

# Morelands Primary School

*With Resourced Provisions for Children With Autism  
And Speech, Language & Communication*

Headteacher: Mr S Bilbe

E-mail: [adminoffice@morelands.hants.sch.uk](mailto:adminoffice@morelands.hants.sch.uk)

[www.morelandsprimaryschool.co.uk](http://www.morelandsprimaryschool.co.uk)

Telephone: 023 92253770

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Date of Policy:	November 2024	Review Date:	November 2025
Responsibility:	Steve Bilbe	Chair of Governors:	Richard Gridley

## Supporting Children with Medical Conditions Policy

The Children and Families Act 2014, Section 100, places a duty on schools to support children with medical conditions so that they have full access to education.

Where children have a disability, the requirements of the Equality Act 2010 also apply. Where children have an identified Special Educational Needs or Disability, the SEND Code of Practice 2014 will apply.

This policy should be read in conjunction with the current Morelands Primary School [SEND Policy \(2023\)](#).

At Morelands Primary School there are four key principles underpinning our policy in line with DfE guidance:

1. Children with medical conditions, in terms of both physical and mental health, are properly supported so that they can play a full and active role in school life, remain healthy and achieve their academic potential, including school trips and physical education.
2. Focus is on each child as an individual and how their medical needs and unique situation affect their access, participation and enjoyment of school life.
3. Arrangements must be in place in school to support children with medical conditions, including the appropriate use of risk assessments and the development and implementation of Health Care Plans.
4. In order to meet the needs of children with medical conditions.  
We will consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are properly understood and effectively supported.

As such, children with medical conditions or disabilities have the same right of admission to school as other children and will not be refused admission or excluded from school on medical grounds alone. However, in line with safeguarding duties the Governing Body ensures that children's health is not put at risk (e.g. from infectious disease) and we do not permit entry to school where it is detrimental to the health of that child or others to do so.

The Special Educational Needs and Disability Code of Practice explains the duties of local authorities, health bodies, schools and colleges to provide for those with special educational needs under part 3 of the Children and Families Act 2014. For pupils who have medical conditions that require EHC plans, compliance with the SEND Code of Practice will ensure compliance with this guidance with respect to those children.

The prime responsibility for a child's health always lies with the parent/carer, who is responsible for the child's medication and should supply the school with information regarding the management of the child's condition, such that the school fully meets the child's needs. As part of our commitment to the child's inclusion in supporting themselves, we also encourage self-administration of medicine wherever possible.

The Headteacher has overall responsibility for policy implementation. This policy will be reviewed regularly, and it is readily accessible to parents and school staff.

## **Roles and Responsibilities**

### **Governing body**

- Ensure staff are suitably trained and are competent before they take on responsibility to support children with medical conditions.
- Make sure arrangements are sufficient to meet statutory responsibilities and policies, plans, procedures and systems are properly and effectively implemented to give parents/carers and pupils confidence in the school's ability to provide effective support for medical conditions in school.
- Contribute to the development of the policy for supporting pupils with medical conditions.
- Ensure arrangements are in place to support children with medical conditions in school so that they can access and enjoy the same opportunities as any other child. Focusing on the needs of each individual child and how their medical condition impacts them, to enable the fullest participation possible in all aspects of school life.
- Governing bodies should be explicit about what practice is not acceptable.
- Set out how complaints concerning the support provided to pupils with medical conditions may be made and will be handled.
- Ensure written records are kept of all medicines administered to children.
- Ensure that Individual Health Care Plans clearly state what should happen in an emergency situation.

