



**Moulton School
&
Science College**



Medical Policy

Date of Policy: September 2018

Review date: September 2019

CONTENTS:

1. The statutory duty of the governing body	Page 3
2. Policy implementation	Page 5
3. Procedure to be followed when notification is received that a pupil has a medical condition	Page 6
4. Individual healthcare plans	Page 7
5. Roles and responsibilities	Page 9
6. Staff training and support	Page 11
7. The child's role in managing their own medical needs	Page 11
8. Managing medicines on school premises and record keeping	Page 12
a. Safe disposal	Page 13
9. Emergency procedures	Page 13
10. Day trips, residential visits, and sporting activities	Page 14
11. Other issues for consideration	Page 14
12. Unacceptable practice	Page 15
13. Liability and indemnity	Page 16
14. Complaints	Page 16

Moulton School and Science College is an inclusive community that aims to support and welcome pupils with medical conditions. Students with medical conditions will be supported to take control of their condition and given the opportunity to participate in all school activities.

This policy is written in line with the requirements of:

- Children and Families Act 2014 - section 100
- Supporting pupils at school with medical conditions: statutory guidance for governing bodies of maintained schools and proprietors of academies in England, DfE December 2015
- 0-25 SEND Code of Practice, DfE 2014
- Mental Health and behaviour in schools: departmental advice for school staff, DfE March 2016
- Equalities Act 2010
- Schools Admissions Code, DfE 1 Feb 2010

This policy should be read in conjunction with the following school policies:

- Inclusion Policy / SEND Report
- Safeguarding Policy
- Off-site visits Policy
- Complaints Policy

Where a student with a medical condition is considered disabled the governing body will comply with their duties under the Equalities Act 2010. Where the student also has Special Educational Needs and has a Statement or Education, Health and Care Plan, the policy should be read in conjunction with the 0-25 SEND Code of Practice and the Schools Inclusion Policy / SEN information Report.

1. The statutory duty of the governing body

The governing body remains legally responsible and accountable for fulfilling their statutory duty for supporting pupils at school with medical conditions. The governing body of Moulton School fulfil this by:-

- Ensuring that arrangements are in place to support pupils with medical conditions. In doing so we will ensure that such children can access and enjoy the same opportunities at school as any other child;
- Taking into account that many medical conditions that require support at school will affect quality of life and may be life-threatening. Some will be more obvious than others and therefore the focus is on the needs of each individual child and how their medical condition impacts on their school life;

- Ensuring that the arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions, and should show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care. We will ensure that staff are properly trained to provide the support that pupils need;
- Ensuring that no child with a medical condition is denied admission, or prevented from taking up a place in school because arrangements for their medical condition have not been made. However, in line with safeguarding duties, we will ensure that pupils' health is not put at unnecessary risk from, for example, infectious diseases, and reserve the right to refuse admittance to a child at times where it would be detrimental to the health of that child or others to do so;
- Ensuring that the arrangements put in place are sufficient to meet our statutory duties and ensure that policies, plans, procedures and systems are properly and effectively implemented;
- Developing a policy for supporting pupils with medical conditions that is reviewed regularly and accessible to parents and school staff (this policy);
- Ensuring that the policy includes details on how the policy will be implemented effectively, including a named person who has overall responsibility for policy implementation (see section below on policy implementation);
- Ensuring that the policy sets out the procedures to be followed whenever the school is notified that a pupil has a medical condition (see section below on procedure to be followed when notification is received that a pupil has a medical condition);
- Ensuring that the policy covers the role of individual healthcare plans, and who is responsible for their development, in supporting pupils at school with medical conditions (see section below on individual healthcare plans);
- Ensuring that the school policy clearly identifies the roles and responsibilities of all those involved in arrangements for supporting pupils at school with medical conditions and how they will be supported, how their training needs will be assessed and how and by whom training will be commissioned and provided (see section below on staff training and support);
- Ensuring that the school policy covers arrangements for children who are competent to manage their own health needs and medicines (see section below on the child's role in managing their own medical needs);

- Ensuring that the policy is clear about the procedures to be followed for managing medicines including the completion of written records (see section below on managing medicines on school premises);
- Ensuring that the policy sets out what should happen in an emergency situation (see section below on emergency procedures);
- Ensuring that the arrangements are clear and unambiguous about the need to support actively pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so (see section on day trips, residential trips and sporting activities);
- Considering whether to
 - develop transport healthcare plans in conjunction with the LA for pupils with life-threatening conditions who use home-to-school transport
 - Purchase and train staff in the use of defibrillators
 - Once regulations are changed consider holding asthma inhalers for emergency use;
- Ensuring that the policy is explicit about what practice is not acceptable (see section on unacceptable practice);
- Ensuring that the appropriate level of insurance is in place and appropriate to the level of risk (see section on Liability and Indemnity);
- Ensuring that the policy sets out how complaints may be made and will be handled concerning the support to pupils with medical conditions (see section on complaints).

