

# Supporting Children at School with Medical Conditions



**Author:**

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**Responsibility:**

**Environment Health and  
Safety Committee**

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## Introduction

Section 100 of The Children and Families Act 2014 places a duty on the governing body of Ringwood Junior School to make arrangements for supporting children at their premises with medical conditions. The Department of Education have produced statutory guidance 'Supporting Pupils at school with Medical Conditions' and we will have regard to this guidance when meeting this requirement and writing this policy. We will endeavour to ensure that children with medical conditions are properly supported so that they have full access to education, including school trips and physical education. The aim is to ensure that all children with medical conditions, in terms of both their physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

It is our policy to ensure that all medical information will be treated confidentially by the Headteacher and staff. All administration of medicines is arranged and managed in accordance with the Supporting Pupils at school with Medical conditions document. All staff have a duty of care to follow and co-operate with the requirements of this policy. Where children have a disability, the requirement of the Equality Act 2010 will apply. Where children have an identified special need, the SEN Code of Practice will also apply.

We recognise that medical conditions may impact social and emotional development as well as having educational implications.

## Key Roles and Responsibilities

**Statutory Requirement: The governing body should ensure that the school's policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support children at school with medical conditions.**

### ***The Governing Body:***

will make arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed and implemented. They should ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. The Governing Body will ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. They will also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

### ***The Headteacher:***

will ensure that this school's policy is developed and effectively implemented with

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partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. The Headteacher will ensure that all staff who need to know are aware of the child's condition and that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. The Headteacher has overall responsibility for the development of individual healthcare plans. The Headteacher will ensure that school staff are appropriately insured and are aware that they are insured to support pupils in this way. The Headteacher will contact the school nursing service in the case of any child who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse.

### ***Teachers and Support Staff:***

any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they will take into account the needs of pupils with medical conditions that they teach. School staff will receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

### ***Parents:***

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 e.g. provide medicines and equipment and ensure they, or another nominated adult, are contactable at all times.

### ***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.

### ***The Local School Nurse Team:***

is responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they should do this before the child starts at the school. They would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with

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medical conditions, but may support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training. School nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs - for example, there are good models of local specialist nursing teams offering training to local school staff, hosted by a local school. Community nursing teams will also be a valuable potential resource for a school seeking advice and support in relation to children with a medical condition.

## Identifying Children with Medical Conditions

**Statutory Requirement: The Governing body will ensure that the policy sets out the procedures to be followed whenever a school is notified that a pupil has a medical condition.**

We will aim to identify children with medical needs on entry to the school by working in partnership with parents/ carers and following the process outlined in the document 'Process for identifying children with a medical condition that may require support in school' (see *Appendix 1*) produced by the Southern Health School Nursing Team. We will use the Hampshire County Council template 'Health Questionnaire for Schools' (see *Appendix 2*) to obtain the information required for each child's medical needs to ensure that we have appropriate arrangements in place prior to the child commencing at the school to support them accordingly.

Where a formal diagnosis is awaited or is unclear, we will plan to implement arrangements to support the child, based on the current evidence available for their condition. We will ensure that every effort is made to involve some formal medical evidence and consultation with the parents.

## Individual Healthcare Plans

**Statutory Requirement: The Governing body will ensure that the school's policy covers the role of individual healthcare plans, and who is responsible for their development in supporting children at school with medical conditions.**

We recognise that Individual Healthcare Plans (see *appendix 3*) are recommended in particular 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 will agree based on evidence when a healthcare plan would be inappropriate or disproportionate. Where children require an individual healthcare plan it will be the responsibility of the SENDCo, Senior Leadership Team and/or Medical Team to work with parents and relevant healthcare professionals to write the plan.

A Healthcare Plan (and its review) may be initiated in consultation with the parent/carer, by a member of school staff or by a healthcare professional involved in providing care to the child. The SENDCo, Senior Leadership Team and/or Medical Team will work in partnership with the parents/carer, and a relevant healthcare professional e.g. school, specialist or children's community nurse, who can best advise on the particular needs

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of the child to draw up and/or review the plan. Where a child has a Special Educational Need identified in an Education Health and Care Plan (EHCP), the Individual Healthcare Plan will be linked to or become part of that EHCP.

