

#### JFS School

The Mall, Kenton, Harrow, Middlesex, HA3 9TE.

# JFS MEDICAL POLICY Supporting Students with Medical Conditions

Reviewed in the Summer 2019 & ratified by CSWAB 29.04.19

Next due for review in Summer 2021, subject to intervening legislative changes

Designated Member of Staff: Medical Welfare Officer

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Hours of work: Monday to Thursday: 8.00 am to 4.00 pm

Fridays: 8.00 am to 3.00pm winter Fridays 1.30pm

Please note that the use of the word 'Parent' in this document implies 'Parent/Carer'. All the School policies mentioned in this document can be obtained on request to the Headteacher

#### 1. POLICY STATEMENT AND PRINCIPLES

- 1.1 JFS is an inclusive community that aims to support and welcome students with medical conditions. The School:
  - a) Understands its responsibility to make the school welcoming, inclusive and supporting to all students with medical conditions and provide them the same opportunities as others at the school.
    - We will help to ensure they can:
    - be healthy
    - stay safe
    - enjoy and achieve
    - make a positive contribution
    - achieve economic well-being.
  - b) Will ensure that all staff understand their duty of care to children and young people in the event of an emergency and that all staff feel confident in knowing what to do in an emergency.
  - c) Will ensure that all staff understand the common medical conditions that affect children at this school. Staff receive on-going training and are regularly updated on the impact medical conditions can have on students. The training agenda is based on a review of current Individual Healthcare Plans.
  - d) Understands that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood.
  - e) Understands the importance of medication being taken as prescribed.

- 1.2 The School has consulted on the development of this Medical Policy with a wide-range of key stakeholders within both the School and health settings. These key stakeholders include: students with medical conditions, parents, the school Medical Welfare Officer, school staff, Governors, the Headteacher and relevant Health services and professionals.
- 1.3 The Medical Policy is implemented in conjunction with the School's Health and Safety Policy. It is regularly reviewed, evaluated and updated in accordance with the Department for Education statutory guidance (December 2015) Supporting pupils at school with medical conditions.
- 1.4 Staff, students and parents are kept informed about this policy by the lead SLT member for this area. The Policy is readily accessible to parents and school staff on the School website.
- 1.5 The School ensures that the whole-school environment is inclusive and favourable to students with medical conditions. This includes the physical environment, as well as social, emotional, sporting and educational activities.

#### 2. ROLES AND RESPONSIBILITIES

# 2.1 Parents have the responsibility to:

- Inform the School of any ongoing or temporary medical conditions that their child has which may require first aid, and of any changes to their child's condition;
- Ensure the School has a complete and up-to-date Individual Healthcare Plan (IHCP) for their child;
- Inform the School of any medication their child requires during school hours and/or while taking part in visits, outings or field trips and other out-of-school activities;
- Tell the School about any changes to their child's medication;
- Work with the School to instil a sense of first aid responsibility in their children. This means being alert to health and safety practicalities, and promoting safe behaviour at home;
- Make the School aware of anything that they feel to be a hazard to health and safety on or near the school premises

# 2.2 Students have the responsibility to:

- Report any medical emergencies or incidents to a member of staff immediately;
- Report anything that they feel to be a hazard to health and safety on or near the school premises;
- Take care for their own safety and the safety of others. Students who put themselves, staff, or any other members of the school community or visitors to the School in danger through reckless behaviour may be dealt with under the school's Behaviour Policy;
- Make sure that staff members are aware of any of their own health conditions or ailments
  that may require first aid assistance (for example diabetes, epilepsy). This is particularly
  important in circumstances where students are travelling off the school premises, for
  example for a sports match or a school trip;
- Act in a way which demonstrates a positive awareness to the needs of those with medical conditions and be aware of their responsibility for informing a member of staff if a fellow student is unwell.

## 2.3 The Governing body has the responsibility to:

 Ensure the health and safety of staff and students, and anyone else on the premises or taking part in school activities (including activities taking place off-site, such a visits, outings or field trips);

- Ensure health and safety policies and risk assessments are inclusive of the needs of students with medical conditions;
- Make sure the Medical Policy is effectively monitored and evaluated and regularly updated;
- Ensure full insurance (e.g. liability cover) and provide indemnity to staff who volunteer to administer medicine.