### **Headteacher**

- Has overall responsibility for the development of Individual Health Care Plans. Ensure plans are easily accessible to all who need to refer to them, while preserving confidentiality.
- Ensure that a sufficient number of staff are trained and available to implement the Policy, and deliver against all Individual Health Care Plans, including in contingency and emergency situations.
- Clearly identify the roles and responsibilities of all those involved to support pupils at school with medical conditions. Ensure all relevant staff know of the child's condition and are made aware of the precautions that need to be taken and the procedure for coping in an emergency.
- Ensure that the schools Policy is developed and effectively implemented with partners, ensuring that it is reviewed regularly and is readily accessible to parents and school staff. All staff must be aware of the Policy for supported children with medical conditions and understand their role in its implementation.
- Implement risk assessments for school visits, holidays, and other school activities outside the normal timetable.
- Ensure that a medical questionnaire is sent to all Year R parents/carers and to all parents/carers of in-year transfers.
- Ensure all school staff are appropriately insured and are aware that they are insured to support children in this way. They should contact the School Nursing Service in the case of any child who has a medical condition that may require further support.
- Ensure that in case of a pupil being hospitalised, support is given before, during and after this process with addition advice from health professionals to ensure a successful reintegration to school.
- Implementation of cover arrangements in case of staff absence or staff turnover to ensure someone is always available.
- Briefing of Supply/Cover teachers.
- Communicate how health care training needs are assessed, and how and by whom training will be commissioned and provided.

## SENCo

- Take an operational overview and monitoring role in relation to this Policy and school-wide practice in meeting the needs of children with medical conditions.
- Ensure all children with medical needs have a Health Care Plan that is kept up to date.
- Ensure staff who provide support to this group of children are aware, and able to access information/support materials.
- Overall school liaison with the School Nurse, including jointly monitoring of the plans put in place for each child.
- Ensure all staff are informed of new medical needs either through Year R questionnaires or in-year transfers.
- Where a child has SEN but does not have a statement or Educational Health Care Plan, ensure their special educational needs are mentioned in their Individual Healthcare Plan. Where the child has a special educational need identified in a statement or EHC plan, the individual healthcare plan should be linked to or become part of that statement or EHC plan.
- If consensus cannot be reached on whether or not when a healthcare plan would be inappropriate or disproportionate, the SENCo is best placed to take a final view.

## School Staff

Any member of school staff may be asked to provide support to children with medical conditions or a disability, including the administering of medicines, **although Teachers cannot be required to do so**. Although administering medicines is not part of Teacher's professional duty, they should consider the needs of children with medical conditions that they teach.

Any member of school staff providing support to a child with a medical condition must receive suitable training.

School staff must not give prescription medicines or undertake health care procedures without appropriate training (to reflect the requirements within individual healthcare plans). School staff are responsible for:

- Supporting the child as much as possible and promote self-managing their condition.
- Risk assessment for school visits, journeys, and/or other activities outside of the normal timetable. Ensuring that there are clear and unambiguous arrangements to support children with medical conditions to participate in school trips and visits.
- Implementing the actions identified in Individual Health Care Plan/s.
- Ensuring the rest of the children in the class/group know what to do in case of an emergency.
- Notifying the SENDCo if there are any issues or concerns with the child's Health Care Plan.
- Briefing Supply Teachers or other cover staff who are engaged to meet the needs of individual children with medical conditions.

## School Nursing Team

- School Nurses are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Where possible, ensuring the school is informed before the child starts.
- Provide support for staff on implementing a child's Health Care Plan and providing advice and liaison including training.

## Other Health Care Professionals

All health care professionals including GP's and Paediatricians should notify the School Nurse if/when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing health care plans.

## **Parent/Carer**

- Responsible for notifying the school with sufficient and up-to-date information about their child's medical needs and help to produce an Individual Health Care Plan.
- Be involved in the development and review of their child's Health Care Plan.
- Carry out any action they have agreed to as part of the plan's implementation, including to provide any necessary medicines as required.
- Ensure they or a nominated adult are contactable at all times.

## **The Child**

- Be fully involved in discussions about their medical support needs.
- If deemed competent, manage their own health needs and medication (they will be supported to do so).

## **Medical Needs Training**

As part of ensuring the school is best placed to meet medical needs, the following members of staff are trained:

**Basic First Aid at Work** (does not constitute appropriate training in supporting children with medical conditions)

All staff (expires October 2025)

**Paediatric First Aid – renewal 3 yearly**

Tracey McGuinness – September 2026

Katarina Appleford – May 2022 (expires May 2025)

Jo Matthews - May 2022 (expires May 2025)

Kirsten Lewis – March 2022 (expires March 2025)