We may also refer to the flowchart contained within the document 'Process for identifying children with a medical condition that may require support in school' (see *Appendix 1*) for identifying and agreeing the support a child needs and then developing the Individual Healthcare Plan.

If a child is returning following a period of hospital education or alternative provision (including home tuition), that we will work with Hampshire County Council and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

**Statutory Requirement: The governing body should ensure that all plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed. Plans should be developed with the child's best interests in mind and ensure that the school assesses and manages the risks to the child's education, health and social wellbeing and minimise disruption.**

Plans will be reviewed annually at the start of the academic year at the first Environment, Health and Safety Committee meeting, or, if the child's circumstances change at the next meeting that follows.

**Statutory Requirement: When deciding what information should be recorded on Individual Healthcare Plans, the governing body should consider the following:**

- the medical condition, its triggers, signs, symptoms and treatments
- the pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons
- specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- the level of support needed (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, and authorised by the Headteacher / Senior Leadership Team, for medication to be administered by a member of staff, or self-administered by the pupil during school hours – 'Parental agreement for setting to administer medicine' (see *appendix 4*)
- separate arrangements or procedures required for school trips or other school

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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; and
- 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.

## Staff Training

**Statutory Requirement: The Governing Body should ensure that this policy clearly sets out how staff will be supported in carrying out their role to support children with medical conditions, and how this will be reviewed. It should specify how training needs will be assessed and by whom training will be commissioned and provided. The school policy should be clear that any member of school staff providing support to a child with medical needs should have received suitable training.**

Training needs should have been identified during the development, or review, of Individual Healthcare Plans. Staff must not administer prescription medicines without the appropriate 'Managing and Administering Medicines' training or undertake any health care procedures without relevant training (this training is to be updated if there are any changes in the Individual Healthcare Plans).

Some staff may already have some knowledge of the specific support needed by a child with a medical condition and so extensive training may not be required. Staff who provide support to pupils with medical conditions should be included in meetings where this is discussed.

All new staff will be inducted on the policy when they join the school through an Induction meeting with the Assistant Headteacher. Records of this training will be stored in the Inductions File.

All nominated staff will be provided awareness training on the school's policy for supporting children with medical conditions which will include what their role is in implementing the policy. This training will be carried out annually or following a review of the policy. The awareness training will be provided to staff through Staff meetings or Inset days.

We will retain evidence that staff have been provided the relevant awareness training on the policy by signature sheets.

Where required we will work with the relevant healthcare professionals to identify and agree the type and level of training required and identify where the training can be obtained from. This will include ensuring that the training is sufficient to ensure staff are competent and confident in their ability to support children with medical conditions. The training will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs and therefore allow them to fulfil the

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requirements set out in the Individual Healthcare Plan.

Any training undertaken will form part of the overall training plan for the school and refresher awareness training will be scheduled at appropriate intervals agreed with the relevant healthcare professional delivering the training.

A staff training record will be completed by the School Business Manager to document the type of awareness training undertaken, the date of training and the competent professional providing the training.

## The Child's Role

**Statutory Requirement: The Governing body will ensure that the school's policy covers arrangements for children who are competent to manage their own health needs and medicines.**

Where possible and in discussion with parents, children that are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be recorded in their individual healthcare plan. The healthcare plan will reference what will happen should a child who self-administers refuse to take their medication (this will normally be informing the parent/carer at the earliest opportunity). Where appropriate, we will endeavour to ensure that children in Year 6 can carry their own inhaler or have easy access to allow for quick self-medication. We will agree with relevant healthcare professionals/parent the appropriate level of supervision required and document this in their healthcare plan.

## Managing Medicines on School Premises

**Statutory Requirement: The Governing Body will ensure that the school's policy is clear about the procedures to be followed for managing prescribed medicines.**

The administration of medicines is the overall responsibility of the parents/carers. Where clinically possible we will encourage parents to ask for medicines to be prescribed in dose frequencies which enable them to be taken outside of school hours. However, the Headteacher is responsible for ensuring children are supported with their medical needs whilst on site, therefore this may include managing medicines where it would be detrimental to a child's health or school attendance not to do so.