# 2.4 The Headteacher has the responsibility to:

- Ensure the School is inclusive and welcoming and that the Medical Policy is in keeping with local and national guidance and frameworks;
- Ensure the Policy is put into action, with good communication of the Policy to all;
- Ensure every aspect of the Policy in maintained and kept up-to-date;
- Ensure that sufficient staff have received suitable training and are competent before they
  take on the responsibility of supporting children with medical conditions. This includes
  induction for new staff and briefings for Supply teachers.
- Ensure that the Medical Welfare Officer is adequately equipped, qualified and willing to carry out this role, and that first aid risk assessments are carried out regularly;
- Liaise between interested parties and report back to all key stakeholders about the implementation of the Medical Policy.

# 2.5 Teachers and other school staff have the responsibility to

- Be aware of the potential triggers and symptoms of common medical conditions and know what to do in an emergency;
- Ensure that they are familiar and up-to-date with the School's Medical Policy and standard procedures;
- Know which students in their care have a medical condition and which have special educational needs because of their condition and be familiar with the content of their IHCP;
- Allow all students to have immediate access to their emergency medication;
- Maintain effective communication with parents, including informing them if their child has been unwell at school;
- Ensure students who carry their medication with them have it when they go on a school visit or out of the classroom;
- Be aware of students with medical conditions who may suffer bullying or need extra social support;
- Understand the common medical conditions and the impact it can have on students;
- Ensure all students with medical conditions are not excluded unnecessarily from activities;
- Ensure students with medical conditions have adequate medication and sustenance during exercise;
- Be aware that medical conditions can affect school work and provide help when students need it;
- Liaise with parents if their child's learning is suffering due to a medical condition;
- Use opportunities such as Personal, Social Health Education (PSHE) and other areas of the curriculum to raise students' awareness of medical conditions.

# 2.6 The Medical Welfare Officer has the responsibility to:

- Help update school's Medical Policy;
- Help provide regular training to school staff in managing the most common medical conditions at school;
- Provide information about where the School can access other specialist training;
- Give immediate help to casualties in school;
- Ensure an ambulance or other professional help is called, when necessary;
- Keep accurate records of all medical information relating to students;
- Ensure that all staff who need to know are aware of a student's condition;

- Ensure that the first aid provision in school is up to standard and that any shortfalls in provision are identified and dealt with immediately;
- Ensure that parents are kept up-to-date.as appropriate, regarding the health of their child in school, or in the case of a serious injury.
- Report safeguarding concerns to the Designated Safeguarding Lead.

### 2.7 First Aiders have the 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.
- Replace the Medical Welfare Officer in case of absence.

# 3. INDIVIDUAL HEALTHCARE PLANS (IHCPs)

The School uses IHCPs to record important details of the needs at school for students with medical conditions, their triggers, signs, symptoms, medication and other treatments. Further documentation can be attached to the IHCP, if required.

# 3.1 Drawing up IHCPs

When a diagnosis is first communicated to the School, the parents, healthcare professional and student with a medical condition, are asked to fill out an IHCP together. Parents then return the completed form to the School (see Appendix 1- Form 1).

This School ensures that a relevant member of school staff is also present, if required to help draw up an IHCP for students with complex healthcare or educational needs.

# 3.2 School Individual Healthcare Plan register

IHCPs are used to create a centralised register of students with medical needs. The Medical Welfare Officer has responsibility for the register of these at this School.

# 3.3 Monitoring of IHCPs

Every student with an IHCP has their plan discussed and reviewed at least annually, or earlier if evidence is presented that the child's needs have changed.

Parents are expected to carry out any action which they have agreed to, as necessary, as a part of the IHCP implementation, e.g. provision of medicines and equipment or ensuring that they or a nominated adult are contactable at all times.

Students are required to act in a way which is compliant with their IHCP.