2. Policy implementation

The statutory duty for making arrangements for supporting pupils at school with medical conditions rests with the **governing body**. The governing body have conferred the following functions of the implementation of this policy to the staff below, however, the governing body remains legally responsible and accountable for fulfilling our statutory duty.

The overall responsibility for the implementation of this policy is given to the **Headteacher, Mr Trevor Jones**. He will also be responsible for ensuring that sufficient staff are suitably trained and will ensure cover arrangements in cases of staff absences or staff turnover to ensure that someone is always available and on-site with an appropriate level of training.

Angela Ford (Assistant Headteacher), along with Hannah Perry (Cover Supervisor) and Mandy Dane (Business Manager), will be responsible for briefing supply teachers, preparing risk assessments for school visits and other school

activities outside of the normal timetable and for the monitoring of individual healthcare plans.

Peter Crotty, Head of Inclusion, will be responsible in conjunction with Year Leaders and parents/carers, for drawing up, implementing and keeping under review the individual healthcare plan for each pupil and making sure relevant staff are aware of these plans. This responsibility may be delegated to **David Robinson, SENCO**, where there are also Special Educational Needs and Disability.

All members of staff are expected to show a commitment and awareness of children's medical conditions and the expectations of this policy. All new members of staff will be inducted into the arrangements and guidelines in this policy upon taking up their post.

3. Procedure to be followed when notification is received that a pupil has a medical condition

This covers notification prior to admission, procedures to cover transitional arrangements between schools or alternative providers, and the process to be followed upon reintegration after a period of absence or when pupils' needs change. For children being admitted to Moulton School for the first time with good notification given, the arrangements will be in place for the start of the relevant school term. In other cases, such as a new diagnosis or a child moving to Moulton School mid-term, we will make every effort to ensure that arrangements are put in place within two weeks.

In making the arrangements, we will take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. We also acknowledge that some may be more obvious than others. We will, therefore, ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life. We aim to ensure that parents/carers and pupils can have confidence in our ability to provide effective support for medical conditions in school, so the arrangements will show an understanding of how medical conditions impact on the child's ability to learn, as well as increase their confidence and promote self-care.

We will ensure that staff are properly trained and supervised to support pupils' medical conditions and will be clear and unambiguous about the need to support actively pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. We will make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible. We will make sure that no child with a medical condition is denied admission or prevented from attending the school because arrangements for supporting their medical condition have not been made. However, in line with our safeguarding duties, we will ensure that all pupils' health is not put at unnecessary risk from, for example infectious disease. We will, therefore, not accept a child in school at times where it would be detrimental to the health of that child or others.

Moulton School does not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on available evidence. This would normally involve some form of medical evidence and consultation with parents/carers. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place. These discussions will be led by Angela Dabbs (Deputy Headteacher) and / or Peter Crotty (Head of Inclusion), and following these discussions an individual healthcare plan will be put in place in conjunction with the parent/carers by Year Leaders / Peter Crotty.

4. Individual healthcare plans

Individual healthcare plans will help to ensure that Moulton School effectively supports pupils with medical conditions. They will provide clarity about what needs to be done, when and by whom. 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 especially where medical conditions are long-term and complex. However, not all children will require one. The school, healthcare professional and parent/carer should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached the Headteacher, Trevor Jones, is best placed to take a final view.

Individual healthcare plans will be easily accessible to all who need to refer to them, while preserving confidentiality. Plans will capture the key information and actions that are required to support the child effectively. The level of detail within the plan will depend on the complexity of the child's condition and the degree of support needed. This is important because different children with the same health condition may require very different support.