Louise Cassidy –

Jenny Wilkins -September 2026

**Management of Administration of Medicines in School – renewal 2 yearly Katarina Appleford, Joanne Mathews**

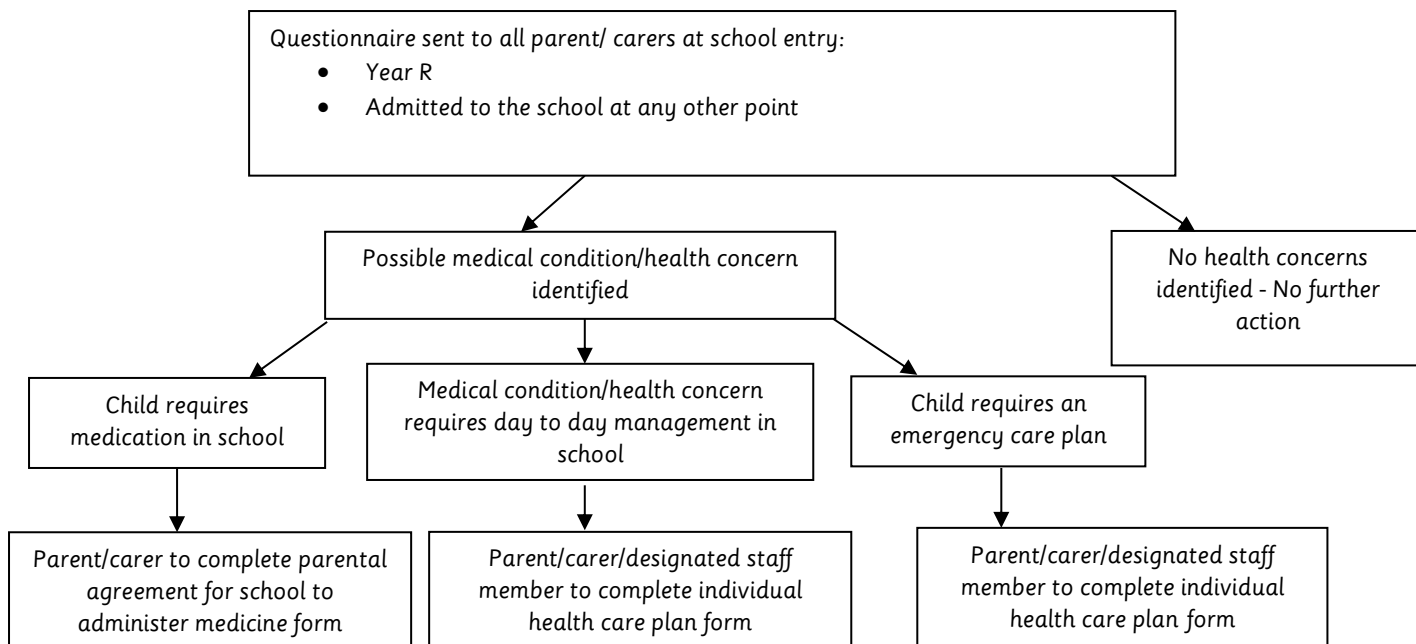
Tracey McGuinness –

**Supporting children with Asthma, Allergies and Anaphylaxis (inc. EpiPen) – renewal 3 yearly. Katarina Appleford, Joanne Matthews**