Visually, this is represented in the table below:

or is due to attend a new school, or is due to return to school after a long-term absence, or that needs have changed The Year Managers/Heads of Years with the Medical Welfare Officer co-ordinate a meeting to discuss the child's medical support needs, and identifies member of school staff who will provide support to the Student Meeting to discuss and agree on need for IHCP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence by them) Develop IHCP in partnership – agree who leads on writing it. Input from healthcare professional must be provided. School staff training needs identified Healthcare professional commissions/delivers training and staff signed off as competent – review date agreed IHCP Implemented and circulated to all relevant staff IHCP reviewed annually or when condition changes. Parent or healthcare professional to initiate

Parent or healthcare professional informs school that the child has been newly diagnosed,

## 3.4 Storage and access to IHCPs

All IHCPs are kept in the Medical Room by the Medical Welfare Officer, who has overall responsibility for keeping IHCPs up—to-date and accurate.

Parents, students, specialist nurse(s) (where appropriate) and relevant healthcare services must hold a copy of the IHCP. Other school staff, such as Pastoral Support Officers and Heads of Year will be made aware of, and have access to, the IHCPs for the students in their care.

The School seeks permission from students and parents to allow the IHCP to be sent ahead to emergency care staff, should an emergency happen during school hours or at a school activity outside the normal school day. This permission is included on the IHCP.

# 3.5 Use of IHCPs

IHCPs are used by the School to:

- Inform the appropriate staff and supply teachers about the individual needs of a student with a medical condition in their care;
- Remind students with medical conditions to take their medication when they need to and, if appropriate, remind them to keep their emergency medication with them at all times;
- Identify common or important individual triggers for students with medical conditions at school that bring on symptoms and can cause emergencies. The School uses this information to help reduce the impact of common triggers;
- Ensure that all medication which is stored at school is within the expiry date; -
- Ensure the School's local emergency care services have a timely and accurate summary of a student's current medical management and healthcare in the event of an emergency;
- Remind parents of students with medical conditions to ensure that any medication kept at school for their child is within its expiry dates. This includes spare medication

#### 4. MEDICATION

#### 4.1 Administration of medication

- The School understands the importance of students taking their medication as prescribed;
- All staff understand that there is no legal or contractual duty for any member of staff to administer medication or supervise a student taking medication unless they have been specifically contracted to do so. Where specific training is not required, any member of staff may administer prescribed and non-prescribed medicines to students under the age of 16, with parental consent;
- The administration of medication which is defined as a controlled drug (even if the student can administer themselves) should be carried out under the supervision of the Medical Welfare Officer;
- Where medicine has been prescribed, either for a set timescale or as an ongoing provision, the School must be notified in writing. It is important that parents do not send their children to school with prescribed medicine or other types of medicine without the knowledge of school staff;
- Any medication that is not labelled will not be administered.
- Other than in the exceptional circumstances where a medication has been prescribed to a
  child without the parent's knowledge, no student under the age of 16 will be given
  prescription or non-prescription medicines without their parent's written consent. In such
  an eventuality, the School will encourage the young person to involve their parent, but will
  respect their right to confidentiality;
- Wherever clinically possible, the School requests that medicines should be prescribed in dose frequencies which enables them to be taken outside school hours.

# 4.2 Storage of medication

# Safe storage – emergency medication (EpiPens)

- a. Emergency medication is readily available to students who require it at all times during the school day. If the emergency medication is a controlled drug and needs to be locked up, the keys are readily available from the Medical Welfare Officer.— There is only one key and its attached to the key ring with the key to the MI room and is left with Security or at reception when the Medical Officer is out or at lunch.
- b. All students carry their own EpiPens and Inhalers at all times and a spare is kept in the Medical Room.
- c. Students are reminded to carry their emergency medication with them.

#### Safe storage – non emergency medication

- a. All non-emergency medication is kept in a lockable cupboard in the Medical Room;
- b. Students with medical conditions know where their medication is stored and how to access it:
- c. Staff will ensure that medication is only accessible to those for whom it is prescribed.

