



# Park Street C of E Primary School



**POLICY:**

MEDICAL

**Date of approval:**

NOVEMBER 2025

**Date of review:**

NOVEMBER 2026

In our school our Christian vision shapes all we do.

Flourish and  
"Let your light shine."

Matthew 5:16

At Park Street, we are committed to creating a school community of happy and confident lifelong learners equipped with the skills and knowledge needed to FLOURISH and lead successful lives.

We understand that we have a responsibility to make the school welcoming and supportive to pupils with medical conditions who currently attend and to those who may enroll in the future.

We aim to provide all children with all medical conditions the same opportunities as others at school. We will help to ensure they can:

- be healthy
- stay safe
- enjoy and achieve
- make a positive contribution
- achieve economic well-being.

Pupils with medical conditions are encouraged to take control of their condition.

We aim to include all pupils with medical conditions in all school activities wherever appropriate.

We aim to make the parents/carers of pupils with medical conditions feel secure in the care their children receive at this school.

We ensure that all staff understand their duty of care to children and young people everyday, particularly in the event of an emergency.

We aim to ensure that all staff feel confident in knowing what to do in an emergency.

This school understands that certain medical conditions are serious and can be potentially life-threatening, particularly if ill managed or misunderstood.

All staff understand the common medical conditions that affect children at this school. Staff receive training on the impact this can have on pupils.

We have consulted on the development of this Medical Conditions Policy with a wide-range of key stakeholders within both the school and health settings. These key stakeholders include:

- pupils with medical conditions

- parents/carers
- head teacher
- teachers
- special educational needs coordinator (SENCO)
- members of staff trained in first aid
- all other school staff
- school governors.

The views of pupils with various medical conditions were actively sought and considered central to the consultation process.

All key stakeholders were consulted in two phases:

- initial consultation during development of the policy
- comments on a draft policy before publication.

We recognise the importance of providing feedback to those involved in the development process and are committed to acknowledging input and providing follow-up to suggestions put forward.

### Communication

Parents and carers (and where relevant pupils) are informed and regularly reminded about the Medical Conditions Policy:

- by including the medical forms in the school's welcome pack
- at the start of the school year when communication is sent out about Healthcare Plans
- in the school newsletter at several intervals in the school year
- when their child is enrolled as a new pupil
- via the school's website, where it is available all year round
- through school-wide communication about results of the monitoring and evaluation of the policy.

School staff are informed and regularly reminded about the Medical Conditions Policy:

- Through copies handed out at the first staff meeting of the school year and before Healthcare Plans are distributed to parents/carers
- At scheduled medical conditions training
- Through the key principles of the policy being displayed in several prominent staff areas at this school
- Through school-wide communication about results of the monitoring and evaluation of the policy
- All supply and temporary staff are informed of the policy and their responsibilities.

### Emergencies

All staff that have contact with children are aware of the most common serious medical

conditions.

Staff at this school understand their duty of care to pupils in the event of an emergency. In an emergency situation school staff are required under common law duty of care to act like any reasonably prudent parent/carer. This may include administering medication.

All staff who work with groups of pupils at this school receive training and know what to do in an emergency for the pupils in their care with medical conditions.

If we have children in the school that need an Epipen then Epipen training will be refreshed for all staff at least once a year. General First Aid training and Paediatric First Aid training is refreshed every three years.

If we have children requiring other emergency medications in the school we will ensure the staff caring for them have the correct training.

Action for staff to take in an emergency for the common serious conditions at this school is displayed in prominent locations for all staff including classrooms, kitchens and the staff room.

This school uses Healthcare Plans to inform the appropriate staff (including supply teachers and support staff) of pupils in their care who may need emergency help.

This school has procedures in place so that a copy of the pupil's Healthcare Plan is sent to the emergency care setting with the pupil. On occasions when this is not possible, the form is sent (or the information on it is communicated) to the hospital as soon as possible.

### General emergency procedures

All staff know what action to take in the event of a medical emergency. This includes:

- how to contact emergency services and what information to give
- who to contact within the school.

Training is refreshed for all staff at least once a year.

Action to take in a general medical emergency is displayed in prominent locations for staff. These include classrooms, the staff room and food preparation areas.

If a pupil needs to be taken to hospital, a member of staff will always accompany them and will stay with them until a parent/carer arrives. The school tries to ensure that the staff member will be one the pupil knows.

Generally, staff should not take pupils to hospital in their own car.