We will not give prescription or non-prescription medicines to a child under 16 without their parent's/carers written consent (a 'parental agreement for setting to administer medicines' form will be used to record this). A documented tracking system to record all medicines received in and out of the premises is in place by the office team (see *appendix 5*).

The name of the child, dose, expiry and shelf life dates will be checked before medicines are administered.

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On occasions where a child refuses to take their medication the parents will be informed at the earliest available opportunity.

We will only accept prescribed medicines that are in date, labelled, provided in the original container as dispensed by the pharmacist and include instructions for administration, their dosage and storage. Insulin is the exception, which must still be in date but will generally be available to schools inside an insulin pen or a pump, rather than its original container.

Staff should make sure that a child's inhaler for asthma is stored in the Medical Room and clearly marked with the child's name. For those Year 6 children who have their inhalers with them and are self-administering their inhalers, there is no need for a member of staff to record the puffs. In an emergency, the inhaler will be taken to the child. On PE sessions/Sports Day, the class teacher/LSA, will collect all class inhalers for easy access and return to the medical room after use.

Controlled drugs, together with the signed authorisation, will be clearly labelled with the child's name and securely stored in the school safe which only named staff will have access to. We will ensure that the drugs are easily accessible in an emergency situation. A record will be kept of any doses used and the amount of the controlled drug held in school (see appendix 6).

Emergency medicines will be stored in the medical room, but not locked away, to ensure they are easily accessible in the case of an emergency.  
Types of emergency medicines include:

- Adrenaline auto-injectors for acute allergic reactions
- Inhalers for asthmatics
- Injections of Glucagon for diabetic hypoglycaemia

On occasions when children require paracetamol e.g. Calpol or an antihistamine such as Piriteze, it is our policy to administer this from our school supply providing that written consent from the parents has been received in advance. The member of staff administering should check with the parent prior to administration, to confirm when the previous dose was given and check the maximum dosage. Parents can arrange to come into school to administer their child's own medication if they prefer.

We will never administer aspirin or medicine containing Ibuprofen to any child under 16 years old unless prescribed by a doctor.

## **Emergency Asthma Inhaler and Spacers**

Guidance on the use of emergency salbutamol inhalers in school by the Department of Health will be followed; it states that the emergency salbutamol inhaler should only be used by children:

- Who already have asthma and have a reliever inhaler prescribed for them e.g. Salbutamol

- 
- Whose parents/carers have completed and signed our 'Use of Emergency Salbutamol Inhaler' consent form (see *Appendix 7*).

## **Medication Storage**

All medication will be stored safely in the Medical Room, except controlled drugs which will be stored in in the school safe.

Where medicines need to be refrigerated, they will be stored in a in a dedicated refrigerator in the Medical Room in a clearly labelled container. The temperature of the fridge will be taken daily when storing medicine and recorded/filed.

Children will be made aware of where their medicines are at all times and how to access them with supervision.

Medicines such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to children and not locked away. We will also ensure that they are readily available when outside of the school premises or on school trips. Storage of medication whilst off site will be maintained at a steady temperature and secure. There will be appropriately trained staff present to administer day to day and emergency medication and copies of Individual Health Care plans will be taken off site to ensure appropriate procedures are followed.

## **Medication Disposal**

It is the responsibility of the parents/carers to dispose of their child's medicines. It is our policy to return any medicines that are no longer required including those where the date has expired to the parents/carers. Parents/carers will be informed of this when the initial agreements are made to administer medicines. Medication returned to parent/carers will be documented on the tracking medication form.

Sharps boxes provided by parents, will be in place for the disposal of needles. Collection of the sharps box will be arranged with the parent, who will dispose of it safely.

A medical waste bin is provided in the Medical Room for the disposal of bodily fluids and items contaminated by the fluids.

## **Medical Accommodation**

The Medical Room will be used for all medical treatment purposes.