# Safe storage – general

- a. The Medical Welfare Officer will ensure the correct storage of medication at the School.
- b. The Medical Welfare Officer must check the expiry dates of all medication stored at the School and contacts parents when it is due to expire or new stock is required.
- c. The Medical Welfare Officer, along with the parents of students with medical conditions, ensures that all emergency and non-emergency medication brought into school is clearly labelled with the student's name, the name and dosage of medication and the frequency of dose. This includes all medication that students carry themselves;
- d. Some medication may need to be refrigerated. All refrigerated medication is stored in an airtight container and is clearly labelled. This is in a secure area (locked fridge in the Medical Room), inaccessible to unsupervised students;
- e. It is the parent's responsibility to ensure new and up-to-date medication is brought into school on the first day of the new academic year. Any medication which is no longer required will be disposed of safely by the Medical Officer;
- f. The School disposes of needles and other sharp objects, in line with local authority procedures. Boxes containing sharp objects are kept securely in the Medical Room.

#### 5. RECORD KEEPING

- All parents are required, on entry to the School, to fill in a Confidential Health Information
  Form obtained from the Admission's Officer and are asked to update it at the start of every
  year.
- Medical Officer will contact parents to complete the IHCP when there is a medical condition.
- A database is kept on the central school system, which details students with medical conditions. Parents should inform the Medical Welfare Officer, Assistant Heads of Year and Heads of Year if there are any changes to a student's medical condition.
- The School must ensure that students' confidentiality is protected: student medical records
  are kept in the Medical Room in a locked drawer or cupboard and will only be accessed by
  the Medical Welfare Officer; the School seeks permission from students and parents before
  sharing any medical information with any other party, such as when a student takes part in
  work experience placement;
- The School keeps an accurate record of all medication administered, including the dosage, time, date and names of supervising staff (see Section 4, Medication) and of all Individual Health Care Plans (IHCP) see Section 3.4, Individual Health Care Plan.
- All medical incidents, both minor and major, and medical emergencies are logged;
- A list of the names of First Aiders is maintained centrally and can also be found in the Medical Room and the Staff Room. (would be great to be able to update that!)

#### 6. IN AN EMERGENCY

Relevant staff understand and are updated in what to do in an emergency for the most common serious medical conditions at this school. This includes how to contact emergencies services, what information to give and who to contact within the School.

- In an emergency situation, school staff are required, under common law duty of care, to act like any reasonably prudent parent. This may include administering medication;
- If a student needs to be taken to hospital, a member of staff will always accompany him/her and will stay with him/her until a parent arrives;
- The Medical Welfare Officer is responsible for making sure that everyone involved, and the hospital, is aware of the contents of a student's Individual Healthcare Plan in an emergency;

- Ambulances will not be delayed by waiting for parents to arrive at the School;
- Parents will be informed immediately of any medical emergency and told which hospital to go to;
- All students with medical conditions should have easy access to their emergency medication.
   Items such as inhalers and EpiPens are held by the student who must take the responsibility to have it to hand at all times;
- Students are encouraged to administer their own emergency medication (e.g. an EpiPen), where possible, and should carry it with them at all times unless it is a controlled drug, as defined in the Misuse of Drugs Act, 1971. This also applies to any off-site or residential visits.
- Students are encouraged to keep spare supplies of emergency medication in the Medical Room:
- For off-site activities, such as visits holidays and other school activities outside of normal timetable hours, a risk assessment will be undertaken to ensure students needing medication still have access, and a staff member is named as the responsible lead. The risk assessment also helps to identify any reasonable adjustments that need to be made.

#### 7. UNACCEPTABLE PRACTICE

Our staff recognise that it is not 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; 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;
- Penalise children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments;
- Prevent students 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; or 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.

# 8. COMPLAINTS

If parents or students wish to complain about how students with medical conditions are supported, they should do so by contacting the Year Managers/Heads of Year, in the first instance. The matter will then be dealt with directly or referred to a member of the Senior Leadership Team.