### Administration of medication at school

All pupils at this school with medical conditions have easy access to their emergency medication.

Pupils know where their medication is stored and how to access it.

Pupils understand the arrangements for Mrs Wright and Miss Kitt to assist in helping them take their medication safely.

Administration – general

All use of medication defined as a controlled drug, even if the pupil can administer the medication themselves, is done under the supervision of a named member of staff at this school.

This school understands the importance of medication being taken as prescribed. Non-prescribed medicines, such as Calpol, may be administered by school staff at the school's discretion, only if the parent or carer is unable to do so, has provided written consent, and has supplied the medicine with clear dosage instructions.

All staff are aware that there is no legal or contractual duty for any member of staff to administer medication or supervise a pupil taking medication unless they have been specifically contracted to do so.

Many other members of staff are happy to take on the voluntary role of administering medication. For medication where no specific training is necessary, any member of staff may administer prescribed and non-prescribed medication to pupils under the age of 16, but only with the written consent of the pupil's parent/carer.

Training is given to all staff members who agree to administer medication to pupils, where specific training is needed. The local authority provides full indemnity.

It may be necessary in some circumstances to administer medication by an adult of a different gender than the pupil, and preferably witnessed by a second adult.

Parents/carers at this school understand that if their child's medication changes or is discontinued, or the dose or administration method changes, that they should notify the school immediately.

If a pupil at this school refuses their medication, staff record this and follow procedures. Parents/carers are informed as soon as possible.

If a pupil at this school needs supervision or access to medication during home-to-school transport organised by the local authority, it is the responsibility of the local authority to arrange medical training. It is the responsibility of the school to inform the local authority of any pupils in their care who have specific needs.

All staff attending off-site visits are aware of any pupils with medical conditions on the visit. They receive information about the type of condition, what to do in an emergency and any

other additional support necessary, including any additional medication or equipment needed. Parents/carers will be asked to provide extra doses of medication for off-site visits where there is a chance that return travel could be delayed, e.g. trips into London where roads may become congested or public transport cancelled and residential trips (see 'Residential Visits').

If a trained member of staff, who is usually responsible for administering medication, is not available we make alternative arrangements to provide the service. This is always addressed in the risk assessment for off-site activities.

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If a pupil misuses medication, either their own or another pupil's, their parents/carers are informed as soon as possible. These pupils are subject to the school's usual disciplinary procedures.

### Storage of medication at school

#### Safe storage – emergency medication

Emergency medication is readily available to pupils who require it at all times during the school day or at off-site activities.

Pupils, whose healthcare professionals and parents/carers advise the school that their child is not yet able or old enough to self-manage and carry their own emergency medication, know exactly where to access their emergency medication.

#### Safe storage – non-emergency medication

All non-emergency medication is kept in a secure place, in a lockable cupboard in a cool dry place. Pupils with medical conditions know where their medication is stored and how to access it.

Staff ensure that medication is only accessible to those for whom it is prescribed.

#### Safe storage – general

There is a named member of staff who ensures the correct storage of medication at school (Maxine Fowler).

Three times a year the identified member of staff checks the expiry dates for all medication stored at school.

The identified member of staff, along with the parents/carers of pupils with medical conditions, ensures that all emergency and non-emergency medication brought in to school is clearly labeled with the pupil's name, the name and dose of the medication and the frequency of dose.

All medication is supplied and stored, wherever possible, in its original containers. All medication is labelled with the pupil's name, the name of the medication, expiry date and the prescriber's instructions for administration, including dose and frequency.

Medication is stored in accordance with instructions, paying particular note to temperature.

Some medication for pupils at this school may need to be refrigerated. All refrigerated medication is stored in an airtight container and is clearly labelled. Refrigerators used for the storage of medication are in a secure area, inaccessible to unsupervised pupils or lockable as appropriate.

All medication is sent home with pupils at the end of the school year. Medication is not stored in summer holidays.

It is the parent's responsibility to ensure new and in date medication comes into school on the first day of the new academic year.

### Safe disposal

Parents/carers at this school are asked to collect out-of-date medication.

If parents/carers do not pick up out-of-date medication, or at the end of the school year, medication is taken to a local pharmacy for safe disposal.

A named member of staff is responsible for checking the dates of medication and arranging for the disposal of any that have expired. This check is done at least three times a year and is always documented.