Individual healthcare plans (and their review) should be drawn up in partnership between the school, parents/carers and a relevant healthcare professional (e.g. school, specialist or children's community nurse) who can best advise on the particular needs of the child. Pupils should also be involved whenever appropriate. The aim should be to capture the steps which Moulton School should take to help manage their condition and overcome any potential barriers to getting the most from their education. Partners should agree who will take the lead in writing the plan, but responsibility for ensuring it is finalised and implemented rests with the school.

Moulton School will ensure that individual healthcare plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed. They will be developed and reviewed with the child's best interests in mind and ensure that Moulton School assesses and manages risks to the child's education, health and social wellbeing, and minimises disruption. Where a child is returning to school following a period of hospital education or alternative provision, we will work with the local authority and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

Appendix 1 provides a basic template for the individual healthcare plan, and although this format may be varied to suit the specific needs of each pupil, they should all include the following information:

- 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 eg crowded corridors, travel time between lessons;
- Specific support for the pupil's educational, social and emotional needs – e.g 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 children will be able to take responsibility for their own health needs) including in emergencies. If a child is self-managing their medication, this should 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 child'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 child's condition and the support required;
- Arrangements for written permission from parents/carer 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 child can participate eg, risk assessment; and
- Where confidentiality issues are raised by the parent/child, the designated individual to be entrusted with information about the child's condition;
- What to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

5. Roles and responsibilities

Please refer to the section on policy implementation for the functions that have been delegated to different, named members of staff at Moulton School.

In addition we can refer to the **Community Nursing Team** for support with drawing up Individual Healthcare Plans, provide or commission specialist medical training, liaison with lead clinicians and advice or support in relation to pupils with medical conditions.

Other **healthcare professionals, including GPs and paediatricians** should notify the Community Nursing Team when a child has been identified as having a medical condition that will require support at school. Specialist local health teams may be able to provide support, and training to staff, for children with particular conditions (eg asthma, diabetes, epilepsy)

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

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

Local authorities are commissioners of school nurses for maintained schools and academies. Under Section 10 of the Children Act 2004, they have a duty to promote co-operation between relevant partners such as governing bodies of maintained schools, proprietors of academies, clinical commissioning groups and NHS England, with a view to improving the well-being of children with regard to their physical and mental health, and their education, training and recreation. Northamptonshire County Council will work with us to support pupils with medical conditions to attend full time. Where pupils would not receive a suitable education in a mainstream school because of their health needs the local authority has a duty to make other arrangements. Statutory guidance for local authorities sets out that they should be ready to make arrangements under this duty when it is clear that a child will be away from school for 15 days or more because of health needs (whether consecutive or cumulative across the year) education for children with health needs who cannot attend school.

Providers of health services should co-operate with schools that are supporting children with medical conditions. They can provide valuable support, information,

advice and guidance to schools, and their staff, to support children with medical conditions at school.

The **Ofsted** inspection framework places a clear emphasis on meeting the needs of disabled children and pupils with SEN, and considering the quality of teaching and the progress made by these pupils. Inspectors are already briefed to consider the needs of pupils with chronic or long-term medical conditions alongside these groups and to report on how well their needs are being met. Schools are expected to have a policy dealing with medical needs and to be able to demonstrate that it is being implemented effectively.

6. Staff training and support:

There are currently 32 members of staff who are trained School first aiders (full certificate).

Paediatric First Aiders:

None

Named people for administering medicines:

Tracey Coare
Kerrie Tilson
Lisa Lewis

The following staff have received specific/specialist training:

Not applicable

7. The child's role in managing their own medical needs

If, after discussion with the parent/carer, it is agreed that the child is competent to manage his/her own medication and procedures, s/he will be encouraged to do so. This will be reflected in the individual healthcare plan.

Wherever possible children will be allowed to carry their own medicines and relevant devices or should be able to access their medication for self-medication quickly and easily. These will be stored in the cupboard in Student Services to ensure that the safeguarding of other children is not compromised. Moulton School does also recognise that children who take their medicines themselves and/or manage procedures may require an appropriate level of supervision. If it is not appropriate for a child to self-manage, then relevant staff will help to administer medicines and manage procedures for them.

If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents will be informed so that alternative options can be considered.