# **Appendices**

- Appendix 1 Individual Healthcare Plan Form (Form 1)
- Appendix 2 Confidential Health Information Form

#### Links to further Information

- Epilepsy
- Asthma
- Diabetes
- Anaphylaxis



# JFS School

# INDIVIDUAL HEALTHCARE PLAN For Students with medical conditions at school

Date form completed	
Date for review	
Copies held by	
1. Student's information	
Name of Student	
Home Group	Date of birth
Male Female	
Member of staff responsible for home-school communication	
2. Contact information	
Student's address	
	Postcode
Family contact 1	
Name	
Phone (day)	Mobile
Phone (evening)	Relationship with child
Family contact 2	
Name	
Phone (day)	Mobile
Phone (evening)	Relationship with child

GP	
Name	Phone
Specialist contact	
Name	Phone
3. Details of Student's medical conditions	
Signs and symptoms of this Student's condition:	
Triggers or things that make this Student's condition	n/s worse:
4. Routine healthcare requirements	
(For example, dietary, therapy, nursing needs or bef	
During school hours:	
Outside school hours	
5. What to do in an emergency	

# 6. Regular medication taken during school hours

# **Medication 1** Name/type of medication Dose and method of administration (the amount taken and how the medication is taken, eg tablets, inhaler, injection) When is it taken (time of day)? Are there any side effects that could affect this Student at school? Are there any contraindications (signs when this medication should not be given)? Self-administration: can Student administer the medication themselves? Yes, with supervision by: Yes No Staff member's name. Medication expiry date **Medication 2** Name/type of medication Dose and method of administration (the amount taken and how the medication is taken, eg tablets, inhaler, injection) When is it taken (time of day)? ..... Are there any side effects that could affect this Student at school? Are there any contraindications (signs when this medication should not be given)? Self-administration: can Student administer the medication themselves? Yes, with supervision by: Yes No Staff member's name.... Medication expiry date

# 7. Emergency medication (please complete even if it is the same as regular medication) Name/type of medication (as described on the container): Describe what signs or symptoms indicate an emergency for this Student Dose and method of administration (how the medication is taken and the amount) Are there any contraindications (signs when medication should not be given)? Are there any side effects that the school needs to know about? Self-administration: can Student administer the medication themselves? Yes, with supervision by: Yes No Staff member's name.... Is there any other follow-up care necessary? Who should be notified?

# 8. Regular medication taken outside of school hours

Specialist

Parents

(for background information and to inform planning for residential trips)
Name/type of medication (as described on the container):
Are there any side effects that the school needs to know about that could affect school activities?
9. Members of staff trained to administer medications for this Student
Regular medication.
Emergency medication
10. Specialist education arrangements required (eg activities to be avoided, special educational needs)
11. Any specialist arrangements required for off-site activities (please note the school will send parents a separate form prior to each residential visit/off-site activity)
12. Any other information relating to the Student's healthcare in school?

Parental and Student agreement I agree that the medical information contained in this plan may be shared with individuals involved with my/my child's care and education (this includes emergency services). I understand that I must notify the school of any changes in writing
Signed Date Student
Print name
Signed
Print name
Healthcare professional agreement
I agree that the information is accurate and up to date.
Signed
Print name
Permission for emergency medication
I agree that I/my child can be administered my/their medication by a member of staff in an emergency
I agree that my child <b>cannot</b> keep their medication with them and the school will make the necessary medication storage arrangements
I agree that I/ my child <b>can</b> keep my/their medication with me/them for use when necessary
Name of medication carried by Student
Signed
Head teacher agreement
It is agreed that (name of child)
Will receive the above listed medication in an emergency (see part 7)
This arrangement will continue until (either end date of course of medication or until instructed by the Student's parents).



# CONFIDENTIAL HEALTH INFORMATION FORM

(This forms part of the parental consent for School Visits)

In order to update your child's school health record please would you complete this questionnaire (see both sides). If you need help completing the form please contact the School.

1	Student	D - 4 - 1 -
	Student	LIGITALIC

(For girls) Have periods started yet?