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## Record keeping

**Statutory Requirement: The governing body should ensure that written records are kept of all medicines administered to children as stated in the DfE guidance document.**

A record of what has been administered including how much, when and by whom, will be recorded on a 'record of prescribed medicines administered' form. The form will be kept on file. Any possible side effects of the medication will also be noted and reported to the parent/carers.

## Emergency Procedures

**Statutory Requirement: The Governing body will ensure that the school's policy sets out what should happen in an emergency situation.**

Where a child has an Individual Healthcare Plan, this will clearly define what constitutes an emergency and provide a process to follow. All relevant staff will be made aware of the emergency symptoms and procedures. We will ensure other children in the school know what to do in the event of an emergency i.e. informing a member of staff immediately if they are concerned about the health of another child.

Where a child is required to be taken to hospital, a member of staff will stay with the child until their parents arrives, this includes accompanying them to hospital by ambulance if necessary (taking any relevant medical information, care plans etc that the school holds).

## Day trips/off site activities

**Statutory Requirement: The Governing body should ensure that their 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.**

We will ensure that teachers are aware of how a child's medical condition will impact on their participation in any off-site activity or day trip, but we will ensure that there is enough flexibility for all children to participate according to their own abilities within reasonable adjustments.

We will consider what reasonable adjustments we might make to enable children with medical needs to participate fully and safely on visits. We will carry out a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. We will consult with parents and pupils and take advice from the relevant healthcare professional to ensure that pupils can participate safely.

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## Other Issues

**Home-to-school transport** – this is the responsibility of local authorities, who may find it helpful to be aware of a pupil's individual healthcare plan and what it contains, especially in respect of emergency situations. This may be helpful in developing transport healthcare plans for pupils with life-threatening conditions.

## Unacceptable Practice

**Statutory Requirement: The governing body will ensure that the school's policy is explicit about what practice is not acceptable.**

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

## Liability and Indemnity

Staff at the school are indemnified under the County Council arrangements. The County Council have extended the self-insurance to indemnify school staff at Ringwood Junior school who have agreed to administer medication or undertake a medical procedure to children. To meet the requirements of the indemnification, we will ensure that staff at the school have parents' permission for administering medicines and members of staff will have had training on the administration of the medication or medical procedure.

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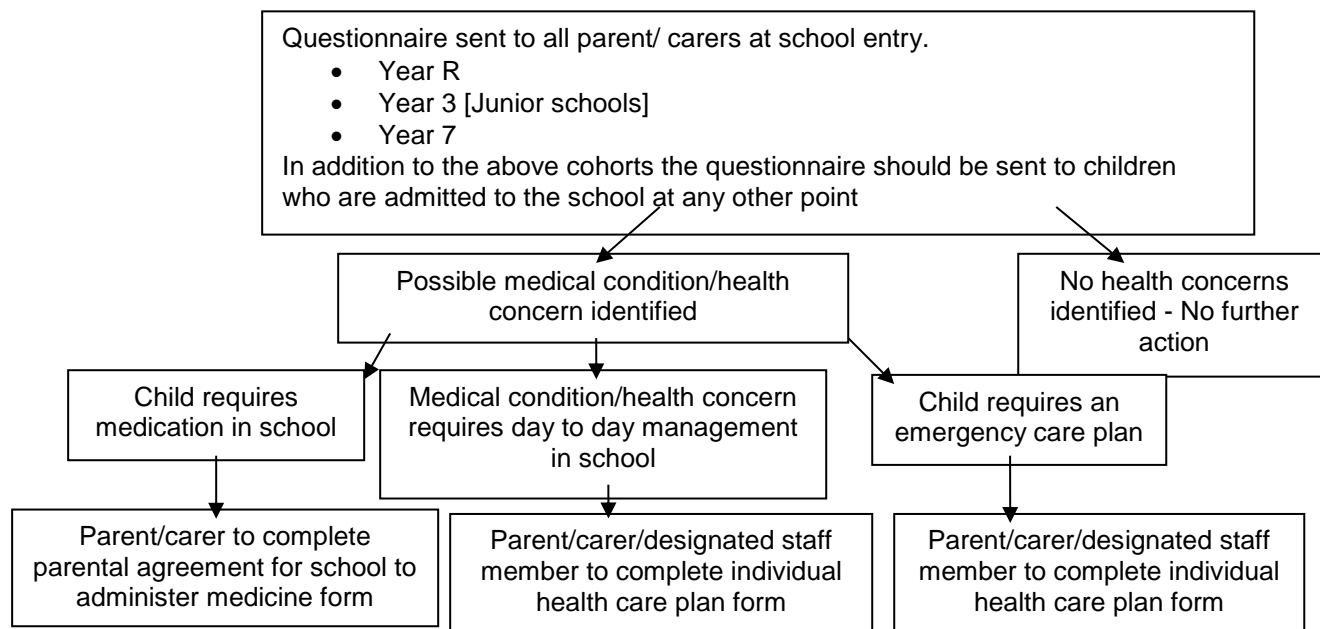
## Complaints