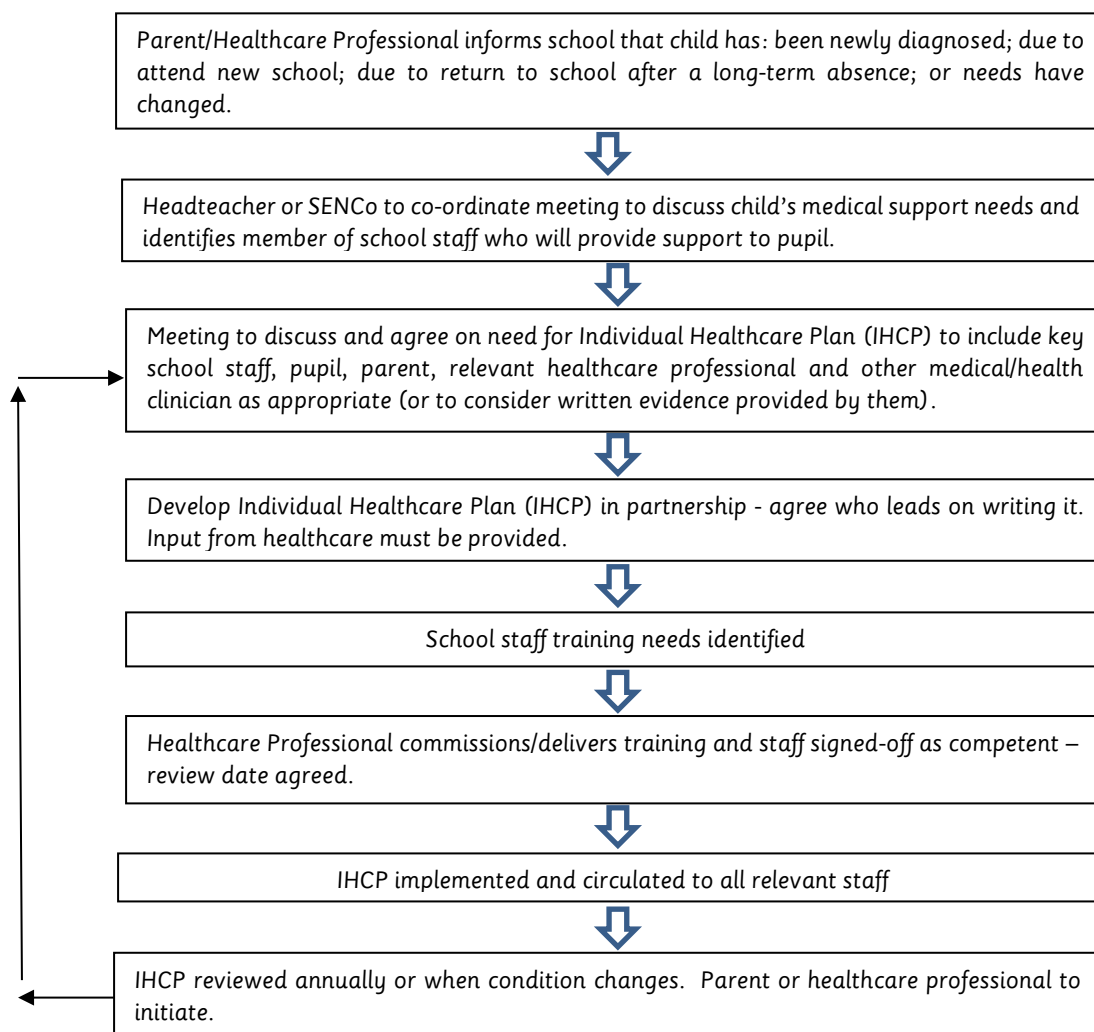
## **Procedures to be followed when notification is received that a child has a medical condition**

- The named person will liaise with relevant individuals including, as appropriate, parents/carers, pupil, health professionals and school staff.
- Where appropriate, an Individual Health Care Plan will be produced - see flow chart on the following page.
- For children starting new at the school, arrangements should be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or children moving from a new school mid-term, every effort should be made to ensure that arrangements are put in place within two weeks.

## **Process for identifying a medical condition that may require support in school**



## **Model process for developing Individual Healthcare Plans**



## Individual Health Care Plans (IHCP) (see Appendix 1)

Individual Health Care Plans help to ensure that schools effectively support pupils with medical conditions. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed and are likely to be helpful in the majority of other cases, especially where medical conditions are long term and complex. However not all children will require one. The school, healthcare professional and parent should agree, based on evidence, when a Health Care Plan would be inappropriate or disproportionate. If consensus cannot be reached, the Headteacher/SENCo is best placed to take a final view.