Sharps boxes are used for the disposal of needles. Parents/carers obtain sharps boxes from the child's GP or Paediatrician on prescription. All sharps boxes in this school are stored in a locked cupboard unless alternative safe and secure arrangements are put in place on a case-by-case basis.

If a sharps box is needed on an off-site or residential visit, a named member of staff is responsible for its safe storage and return to a local pharmacy or to school or the pupil's parent/carer.

Currently, the collection and disposal of sharps boxes is carried out by the relevant child's parent/carer.

**Intimate care:** The school is committed to supporting children with intimate care needs, including those who need supervision of intimate self-care. Our school aims to ensure that children who require intimate care are treated with dignity at all times and that safeguarding considerations for both the child and adult involved are respected.

### Record Keeping

#### **Enrolment forms**

Parents/carers at this school are asked if their child has any health conditions or health issues on the enrolment form. Parents/carers are asked to update the records we hold for their child(ren) as and when necessary. Parents/carers of new pupils are also asked to provide this information on enrolment forms.

## Healthcare Plans

### **Drawing up Healthcare Plans**

We use a Healthcare Plan to record important details about individual children's medical needs at school, their triggers, signs, symptoms, medication and other treatments. Further documentation can be attached to the Healthcare Plan if required.

See Appendix 1

A Healthcare Plan, accompanied by an explanation of why and how it is used, is sent to all parents of pupils with a long-term medical condition. This is sent:

- at the start of the school year
- at enrolment
- when a diagnosis is first communicated to the school.

If a pupil has a short-term medical condition that requires medication during school hours, a medication form is completed by the child's parent.

See Appendix 2

Where possible, the SENCO (Carly Tominey) will meet with the parents, healthcare professional and pupil with a medical condition, to fill out the pupil's Healthcare Plan together.

If this is not possible then parents and pupils are asked to complete the Healthcare form at home and return it to the school SENCO.

### **School Healthcare Plan register**

Healthcare Plans are used to create a centralised register of pupils with medical needs. The SENCO has responsibility for the register at this school.

The SENCO follows up with the parents any further details on a pupil's Healthcare Plan required or if permission for administration of medication is unclear or incomplete.

### **Ongoing communication and review of Healthcare Plans**

Parents at this school are regularly reminded to update their child's Healthcare Plan if their child has a medical emergency or if there have been changes to their symptoms (getting better or worse), or their medication and treatments change.

Staff at this school use opportunities such as teacher-parent interviews and home-school diaries to check that information held by the school on a pupil's condition is accurate and up to date.

Every pupil with a Healthcare Plan at this school has their plan discussed and reviewed at least once a year.

### **Storage and access to Healthcare Plans**

Parents and pupils at this school are provided with a copy of the pupil's current agreed Healthcare Plan.

Healthcare Plans are kept in the Medical Conditions Folder, which is kept in the school office.

Apart from the central copy, Class teachers securely hold copies of pupils' Healthcare Plans. These copies are updated at the same time as the central copy.

All members of staff who work with groups of pupils have access to the Healthcare Plans of pupils in their care.

When a member of staff is new to a pupil group, for example due to staff absence, the school makes sure that they are made aware of (and have access to) the Healthcare Plans of pupils in their care.

This school ensures that all staff protect pupil confidentiality.

### **Use of Healthcare Plans**

Healthcare Plans are used by this school to:

- inform the appropriate staff and supply teachers about the individual needs of a pupil with a medical condition in their care.
- identify common or important individual triggers for pupils with medical conditions at school that bring on symptoms and can cause emergencies. This school uses this information to help reduce the impact of common triggers.
- ensure that all medication stored at school is within the expiry date.
- ensure this school's local emergency care services have a timely and accurate summary of a pupil's current medical management and healthcare in the event of an emergency.
- remind parents/carers of pupils with medical conditions to ensure that any medication kept at school for their child is within its expiry dates. This includes spare medication.

### Consent to administer medicines

If a pupil requires regular medication at school, parents are asked to provide consent attached to their child's Healthcare Plan giving the pupil or staff permission to administer medication on a regular/daily basis, if required. A separate form is sent to parents for pupils taking short courses of medication.

All parents/carers of pupils with a medical condition who may require medication in an emergency are asked to provide consent on the Healthcare Plan for staff to administer medication.

If a pupil requires regular/daily help in administering their medication then the school outlines the school's agreement to administer this medication on the pupil's Healthcare Plan. The school and parents keep a copy of this agreement.