Should parents or children be dissatisfied with the support provided they can discuss their concerns directly with the Headteacher. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

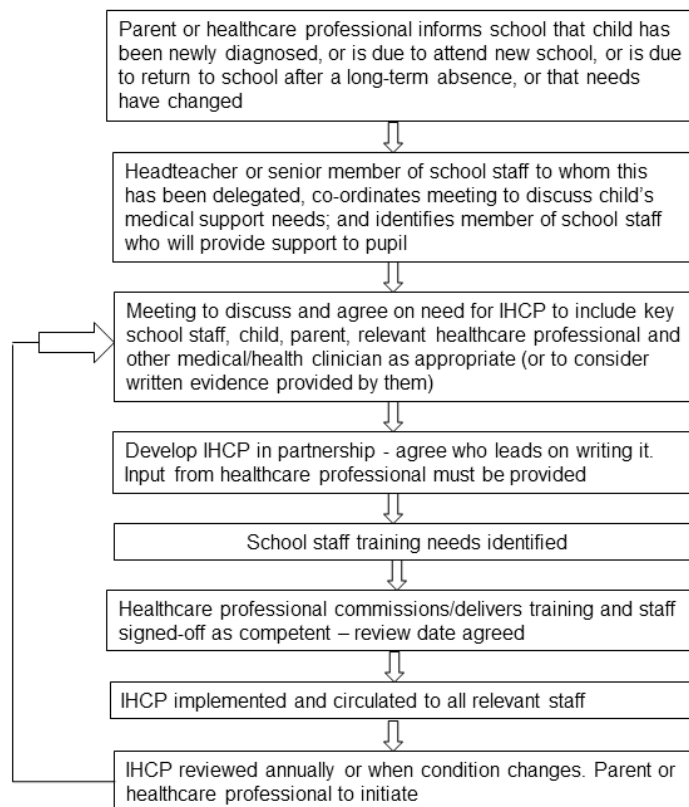
# Appendix 1

## Suggested process for identifying children or young people with a medical condition that may require support in school

Not all children with a health condition will require a health care plan in school however the form will help schools to ascertain which children require support. In addition to this schools may be informed at any other point by a parent or health professional if a child is newly diagnosed with a health condition.



Please see sample flowchart below from the Supporting Pupils with Medical Conditions, DfE guidance:



# Appendix 2



## Medical Conditions/Allergies/Dietary Requirements questionnaire

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. Could you 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.....

.....Post code .....

Does your child have a medical condition/ health concern/allergy/dietary requirement?  YES <input type="checkbox"/> NO <input type="checkbox"/> If YES please give details
Does your child have a medical condition/health concern/allergy/dietary requirement that needs to be managed during the school day?  YES <input type="checkbox"/> NO <input type="checkbox"/> If YES please give details
Does your child take medication during the school day?  YES <input type="checkbox"/> NO <input type="checkbox"/> If YES please give details
Does your child have a health care plan that should be followed in a medical emergency?  YES <input type="checkbox"/> NO <input type="checkbox"/> 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 \_\_\_\_\_