- IHCP's consider the medical condition, its triggers, signs, symptoms and treatments.
- IHCP's clarify what needs to be done, when and by whom and include information about the child's condition, special requirements, medicines required, what constitutes an emergency and action to take in case of an emergency - including whom to contact, and contingency arrangements.
- Thought will be given to pupil's needs, including the level of support needed, 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. Also, specific support for the pupil's educational, social and emotional needs.
- IHCP's will be easily accessible to all who need to refer to them. Copies will be kept in the child's classroom and in the school office as well as accompanying the child in any off-site visits or if the child is taken to hospital.
- IHCP's will be viewed annually, or earlier, if evidence has been provided that the child's needs have changed.
- Where a child has SEND (Special Educational Needs and/or Disability) identified in an Education, Health and Care Plan (EHCP), the IHCP may be linked to or become part of the statement or EHCP.
- When a child has SEND, but does not have an EHCP, their special educational needs will be mentioned in the IHCP.
- IHCP's will include details of arrangements for written permission for medication to be administered by a member of staff or self-administered by the pupil during school hours.
- They will detail separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments.
- Where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition.

## Administering medicines on school premises

- Medicines should only be administered in school when it would be detrimental to a child's health or school attendance not to do so.
- Written consent from parents must be received before administering any medicine to a child at school.
- Medicines will only be accepted for administration if they are: prescribed, in date, labelled, provided in the original container and include instructions for administration, dosage and storage. The exception to this is Insulin, which must still be in date, but will generally be available to schools inside an Insulin pen or pump, rather than in its original container.
- All medicines will be stored safely. Children should know where their medicines are and be able to access them with an adult or independently in the case of an inhaler.
- Medicines and devices such as Asthma inhaler, adrenalin pens and blood glucose testing meter, are stored safely, but not locked away. Staff can access them easily. This is particularly important when outside of school premises, e.g. on school trips.
- Controlled drugs that have been prescribed for a child should be securely stored in a non-portable container and only named staff should have access/holds the key to the storage facility.
- A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor.

- Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents should be informed.
  - Written records are kept of all medicines administered to children. Any side effects should be noted.
  - Pupils who are competent are allowed to access their medicines for self-medication under supervision, i.e. Asthma inhaler.
  - When no longer required, medicines should be returned to the parent to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps.
- 
- At our school we will administer non-prescription medication such as Calpol. These drugs will not be administered in the morning session as it is possible the child may already have had dose in the morning. These drugs will only be given to prolong attendance at school and to prevent absence.
    - Staff will check that the medicine has been administered without adverse effect to the child in the past and parents and carers must certify this is the case – a note to this effect should be recorded on the consent form.
    - Only 1 standard dose (appropriate to age and weight of the pupil) can be administered in school per day.
    - Previous parental consent must be gained to administer paracetamol.
    - If paracetamol is administered at any time during the school day parents and carers will be called and the time of administration and dosage. If parents or carers cannot be contacted, then paracetamol cannot be administered.
    - The school will keep records of the administration of paracetamol as for prescribed medication.
    - Students must not bring paracetamol (or other types of painkillers) to school for self-administration.

The following consent form will be sent to parents and held on file.

We require your permission for us to give your child the occasional dose of paracetamol in circumstances. For example, if they get a headache or any other type of mild to moderate pain. We confirm we will comply with the directions on the bottle and administer the correct dosage. Obviously, we would not keep your child in school unnecessarily and if they were very unwell, we would contact you.

With paracetamol, there needs to be a minimum of 4 hours in between doses. If your child does need paracetamol within 4 hours of the start of the day, we would contact you to see if they have already had a medicine that is or contains paracetamol.

- We would like your signed permission to administer this along with verbal consent on the day.
- I am happy for you to give my child paracetamol and I confirm the following: -
- They have had paracetamol before, and they did not have an allergic reaction to it.
- They are not currently taking any medicines that would interact with paracetamol (you can check this with your pharmacist if you are unsure).
- I will inform the school if they start any medicines which would interact with paracetamol (you can check this with your pharmacist if you are unsure).
- A record will be kept in school.

### Action in an emergency

- Where a child has an IHCP, 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 - including whom to contact, and contingency arrangements.
- If child needs the emergency services, ensure 112/999 is called and given all relevant information, contact the parent/carer and allocate someone to meet the ambulance.
- A member of staff should stay with the pupil, including travelling to the hospital with the pupil in the ambulance if parent/carer does not arrive in time.
- 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.

### Activities beyond the usual curriculum

- Reasonable adjustments will be made to enable pupils with medical needs to participate fully and safely in day trips, sporting activities and other activities beyond the usual curriculum.
- Risk assessments will include adjustments needed to ensure pupils with medical conditions are included unless evidence from a clinician such as a GP stated that this is not possible.
- Any restrictions on a child's ability to participate in activities due to a medical condition should be recorded in their IHCP. Please also see Health and Safety Executive Guidance on School Trips.