Parents/carers of pupils with medical conditions at this school are all asked at the start of the school year on the Healthcare Plan if they and their child's healthcare professional believe the child is able to manage and administer their own emergency medication.

#### Other record keeping

This school keeps an accurate record of each occasion an individual pupil is given or supervised taking medication. Details of the supervising staff member, pupil and dose are also recorded and parents/carers are informed as soon as possible. These records are kept for 3 years.

See Appendix 3

This school holds training on common medical conditions once a year. A log of the medical condition training is kept by the school and reviewed every 12 months to ensure all new staff receives training. This can be found in the Medical Conditions folder located in the school office.

This school keeps an up-to-date list of members of staff who have agreed to administer medication and have received the relevant training.

#### Inclusive Practice

##### Physical environment

We are committed to providing a physical environment that is accessible to pupils with medical conditions.

Pupils with medical conditions are included in the consultation process to ensure the physical environment at this school is accessible.

Our commitment to an accessible physical environment includes out-of-school visits. We recognise that this sometimes means changing activities or locations.

#### Social interactions

We ensure the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured social activities, including during breaks and before and after school.

We ensure the needs of pupils with medical conditions are adequately considered to ensure they have full access to extended school activities such as school discos, breakfast club, school productions, after school clubs and residential visits.

All staff at this school are aware of the potential social problems that pupils with medical conditions may experience. Staff use this knowledge to try to prevent and deal with problems in accordance with the school's anti-bullying and behaviour policies.

Staff use opportunities such as personal, social and health education (PSHE) learning to raise

awareness of medical conditions amongst pupils and to help create a positive social environment.

### Exercise and physical activity

We understand the importance of all pupils taking part in sports, games and activities.

We ensure all classroom teachers, PE teachers and sports coaches make appropriate adjustments to sports, games and other activities to make physical activity accessible to all pupils.

We ensure all classroom teachers, PE teachers and sports coaches understand that pupils should not be forced to take part in an activity if they feel unwell.

Teachers and sports coaches are aware of pupils in their care who have been advised to avoid or to take special precautions with particular activities.

We ensure all PE teachers, classroom teachers and school sports coaches are aware of the potential triggers for pupils' medical conditions when exercising and how to minimize these triggers.

We ensure all pupils have the appropriate medication or food with them during physical activity and that pupils take them when needed.

We ensure all pupils with medical conditions are actively encouraged to take part in out-of-school clubs and team sports.

### Education and learning

We ensure that pupils with medical conditions can participate fully in all aspects of the curriculum and make sure that appropriate adjustments and extra support are provided.

If a pupil is missing a lot of time at school, they have limited concentration or they are frequently tired, the class teacher will make reasonable adjustments, taking into consideration that this may be due to their medical condition.

Teachers at this school are aware of the potential for pupils with medical conditions to have special educational needs (SEND). Pupils with medical conditions who are finding it difficult to keep up with their studies are referred to the SEND coordinator. The school's SEND coordinator consults the pupil, parents and the pupil's healthcare professional to ensure the effect of the pupil's condition on their schoolwork is properly considered.

This school ensures that learning about common medical conditions are incorporated into PSHE lessons and other parts of the curriculum.

Pupils at this school learn about what to do in the event of a medical emergency.

### Residential visits

Risk assessments are carried out by this school prior to any out-of-school visit and medical conditions are considered during this process. Factors this school considers include: how all pupils will be able to access the activities proposed, how routine and emergency medication will be stored and administered, and where help can be obtained in an emergency.

Parents/carers are sent a residential visit form to be completed and returned to school shortly before their child leaves for an overnight or extended day visit. This form requests up-to-date information about the pupil's current condition and their overall health. This provides essential and up-to-date information to relevant staff and school supervisors to help the pupil manage their condition while they are away. This includes information about medication not normally taken during school hours.

All residential visit forms are taken by the relevant staff member on visits and for all out-of-school hours activities where medication is required. These are accompanied by a copy of the pupil's Healthcare Plan.

All parents of pupils with a medical condition attending a school trip or overnight visit are asked for consent, giving staff permission to administer medication at night or in the morning if required.

The residential visit form also details what medication and what dose the pupil is currently taking at different times of the day. It helps to provide up-to-date information to relevant staff and supervisors to help the pupil manage their condition while they are away.

See Appendix 4

### Triggers

We are committed to reducing the likelihood of medical emergencies by identifying and reducing triggers both at school and on out-of-school visits.