	First Name		M	F	Date	of Birth	Tutor group (i	t known
Contact Information								
Contact Information								
/We may be contacted by telephoning	g the following	·		<b>4 3</b> 7				
Parent 1 Name:				2 N	ame:			
Email:		Em						
Home Phone:			me P					
Mobile Phone:			bile					
Work Phone:		Wo	ork P	hone	e:			
The home address is:		If re	eleva	int:				
Please contact (emergency contact) if	parent(s) unav	ailable:						
Name:	(Relation t					Telephone:		
Address:						Mobile Phone	:: ::	
								•••••
Name, address and telephone number	of Medical Pro	actice and fo	milv	ı do	etor			
Name of Medical Practice:	or wicuicar I I	actice and 16	<u>1</u>	, aut				
Name of GP:						Tel No:		
Address:						101110.		
11441000.						Post Code:		
•	le:				• • • • • • •			
•							Given	Date
<del>_</del>	given in the la	ast 10 years.					Given (please tick)	Date
mmunisation:  Please give details of immunisations  Primary ( Baby)	given in the la	ast 10 years.	Pr	re scl	nool Bo	poster (4-5 years)		Date
mmunisation:  Please give details of immunisations  Primary ( Baby)  1st Diphtheria /Whooping Cough/Tetanus/Polio	given in the la	ast 10 years.	Pr	re scl	nool Bo	poster (4-5 years)		Date
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Primary (Baby)  1st Diphtheria /Whooping Cough/Tetanus/Polio Primary  2nd Diphtheria/Whooping Cough/Tetanus/ Polio Primary  3rd Diphtheria/Whooping Cough/Tetanus / Polio Measles  MMR (Measles/Mumps and Rubella)  BCG (Tuberculosis) Hib (Meningitis)  Has your child attended any hospital of	Given (please tick)  or clinic for tre	Date  Date  atment or re	Pr Di 2n M M M M M M	re scliphthd Mileasles (enin	nool Bo leria/Te MR s/Mumps gitis C Recent Recent	poster (4-5 years) etanus/Polio and Rubella)  Diphtheria Tetanus Polio t year?	(please tick)	Yes
Primary ( Baby)  1st Diphtheria /Whooping Cough/Tetanus/Polio  Primary  2nd Diphtheria/Whooping Cough/Tetanus/ Polio  Primary  3rd Diphtheria/Whooping Cough/Tetanus/ Polio  Measles  MMR (Measles/Mumps and Rubella)  BCG (Tuberculosis)  Hib (Meningitis)  Has your child attended any hospital of yes, please give details	Given (please tick)	Date  Date  atment or re	Pr Di 2n M M M M M M	re scliphthd Mileasles (enin	nool Bo leria/Te MR s/Mumps gitis C Recent Recent	poster (4-5 years) etanus/Polio and Rubella)  Diphtheria Tetanus Polio t year?	(please tick)	Yes
Primary (Baby)  1st Diphtheria /Whooping Cough/Tetanus/Polio Primary  2nd Diphtheria/Whooping Cough/Tetanus/ Polio Primary  3rd Diphtheria/Whooping Cough/Tetanus / Polio Measles MMR (Measles/Mumps and Rubella) BCG (Tuberculosis) Hib (Meningitis)	given in the la  Given (please tick)  or clinic for tre  ctor in the last	Date  Date  atment or re 6 months?	Pr Di Di 2n M M M M M M M M M	re scliphth d Mileasle: lenin lore lore lore lore l	nool Bo nool Bo neria/Te MR s/Mumps gitis C Recent Recent	poster (4-5 years) etanus/Polio and Rubella)  Diphtheria Tetanus Polio  t year?	(please tick)	Yes
Primary (Baby)  1st Diphtheria /Whooping Cough/Tetanus/Polio  Primary  2nd Diphtheria/Whooping Cough/Tetanus/ Polio  Primary  3rd Diphtheria/Whooping Cough/Tetanus/ Polio  Measles  MMR (Measles/Mumps and Rubella)  BCG (Tuberculosis)  Hib (Meningitis)  Has your child attended any hospital of yes, please give details	given in the la  Given (please tick)  or clinic for tre  ctor in the last	Date  Date  atment or re 6 months?	Pr Di 2n (M M M M M M M M M M M M M M M M M M M	re scliphth d Mileasles denin fore I fore I	nool Boteria/TeMR MR S/Mumps gitis C  Recent Recent	Diphtheria Tetanus Polio  Diphtheria Tetanus Polio  t year?	(please tick)	Yes

