# A screenshot of guidelines to support children with medical needs in schools

# Supporting children with Medical Needs in Early Years Settings

# September 2021

# Guidelines for supporting children with medical conditions in educational settings.

This template is designed to support settings to be able to develop a care plan for children with medical needs. It is a check list of what we would expect to see in a care plan and should be developed alongside the above document available to download from the following link which includes further information on risk assessments and roles and responsibilities.

<https://schools.essex.gov.uk/Pages/Search-Results.aspx?k=Supporting%20children%20with%20Medical%20Needs%20in%20School%20%20September%202021%20Guidelines%20for%20supporting%20children%20with%20medical%20conditions%20in%20educational%20settings>.

The Healthcare Plan should include:

* the medical condition, triggers, signs, symptoms and treatments
* the pupil’s needs and the impact on the child, including:

|  |  |
| --- | --- |
| * + details of any medication needed storage and disposals of medication, dose and method of administration
 |  |
| * + clinical procedures that need to be carried out, by whom, when and how
 |  |
| * + any tests that need to be undertaken and action to be taken depending on the results e.g., diabetes care
 |  |
| * what training is required and how this will be provided
 |  |
| * + description of what constitutes an emergency and what action should be taken and information required
 |  |
| * + written permission from parents that the medication can be administered either by a member of staff or self-administered by the pupil
 |  |
| * + facilities
 |  |
| * + equipment
 |  |
| * + plans that need to be put in place for setting trips and any other activities
 |  |
| * + access to food and drink where this is used to manage their condition,
 |  |
| * + dietary requirements
 |  |
| * + environmental issues, e.g.,
 |  |
| * + support for the pupil’s educational, social and emotional needs
 |  |



**Templates Supporting children with Medical Conditions** *(May 2014: Department of Education)* can be download from the link below. The templates can be adapted and used within your setting and the document includes the following.

Template A: individual healthcare plan

Template B: parental agreement for setting to administer medicine.

Template C: record of medicine administered to an individual child.

Template D: record of medicine administered to all children.

Template E: staff training record-administration of medicines.

Template F: contacting emergency services.

Template G: model letter inviting parents to contribute to individual healthcare plan development.

<https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/349437/Supporting_pupils_with_medical_conditions_-_templates.docx>

# Template A: individual healthcare plan - example downloaded and adapted.

|  |  |
| --- | --- |
| Name of setting |  |
| Child’s name |  |
| Room *e.g., 0-2’s preschool or room name* |  |
| Date of birth |  |  |  |  |
| Child’s address |  |
| Medical diagnosis or condition |  |
| Date |  |  |  |  |
| Review date *(this could be reviewed along with your one planning)* |  |  |  |  |
| **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 the setting |  |

Describe medical needs and give details of child’s symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.

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| --- |
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Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision.

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Daily care requirements *(what does this look like in practice)*

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Specific support for the pupil’s educational, social, and emotional needs

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Arrangements for setting visits/trips etc.

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|  |

Other information

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| --- |
|  |

Describe what constitutes an emergency, and the action to take if this occurs.

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Who is responsible in an emergency *(state if different for off-site activities)*

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Plan developed with (names of parents/carers and professionals involved)

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Staff training needed/undertaken – who, what, when

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Form copied to *and parental signature.*

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**Learning and Development**

What is the impact of the child’s medical condition on their learning and development? Please describe what this looks like in practice.

What provision have you implemented through your High-Quality Practice, Reasonable Adjustments or Ordinarily Available.

Has a one plan been implemented to support this child? If so, please attach making sure it sets out the graduated approach.

Yes [ ]

No [ ]

If you have not started a one plan, please explain the reason below.