School staff have been given training on medical conditions. This training includes detailed information on how to avoid and reduce exposure to common triggers for common medical conditions.

The school has a list of common triggers for the common medical conditions at this school (see Appendix 5). The school has written a trigger reduction schedule and is actively working towards reducing or eliminating these health and safety risks.

Written information about how to avoid common triggers for medical conditions has been provided to all school staff.

See Appendix 5.

This school uses Healthcare Plans to identify individual pupils who are sensitive to particular triggers. This ensures that these individual pupils remain safe during all lessons and activities throughout the school day.

The school reviews medical emergencies and incidents to see how they could have been avoided. Appropriate changes to this school's policy and procedures are implemented after each review. This is then shared with the school's governing body during the Headteacher's termly report or the Health & Safety / Safeguarding Committee.

School will follow latest medical advice from NHS and individual child plans for common ailments that arise such as asthma, bumps, cuts and bruises.

### Roles and Responsibilities

This school works in partnership with all interested and relevant parties including the school's governing body, all school staff, parents, employers, community healthcare professionals and pupils to ensure the policy is planned, implemented and maintained successfully.

The following roles and responsibilities are used for the medical conditions policy at this school. These roles are understood and communicated regularly.

Head teacher

#### **This school's head teacher has a responsibility to:**

- ensure the school is inclusive and welcoming and that the medical conditions policy is in line with local and national guidance and policy frameworks.
- liaise between interested parties including pupils, school staff, SENCO, pastoral support/welfare officers, teaching assistants, school nurses, parents, governors, the school health service, the local authority transport service, and local emergency care services.
- ensure the policy is put into action, with good communication of the policy to all.
- ensure every aspect of the policy is maintained.
- delegate the SENCO to ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place using pupils' Healthcare Plans.
- ensure pupil confidentiality.
- assess the training and development needs of staff and arrange for them to be met.
- ensure all supply teachers and new staff know the medical conditions policy
- ensure that the named member of staff will check the expiry date of medicines kept at school.
- monitor and review the policy once a year, with input from pupils, parents, staff and external stakeholders.
- update the policy at least once a year according to review, recommendations and recent local and national guidance and legislation.
- report back to all key stakeholders about implementation of the medical conditions policy.

#### **All staff at this school have a responsibility to:**

- be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency.
- understand the school's medical conditions policy.

- know which pupils in their care have a medical condition and be familiar with the content of the pupil's Healthcare Plan.
- allow all pupils to have immediate access to their emergency medication.
- maintain effective communication with parents/carers including informing them if their child has been unwell or hurt at school.
- ensure pupils who carry their medication with them have it when they go on a school visit or out of the classroom.
- be aware of pupils with medical conditions who may be experiencing bullying or need extra social support.
- understand the common medical conditions and the impact it can have on pupils (pupils should not be forced to take part in any activity if they feel unwell).
- ensure all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in.
- ensure pupils have the appropriate medication or food with them during any exercise and are allowed to take it when needed.

Teaching staff

**Teachers at this school have a responsibility to:**

- Take reasonable steps to help a child who has been unwell (short term) to re-engage with learning once they return. For long term absences due to sickness, an individualised, reintegration plan will be co-ordinated by the child's class teacher and the school's SEND co-ordinator, Carly Tominey
- be aware that medical conditions can affect a pupil's learning and provide extra help when pupils need it.
- liaise with parents/carers, the pupil's healthcare professionals, special educational needs coordinator and welfare officers if a child is falling behind with their work because of their condition.
- use opportunities such as PSHE and other areas of the curriculum to raise pupil awareness about medical conditions.

School nurse or school healthcare professional

**The school nurse at this school has a responsibility to:**

- help update the school's medical conditions policy.
- help provide regular training for school staff in managing the most common medical conditions at school.
- provide information about where the school can access other specialist training.
- Meet Termly with the school's Special Educational Needs Coordinator to discuss children's health needs, Individual Healthcare plans and training needs of the staff.

First aider

**First aiders at this school have a responsibility to:**

- give immediate help to casualties with common injuries or illnesses and those arising from specific hazards with the school
- when necessary ensure that an ambulance or other professional medical help is called.