### Home to school transport

- Where pupils have life threatening conditions; specific IHCP's should be carried on vehicles. These will need input from parents and the responsible medical practitioner for the pupil concerned.
- Ensure all relevant staff know of the child's condition and are made aware of the precautions that need to be taken and the procedure for coping in an emergency.
- Schools will provide relevant information to the Travel and Transport Team to minimise risks to pupil.

### Emergency Asthma inhalers and guidance of other common pupil health needs

- Governors at this school have decided to keep x2 emergency inhaler kits, these are kept in the school Medical Room, when they are not out on trips. Staff use a sign-in/sign-out sheet for these kits.
- A First Aid trained member of staff will be responsible for ensuring that there are sufficient inhalers, they are in date, stored safely and appropriately and are cleaned after use.
- An emergency inhaler will only be used by the children with Asthma for whom written parental consent for its use has been provided – a register of names is kept alongside the emergency inhaler kits in the school Medical Room.
- A record will be kept of use of the emergency inhaler and parents informed.

### Transition from Morelands

School staff will ensure that medical information is handed over effectively at any point of transition, i.e. from year group, key stage or from Morelands to Secondary School or when a child is moving to another school.

Staff (TMC / JM) will ensure relevant medical practitioners are informed when children move from Morelands to another school and provide the receiving school details of the child's medical needs/IHCP.

### Unacceptable Practice

- Although school staff should judge each case on its merits, with reference to the child's Individual Health Care 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.

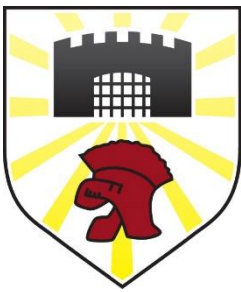
- Assuming that every child with the same condition requires the same treatment.
- Ignoring the views of the child or their parents; or ignoring medical evidence or opinion, (although this may be challenged).
- Sending children with medical conditions home frequently, or preventing them from staying for normal school activities, including lunch, unless this is specified in their IHCP.
- If the child becomes ill, sending 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.
- Making parents/carers 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.

#### Complaints

Individuals wishing to make a complaint regarding the school's actions in supporting a child with medical conditions, should discuss this with the school in the first instance. If the issue is not resolved; then a formal complaint may be made, following the Hampshire Procedure for Handling Concerns and Complaints.

#### Liability and Indemnity – Insurance

- Hampshire County Council holds comprehensive insurance which provides liability cover relating to the administration of medication.
- Governing bodies ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.



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## Individual Health Care Plan

Dear Parent/Carer,

As part of the Families and Children's Act 2014, it is a requirement for any child with a medical condition, which impacts their education, to have an Individual Health Care Plan.

Individual Health Care Plans are developed in partnership with the school, parents/carers, pupils and any relevant healthcare professionals, 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 Health Care 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 the support needed.

A meeting to start the process of developing your child's Individual Health Care Plan has been scheduled for xxxxxxxxxxxxxxxxxxxxxxxx at xx:xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend by calling the school office on 02392 253770. The meeting will involve Mrs Harvey and a First Aider. Please let us know if you would like us to invite a medical practitioner, healthcare professional or specialist, and provide any other evidence you would like us to consider at the meeting as soon as possible.

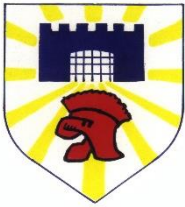
If you are unable to attend, it would be helpful if you could complete the attached Individual Health Care Plan template and return it, together with any relevant evidence, for consideration at the meeting. I would be happy for you to contact the School Office by email ([adminoffice@morelands.hants.sch.uk](mailto:adminoffice@morelands.hants.sch.uk)) or by phone, if this would be helpful.

