/guardian.

Medicines must be carried in their original packaging with the information leaflet and the dispensing label attached.

<b>Date for Review to be initiated by AHS</b>	SEPTEMBER 2016		
<b>Name of Student</b>			
<b>Date of Birth</b>		<b>Tutor Group</b>	
<b>Diagnosed Medical Condition</b>			
<b>Completed Health Care Plan for condition</b>	Yes / No		

<b>Medicine</b>	
<b>Name of Medicine (as described on the container)</b>	
<b>Dosage and Method</b>	
<b>Side Effects</b>	
<b>Procedures to be taken in an Emergency</b>	

<b>Contact Details</b>	
<b>Name</b>	
<b>Daytime telephone No</b>	
<b>Relationship to student</b>	
<b>Address</b>	

I would like my daughter to keep her medicine on her for use as necessary.

Signature (s).....



### Parental Agreement for the School to Administer Medicine

AHS will not administer medicine to your daughter unless this form is completed. **Medicines must be supplied in their original packaging with the information leaflet and the dispensing label attached.**

Date for Review to be initiated by AHS	SEPTEMBER 2016		
Name of Student			
Date of Birth		Tutor Group	
Diagnosed Medical Condition			
Completed Health Care Plan for condition	Yes / No		

<b>Medicine</b>			
Name of Medicine (as described on the container)			
Expiry Date			
Batch Number			
Dosage and Method			
Timing/When to be given			
Special precautions/other instructions			
Side Effects			
Self-Administered	Yes	No	If Possible
Procedures to be taken in an Emergency			

<b>Contact Details</b>	
<b>Name</b>	
<b>Daytime telephone No</b>	
<b>Relationship to student</b>	
<b>Address</b>	

The information is to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school's policy

Prescribed Medication: I will inform the school immediately, in writing, if there is any change in dosage, or frequency of the medication or if the medicine is stopped.

Non- Prescription Medication: I confirm that I have administered this non-prescription medication, without adverse effect, to my daughter in the past/ I will inform the school immediately in writing, if my daughter subsequently is adversely affected by the above medication.

If more than one medicine is required a separate form must be completed for each one

Signature (s).....

Date:.....

## Individual Healthcare Plan

 <b>Aylesbury High School</b>			
<b>Student's Name</b>			
<b>Tutor Group</b>			
<b>Date Of Birth</b>			
<b>Student's Address</b>			
<b>Medical Diagnosis</b>			
<b>Date of Diagnosis</b>			
<b>Medical Review Date</b>			
<b>Date of Last Episode</b>			

<b>Family Contact Information</b>			
<b>Name</b>		<b>Name</b>	
<b>Relationship to Student</b>		<b>Relationship to Student</b>	
<b>Phone Number (Work)</b>		<b>Phone Number (Work)</b>	
<b>Phone Number (Mobile)</b>		<b>Phone Number (Mobile)</b>	
<b>Phone Number (Home)</b>		<b>Phone Number (Home)</b>	

**Clinic/Hospital Contact Details**

Name

Phone Number

Address

**GP Details**

Name

Phone Number

Address

**Who is responsible  
for providing  
support at School?**

**Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.**

**Name of Medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by self/administered with/without supervision**

**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 offsite activities)**

**Plan Developed with**

**Staff training needed/undertaken – who, what , when**

**Form Copied to**

**Signed by**

**Job Title**

**Date**

**Signed by Parent/Carer**

**Name of Parent**

**Date**

**Agreed Review Date**