8. Managing medicines on school premises and record keeping

- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours;
- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so;
- **We will not administer non-prescription medicines.**
- No child under 16 will be given prescription medicines without their parents' written consent (see Appendix 2) - except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, every effort will be made to encourage the child or young person to involve their parents while respecting their right to confidentiality;
- Moulton School will only accept prescribed medicines, with written permission from parent/carer 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 be in-date, but will generally be available to schools inside an insulin pen or a pump, rather than its original container;
- All medicines will be stored safely in the Student Services Room. This is a secure area, inaccessible to unsupervised students. Children should know where their medicines are at all times and be able to access them immediately;
- Some medication may need to be refrigerated and will be stored in an airtight container and clearly labelled.
- A child who had been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. Monitoring arrangements may be necessary. Otherwise we will keep all controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff will have access. Controlled drugs are easily accessible in an emergency. A record will be kept of any doses used and the amount of the controlled drug held in the school;
- Staff administering medicines will do so in accordance with the prescriber's instructions. Moulton School will keep a record (see Appendix 3) of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted. Written records are kept of all medicines administered to children. These records offer protection to staff and children and provide evidence that agreed procedures have been followed.

8a. Safe disposal

Parents are asked to collect out of date medication.

If parents do not collect out of date medication, medication is taken to a local pharmacy for safe disposal.

Student Services staff, T. Coare and K. Tilson are responsible for checking the dates of medication and arranging for the safe disposal of any that have expired.

There is a sharps box for the safe disposal of needles and other sharps. This is periodically collected and replaced by the Local Authority designated School Nurse.

9. Emergency procedures

The Headteacher will ensure that arrangements are in place for dealing with emergencies for all school activities wherever they take place, including school trips within and outside the UK, as part of the general risk management process.

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.

If a child needs to be taken to hospital, staff will stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance. Staff will not transport students to hospital in their own car.

Use of Adrenaline Auto-injectors (AAI):

In line with the guidance from the MHRA all students who are prescribed an AAI will be expected to carry two devices with them at all times.

It is intended for the school to purchase three spare AAIs for emergency use and will be available at all times in Student Services. These will only be used on students known to be at risk of anaphylaxis, for whom both medical authorisation and written parental consent for administration of the emergency AAI has been provided. No AAI will be administered to a student without the appropriate permissions unless directed by emergency medical staff following a 999 call. All incidences where AAIs are administered will be centrally recorded.

All staff will receive training in relation to anaphylaxis in order that they are familiar with the signs and symptoms. All first Aid staff will have AAI administration training.

Use of emergency Salbutamol Inhalers:

It is intended to purchase emergency Salbutamol inhaler kits to be used by students who have been prescribed an asthma reliever inhaler and for whom we have written parental consent for its use. These will be stored in five first aid bases around the school; Science Prep Room, Design Office, PE, Sixth Form and Student Services.

These will be accessible for staff at all times. All administration will be centrally recorded and a usage record kept with the kit to keep track of stock. Each kit will have a record of the batch number and expiry date as well as a list of those students for whom we have the appropriate authorisation to administer the medication. Salbutamol is safe to use even where a student normally has a different medication. Salbutamol will be administered using a disposable spacer. This will be disposed of appropriately.

Moulton School will register as a low-tier waste carrier. This will allow the spent inhalers to be legally returned to the pharmacy for disposal.

The designated member of staff, **Stewart Baker**, will be responsible for monitoring usage and replacing used stock of medical equipment and medication. All kit will be routinely checked at least once per month.

10. Day trips, residential visits, and sporting activities

We will actively support pupils with a medical condition to participate in day trips, residential visits and sporting activities by being flexible and making reasonable adjustments unless there is evidence from a clinician such as a GP that this is not possible.

We will always conduct a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions can be included safely. This will involve consultation with parents\carers and relevant healthcare professions and will be informed by Health and Safety Executive (HSE) guidance on school trips (12.01.2016).

11. Other issues for consideration

Following changes in regulations the school will now hold spare asthma inhalers on site for emergency use. This is not intended to replace the need for students to have their inhaler with them and a spare to be provided for retention by Student Services staff. This will be clearly labelled with the student's name.

12. Unacceptable practice

Although staff at Moulton School should use their discretion and judge each case on its merit 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\carers; or ignore medical evidence or opinion (although this may be challenged);
- Send children with medical conditions home frequently 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 breaks whenever they need to in order to manage their medical condition effectively;
- Require parents\carers, 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 creating unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

13. Liability and indemnity

Any member of staff may be asked to provide medical support for a student, however it should be ensured that the appropriate level of training is provided. The member of staff can refuse to undertake the role if the support requested is not within the scope of their job and explicitly outlined in their job description.