Yours sincerely

Mrs K Harvey  
Senco



Crookhorn Lane, Waterlooville, Hampshire PO7 5QL



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## Morelands Primary School Healthcare Plan (Appendix 1)

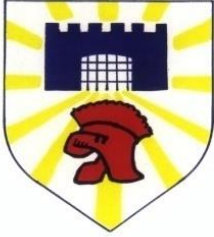
1. Pupil Information:	
Name of pupil:	Class:
Date of birth:	Male/Female:
2. Contact Information:	
Family Contact 1:	Family Contact 2:
Name:	Name:
Phone (day):	Phone (day):
Mobile:	Mobile:
Relationship to child:	Relationship to child:
3. GP:	
Name:	Phone:
Practice:	
4. Specialist Contact:	
Name:	Phone:
Agency:	
5. Medical Condition Information: <b>SUMMARY/NAME OF CONDITON</b>	
Signs and symptoms:	
Triggers or things which make the conditions worse:	

<b>Date form completed:</b>		<b>Staff initials:</b>	
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6. Routine healthcare requirements:	
7. Emergencies:	
<b>What to do in an emergency:</b>	
8. Emergency medication:	
Condition:	
Name and type of medication:	
Dose and method of medication:	
Medication expiry date:	
Are there any signs when medication should not be taken?	
Are there any side effects that school need to be aware of?	
Who can administer the medication?	
Is any follow-up care required?	
Who should be notified?	
9. Regular medication (during school hours)	
Name and type of medication:	
Dose and method of medication:	
Medication expiry date:	
When is it taken?	
Are there any side effects that might affect the child at school?	
Are there times when medication should not be administered?	
Can the child administer the medication themselves?	Yes / No /Under Supervision (delete as appropriate)

10. Regular medication (out of school hours)	
Name and type of medication	
Are there any side effects that might affect the child at school	
11. Members of staff trained to administer medication for this pupil	
Regular medication	Tracey McGuinness (exp. Sept 2022), Lorraine Smith (exp. Nov 2021)
Emergency medication	Tracey McGuinness (exp. Sept 2022), Lorraine Smith (exp. Nov 2021)
12. Additional information relating to child's healthcare in school	
13. Details of any Special Educational Needs and/or Disability	
14. Arrangements for school trips/visits	
15. Parent and child agreement	
I agree that the medical information contained in this plan may be shared with individuals involved with my child's care and education (this includes emergency services). I understand that I must notify the school of any changes in writing.	
<b>Signed (Parent)</b>	
<b>Print name</b>	
<b>Date</b>	
<b>Signed (Headteacher):</b>	<b>Date:</b>
16. Permission for emergency medication:	
<input type="checkbox"/> I agree that my child can be administered their medication by a member of staff in an emergency.	
<input type="checkbox"/> I agree that my child cannot keep their medication with them and the school will make necessary storage arrangements.	
<input type="checkbox"/> I agree that my child can keep their medication with them for use when necessary.	
<b>Signed (Parent)</b>	
<b>Print name</b>	
<b>Date</b>	

17. Review Details			
Review Date	Changes made?	Comments	Reviewed By (Name)
		Original form completed	
		Annual review	



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## Individual Health Care Plan

Dear Parents/Carers,

As part of the Families and Children's Act 2014, it is a requirement for any child with a medical condition, which impacts their education, to have an Individual Health Care Plan.

According to our records your child has a medical condition. With this in mind, we have sent you the enclosed individual healthcare plan to complete.

The information you provide will be held in our medical needs folder and accessed by Class Teachers and our medically trained competent members of staff.

All medication will be administered by our medically competent trained staff, and medication will be stored in accordance with the guidance for your child's particular medication. We would ask that you please complete the Health Care forms within a week of receipt of this letter.

If your child no longer has a medical condition, please inform us in writing so that we can remove your child's name from our register of medical needs.

If you have any queries regarding completing the Health Care Plan, or need assistance in any way, please do not hesitate to contact the School Office (Tel: 02392 253770), who will be happy to help you.

Yours sincerely

Mrs K Harvey  
SENco



Crookhorn Lane, Waterlooville, Hampshire PO7 5QL



**Please complete the questionnaire below and return it to school**

It is important that all children with medical conditions are supported to make sure that they are able to access their education. Some children with medical conditions may need care or medication to manage their health condition and to keep them well during the school day.