# Appendix 3



Hightown Road  
 Ringwood  
 Hampshire  
 BH24 1NH  
 Telephone: 01425 473554  
 Facsimile: 01425 471215  
 E-mail: [admin.office@ringwood-junior.hants.sch.uk](mailto:admin.office@ringwood-junior.hants.sch.uk)  
 Website: [www.ringwood-junior.hants.sch.uk](http://www.ringwood-junior.hants.sch.uk)  
 Headteacher: Mrs S-A Evans  
 BSc Hons, PGCE, NPQH

<b>Individual Healthcare Plan</b>
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Child's name	
Class	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

**Family Contact Information**

1. Name	
Phone no. (work)	
(home)	
(mobile)	
2. 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	
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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

Form copied to

# Appendix 4

## Parental agreement for setting to administer medicine



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

Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

### Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Time to be administered and last date to be given	
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

Parent/Carer Name	
Daytime telephone no.	
Relationship to child	
Address	
I have handed the medicine to	[name]

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

Signature(s)..... Date.....

Authorised by member of SLT: Name ..... Signature .....

Continuation of medication only: Change required (dates/dosage etc.)	
Signature(s).....	Date.....





# Appendix 6



## Medicines Administration Record for Controlled Drugs (e.g. methylphenidate) TWO ADULTS NEEDED AND MEDICATION TO BE KEPT IN LOCKED SAFE

Pupil's SURNAME	Pupil's FIRST NAME	D.O.B	Class

Medicine name	Strength	Form (e.g. syrup/tablets)	Amount needed	At which time(s)

Date	Quantity received	Quantity returned	Expiry date	Parent signature	Staff signature

***Parental agreement for setting to administer the medicine***

Dear Parent/Carer

We require your written permission to administer any medicines in school.

Please do not decant medicines into other containers. **We can only accept medicines in their original container as dispensed by the pharmacy, otherwise we might miss important instructions and warnings.** If your child refuses to take the medicine, we will make every effort to inform you on the same day.

Please hand the medicine over to a member of office or first aid staff personally and sign the form above and below.

For any medicines required on a long-term basis, ask the pharmacy if they can supply a separate labelled supply just for the school (they might need another prescription to do this). We can then keep a separate supply at school without the need for you to send medicines in each day.

What type of help does your child need with this medicine (mark as appropriate): <input type="checkbox"/> I need someone to administer this medicine to my child <input type="checkbox"/> They can take the medicine themselves, but need the following supervision from staff.	
Are there any side effects that the school/setting needs to look out for?  	
Parent/carers name	
Signature	
Relationship to pupil	
Daytime (mobile) telephone no.	
Date	



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## Appendix 7



Hightown Road  
Ringwood  
Hampshire  
BH24 1NH  
Telephone: 01425 473554  
E-mail: [admin.office@ringwood-junior.hants.sch.uk](mailto:admin.office@ringwood-junior.hants.sch.uk)  
Website: [www.ringwood-junior.hants.sch.uk](http://www.ringwood-junior.hants.sch.uk)  
Headteacher: Mrs S-A Evans  
BSc Hons, PGCE, NPQH

Dear Parent/Carer

### **Use of Emergency Salbutamol Inhaler**

We are writing to ask your permission to use the school's emergency Salbutamol Inhaler when required. We will of course follow any instructions specific to your child according to their asthma plan. Please read, complete, sign and return the attached permission form.

After any use, the emergency inhaler will be cleaned and the used spacer disposed of.

Obviously, we would not keep your child in school unnecessarily if they were very poorly and we would contact you if needed.

If we need to use the emergency inhaler with your child, we will advise you of this.

Yours sincerely

A handwritten signature in black ink that reads 'S.A. Evans.' The signature is written in a cursive style.

Mrs S-A Evans  
Headteacher

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**Consent Form for Use of Emergency Salbutamol Inhaler**

**Ringwood Junior School**

**Child showing symptoms of asthma / having an asthma attack:**

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

Child's name: .....

Child's class: .....

Parent/Carer's name: .....

Parent/Carer's signature: .....

Parent/Carer's address: .....

.....

.....

Telephone: .....

Email: .....