Special Educational Needs Coordinator (SENCO)

**The Senco at this school has the responsibility to:**

- help update the school's medical condition policy.
- know which pupils have a medical condition and which have special educational needs because of their condition.
- ensure teachers make the necessary arrangements if a pupil needs special consideration or access arrangements in exams.
- Along with the Headteacher ensure that Individual Healthcare plans and training needs of the staff are kept up-to-date.

Local doctors and specialist healthcare professionals

**Individual doctors and specialist healthcare professionals caring for pupils who attend this school, have a responsibility to:**

- complete the pupil's Healthcare Plans provided by parents/carers.
- where possible, and without compromising the best interests of the child, try to prescribe medication that can be taken outside of school hours.

APPENDIX 1

**Individual healthcare plan**

Name of school/setting	Park Street Church of England Primary School
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

**Family Contact Information**

Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

**Clinic/Hospital Contact**

Name	
Phone no.	

**G.P.**

Name	
Phone no.	

Who is responsible for providing support in school

Class Teacher and Teaching Assistant

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 off-site activities*)

•

Plan developed with

Staff training needed/undertaken – who, what, when

## APPENDIX 2: Parental agreement for setting to administer medicine

Park Street C of E Primary School will not give your child medicine unless you complete and sign this form. The school has a policy that the staff can administer medicine.

Date for review to be initiated by	
Name of school	Park Street Church of England Primary
Name of child	
Date of birth	
Class	
Medical condition or illness	

### Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

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

### Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature \_\_\_\_\_

## APPENDIX 3: Record of medicine administered to an individual child

Name of school	Park Street Church of England Primary
Name of child	
Date medicine provided by parent	
Class	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Staff signature \_\_\_\_\_

Signature of parent/carer \_\_\_\_\_

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			



APPENDIX 5: PARK STREET C OF E. SCHOOL

PARENTAL CONSENT FORM

Visit	
Group Leader	
Date of visit	

To be completed by the parent/adult responsible for the child:

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

Date of birth: \_\_\_\_\_

Does the above person:

- Have a medical condition requiring treatment or medication? Y/N
- Have an allergy to certain medications? Y/N
- Is he/she able to administer his/her own medication? Y/N

Please give details of medical condition/treatments or allergies to medications below:

\_\_\_\_\_

Has he/she been in contact with any contagious or infectious diseases or suffered from anything in the last four weeks that may become contagious or infectious

Y/N

If yes, give details:

\_\_\_\_\_

Does he/she have any special dietary requirements?

If yes, give details: Y/N

\_\_\_\_\_

I wish to draw the following to the attention of the Group Leader

(eg allergies, phobias, travel sickness, toileting difficulties, sleep walking, recent operations or treatments, other conditions which may affect fitness to participate in certain activities)

\_\_\_\_\_

**SWIMMING ABILITY** If water based activities are planned, please detail the child's swimming ability below:

**Emergency Contact Information:**

	<i>Main contact</i>	<i>Alternative contact</i>
Name		
Relationship		
Address		
Telephone numbers: Day Evening Mobile		

**Family Doctor details:**

Name:

Address:

Telephone numbers:

**Declaration:**

I have received and understood the details of the visit.

I agree that \_\_\_\_\_

- Can participate in the visit and activities described;
- Is in good health and fit to participate in the activities described;
- Can receive medical treatment as necessary.

I undertake to inform the Group Leader as soon as possible of any change in medical circumstances.

I acknowledge the need for my child to conform to the school's high standards of behaviour and agree to the school's procedures in this respect, including collecting my child if his/her behaviour causes concern.

Signed: \_\_\_\_\_

Name in capitals: \_\_\_\_\_

Relationship: \_\_\_\_\_

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

Address:

Telephone Number:

## How to avoid common triggers for Medical Conditions

### Asthma

When you come into contact with something that irritates your lungs – known as a trigger – your airways become narrow, the muscles around them tighten, and there is an increase in the production of sticky mucus (phlegm).

Common asthma triggers include:

- house dust mites
- animal fur
- pollen
- cigarette smoke
- exercise
- viral infections

### Anaphylaxis

#### **Causes and triggers**

Anaphylaxis is the result of your body's immune system overreacting to a harmless substance, such as food. Substances that provoke allergic reactions are known as allergens. Anaphylaxis usually develops within minutes of contact with an allergen, though sometimes the reaction can happen hours later.

The most widely reported triggers of anaphylaxis are:

- insect stings, particularly wasp and bee stings
- nuts
- other types of foods, such as milk and seafood
- certain medications, such as some types of antibiotics