Moulton School is signed up to the Risk Protection Arrangement (RPA) through the DfE. The academy is insured through this arrangement.

14. Complaints

Should parents\carers be unhappy with any aspect of their child's care at Moulton School, they must discuss their concerns with the school. This will be with the child's Year Team in the first instance, with whom any issues should be addressed. If this does not resolve the problem or allay the concern, the problem should be brought to a member of leadership team, who will, where necessary, bring concerns to the attention of the Headteacher. In the unlikely event of this not resolving the issue, the parent\carer can make a formal complaint using the Moulton School Complaints Procedure. This can be found on the school website:

<https://www.moultonschool.co.uk>

Click on Key information and then Complaints procedure.

Moulton School & Science College: **Individual Healthcare Plan**

Name:

Form:

DOB:

Address:

Diagnosis /

Condition:

Date:

Review date:

Parent/Guardian 1:		Phone:	
Relationship:		Mobile:	
		Work:	
Parent/Guardian 2:		Phone:	
Relationship:		Mobile:	
		Work:	
Hospital Contact:		Phone:	
		Mobile:	
GP:		Phone:	

Medical Needs:		Medication Details:		
School Administered		Supervised Self-Administered		Self-Administered Yes

Daily Care requirements:	Specific Support:

Moulton School & Science College: **Individual Healthcare Plan**

Emergency Procedures and responsible staff:

School Visits: **Students who require medication for serious or potentially life threatening conditions will not be allowed on school trips without the appropriate quantity and in date prescription medication.**

Other information:

Staff Training:



Parental Agreement for Moulton School Staff to administer medicine



Moulton School has a policy that specified school staff can administer medicine. The school will not give your child medicine unless you complete and sign this form.

Name of child: _____ DOB: _____ Form: _____

Medical condition or illness	
Name of medicine (as on container)	
Date medicine dispensed	
Expiry date of medicine	
Dosage and method of administration	
Timing	
Any special precautions required	
Side effects to be aware of	

School administered		Supervised self-administered		self-administered	
---------------------	--	------------------------------	--	-------------------	--

Emergency procedures	
----------------------	--

Contact details:

Name: _____ Relationship to child: _____

Daytime telephone numbers: _____ / _____

I understand that I must deliver the medicine personally to Student Services

I confirm that my child has been diagnosed with a condition that requires prescription medication and give my permission for the school to administer the medicine as detailed above. I will promptly inform the school in writing of any changes to the information above.

Parent/Carer signature: _____ Date: _____

Parent/Carer (print): _____



Moulton School and Science College Consent Form:

Use of generic emergency adrenaline auto injectors.

Child's name: _____ DOB: _____

I can confirm that my child has been diagnosed with an allergy that can cause an anaphylaxis and has been prescribed an adrenaline auto-injector.

2. My child has one / two (please circle the appropriate number) working, in-date adrenaline auto-injector, clearly labelled with their name, which they will bring with them to school every day and keep with them at all times. They will also take these with them on any out of school activities and trips.

3. In the event of my child displaying symptoms of anaphylaxis, and if their own adrenaline auto-injector is not available or is unusable, I consent for my child to receive an adrenaline auto-injector held by the school for such emergencies.

4. I will promptly update the school if there are any changes to medication, treatment, risk of anaphylaxis etc. to the named pupil above.

Parent's Signature: _____ Date: _____

Parent's Name(print): _____

Use of generic emergency Salbutamol Inhalers.

Child's name: _____ DOB: _____

I can confirm that my child has been diagnosed with a condition requiring the use of an inhaler

2. My child has a working, in-date Salbutamol inhaler, clearly labelled with their name, which they will bring with them to school every day and keep with them at all times. They will also take this with them on any out of school activities and trips.

3. In the event of my child displaying symptoms of asthma, and if their own inhaler is not available or is unusable, I consent for my child to receive Salbutamol held by the school for such emergencies.

4. I will promptly update the school if there are any changes to medication, treatment, risk of asthma etc. to the named pupil above.

Parent's Signature: _____ Date: _____

Parent's Name(print): _____