Yes No

	Yes	No	Don't know			Ple	ase give details
Allergies (to medication e.g. penicillin, any particular foods, severe							
reaction to bites, heat etc.)  Asthma							
Diabetes							
Epilepsy							
Eczema/Psoriasis/Dermatitis							
Hay Fever							
Heart condition							
Sickle Cell / Thalassaemia							
Thyroid Disease							
Have you any concerns about	your chil	d's hea	lth:				
				Yes	No	Not Sure	Would you like this to be checked by the School Health Service?
Eyesight							
Does your child wear spectage	eles					N/A	N/A
Colour vision							
Headaches or Migraine							
Hearing: Deafness/ear diseas	e/ear troi	ıble					
Speech /Speech difficulties							
Emotional/Behaviour Proble	me						
		-)					
Toilet Problems/Bed-wetting		.S)					
Balance problems or clumsir		ъ.	,				
Growth/Weight/Eating Probl (Anorexia or Bulimia)	ems/Eati	ng Disc	order:				
Any other physical disability	or daval	onmon	t dalaw				
		opmen	uelay				
Any other serious medical pr	oblems						
If you have answered 'Yes' or	'Not Su	e' to a	ny of the ab	ove, ple	ase give	details:	
				• • • • • • • • • • • • • • • • • • • •			
				• • • • • • • • • • • • • • • • • • • •			
	, has you						
To the best of your knowledge has suffered from anything in If yes, please give details					•		
has suffered from anything in If yes, please give details Please outline any special diet	ary requi	rement	s of your ch	nild and s	pecify a	ny food	allergies.
has suffered from anything in If yes, please give details  Please outline any special diet Is there any other physical hea School Health Service?	ary requi	rement	s of your cl	nild and s	pecify a	any food	allergies.
has suffered from anything in If yes, please give details  Please outline any special diet Is there any other physical hea School Health Service?  ARATION	ary requi	rement	s of your cl	nild and s	pecify ε	nny foodould like	allergies.  to discuss with the
has suffered from anything in If yes, please give details Please outline any special diet Is there any other physical hea School Health Service?  ARATION dertake to inform the Teacher/Hea mencement of a school visit.	ary requi	rement r conce	s of your cl	nild and s child tha	pecify at you w	nny foodould like	to discuss with the
has suffered from anything in  If yes, please give details  Please outline any special diet  Is there any other physical heat School Health Service?  ARATION  dertake to inform the Teacher/Heat mencement of a school visit.  knowledge the need for compliance tee to my child receiving emergence rities present. I authorise the super	ary requi	rement r conce as soon JFS Sc treatme	erning your as possible of hool Rules a nt, including	child and s child tha of any cha und respor	t you w	ould like	allergies.  to discuss with the  Yes  Il circumstances between the date signer the part of my child, while on a school necessary by the medical YES
has suffered from anything in  If yes, please give details  Please outline any special diet  Is there any other physical heat School Health Service?  ARATION  dertake to inform the Teacher/Heat mencement of a school visit.  knowledge the need for compliance te to my child receiving emergence	ary requi	rement r conce as soon JFS Sc treatme	erning your as possible of hool Rules a nt, including	child and s child tha of any cha und respor	t you w	ould like	allergies.  to discuss with the  Yes  Il circumstances between the date signer the part of my child, while on a school necessary by the medical YES
has suffered from anything in  If yes, please give details  Please outline any special diet  Is there any other physical heat School Health Service?  ARATION  dertake to inform the Teacher/Heat mencement of a school visit.  knowledge the need for compliance tee to my child receiving emergence rities present. I authorise the sup- tain my signature is considered in	ary requi	rement r conce as soon JFS Sc treatme acher to	erning your as possible of hool Rules a nt, including	child and s child tha of any cha und respor	t you w	ould like	allergies.  to discuss with the  Yes  Il circumstances between the date signer the part of my child, while on a school necessary by the medical Consent required if the delay

Please indicate whether you agree to your child being given Paracetamol should s/he feel unwell during