Please complete the questionnaire below and return it to school as soon as possible so that we are able to assess your child's health needs and make arrangements to support them if necessary. In order to ensure that any medical needs are appropriately met in school we may need to discuss your child's health with the School Nursing service or another health professional who is involved in your child's care.

Name of Child ..... Date of Birth .....

Home Address.....

Does your child have a medical condition/ health concern?

YES  NO

**If YES please give details:**

Does your child have a medical condition/health concern that needs to be managed during the school day?

YES  NO

**If YES please give details:**

Does your child take medication during the school day (i.e. dose is to be given 4+ times per day)?

YES  NO

**If YES please give details:**

Does your child have a Health Care Plan that should be followed in a medical emergency?

YES  NO

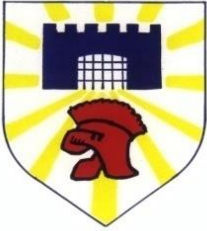
**If YES please give details:**

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to the school to discuss this information with the School Nursing service or other health professionals who are involved in my child's care.

Signature(s): \_\_\_\_\_ Print Name: \_\_\_\_\_

**[Parent/ Carer with parental responsibility]**

Date: \_\_\_\_\_ Contact number: \_\_\_\_\_



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*Telephone: 023 92253770*

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## Emergency Salbutamol Inhaler

Dear Parent/Carer,

Your child is registered as Asthmatic on our Medical Needs Register. As part of our 'Supporting Children with Medical Conditions Policy', we are now able to offer an emergency Asthma pump service to all pupils registered with Asthma at Morelands.

If you give permission for your child to be given the emergency Salbutamol inhaler, it would be given in the following instances:

- If the child's own inhaler is not in school
- If their own inhaler has expired
- If their own inhaler has ran out mid-use
- If the child's own inhaler broke in any way

Please fill in the attached form if you give permission for the emergency inhaler to be used if required.

Our Medical Needs Register will clearly state that your child can use the emergency inhaler. The register will be updated annually.

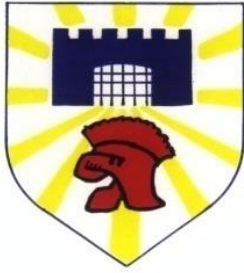
Yours sincerely

Mrs K Harvey  
Senco



Crookhorn Lane, Waterlooville, Hampshire PO7 5QL





# Morelands Primary School

*With Resourced Provisions for Development & Assessment  
And Speech, Language & Communication*

*Headteacher: Mr Steve Bilbe*

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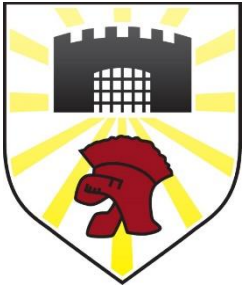
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## CONSENT FORM FOR USE OF EMERGENCY SALBUTAMOL INHALER

### **Child showing symptoms of Asthma and/or having an Asthma attack**

1. I can confirm that my child has been diagnosed with Asthma and has been prescribed an inhaler.
2. My child has a working, in-date inhaler, clearly labelled with their name, which will be kept in school.
3. In the event of my child displaying symptoms of Asthma, and if their inhaler is not available or unusable, I consent for my child to receive Salbutamol from an emergency inhaler held by the school for such emergencies.

Signed:	Date:
Name (Print):	
Childs Name (Print):	Class:
Parents/Carers address:	
Telephone:	
Email:	



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## LETTER TO INFORM PARENTS OF EMERGENCY SALBUTAMOL INHALER USE

Child's name: \_\_\_\_\_

Class: \_\_\_\_\_

Date: \_\_\_\_\_

Dear ,

This letter is to formally notify you that ..... has had problems with his/her breathing today. This happened when

.....  
.....

[DELETE AS APPROPRIATE]

They did not have their own Asthma inhaler with them, so a member of staff helped them to use the emergency Asthma inhaler containing Salbutamol. They were given ..... puffs.

Their own Asthma inhaler was not working, so a member of staff helped them to use the emergency Asthma inhaler containing Salbutamol. They were given ..... puffs.

Although they soon felt better, we would strongly advise that you have your child seen by your own doctor as soon as possible.

Yours sincerely

Mrs K Harvey  
SENCo



Crookhorn Lane, Waterlooville, Hampshire PO7 5QL