



Olga Primary School

Supporting Children With Medical Needs Policy

Policy Date: July 2025
Review Date: July 2026

Introduction

This Policy will have regard to the following documents:

- Department for Education's Statutory Guidance, 'Supporting Pupils At School With Medical Conditions,' December 2015
- Children and Families Act 2014 (Section 100)
- Equality Act 2010
- Special Educational Needs and Disability Code of Practice, July 2014
- Guidance on the use of Emergency Salbutamol Inhalers in Schools, March 2015
- Statutory Framework for the Early Years & Foundation Stage, March 2017
- CHSS Model Health & Safety Policy, September 2016, Version 1.3
- Other School Policies, such as the Child Protection Policy, Special Educational Needs & Safeguarding Policy, First Aid Policy, Medical Care & Well Being Policy

The Policy has been developed with input from:

The Olga Medical Team:

Rebecca Adams - Assistant Headteacher, Lead for Inclusion and responsibility for SEND

Elijah Wilson - Medical Officer

Emma Brown - SEND Admin Assistant

School Nurse [NHS]

SLT:

Lisa Bradley-Jones - Headteacher

Jasmine Kodi - Deputy Headteacher

Alice Mentlak - Deputy Headteacher

Rebecca Adams - Assistant Headteacher, Lead for Inclusion and responsibility for SEND

1. Definitions Of Medical Conditions

Pupils' medical needs may be broadly summarised as being of two types:

- **Short-Term:** Affecting their participation at School because they are on a course of medication.
- **Long-Term:** Potentially limiting access to education and requiring on-going support, medicines or care (including emotional care) while at School to help them to manage their condition and keep them well, including monitoring and intervention in emergency circumstances. It is important that Parents feel confident that the School will provide effective support for their child's medical condition and that pupil's feel safe.

Some children with medical conditions may be considered disabled. Where this is the case governing bodies must comply with their duties under the Equality Act 2010. Some may also have Special Educational Needs (SEN) and may have a statement or Education, Health and Care Plan (EHCP).

Where this is the case this Policy should be read in conjunction with the 0-25 SEND Code of Practice and the School's SEN Policy and the Individual Healthcare Plan (IHP) will become part of the EHCP.

The United Nations Convention on the Rights of the Child

Article 23

Children With Disability. *A child with a disability has the right to live a full and decent life with dignity and independence, and to play an active part in the community. Governments must do all they can to provide support to disabled children.*

Article 6

Survival and Development. *Every child has the right to life. Governments must do all they can to ensure that children survive and develop to their full potential.*

Children at School with medical conditions should be properly supported so that they have full access to education, including School trips and physical education.

Olga Primary School is an inclusive School that aims to support and welcome children with medical conditions. Most children will at some time have short-term medical needs, perhaps entailing finishing a course of medicine such as antibiotics. Some children will have long-term and complex medical conditions and may require medicines or care to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances.

Olga Primary School recognises that each child's needs are individual. The School recognises that some children who require support with their medical conditions may also have special educational needs and may have a Statement or an Individual Education Health Care Plan. We will work in partnership with Parents, other Schools, Health Professionals and the Local Authority (LA).

In line with the School's Safeguarding duties, the School does not have to accept a child in School at times where it would be detrimental to the health of that child or others to do so. In line with government guidelines we would ask that children are not sent to School when they are clearly unwell or infectious.

2. Procedure To Be Followed When Notification Received That A Pupil Has A Medical Condition

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

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

We will ensure that Staff are properly trained and supervised to support pupils' medical conditions and will be clear and unambiguous about the need to actively promote pupils with medical conditions to participate on School trips, visits and sporting activities and not prevent them in doing so. We will make arrangements for the inclusion of such pupils in such activities where it is safe and practical to do so and after taking advice from the appropriate health professional.

Olga Primary School does not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on available evidence. This would normally involve some form of medical evidence and consultation with Parents/Carers. Where this evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place. These discussions will be led by a member of the Senior Leadership Team. Following these discussions, an Individual Healthcare Plan will be written, in conjunction with the Parent/Carers and class teacher by Waveney Herbert (Olga Primary School Nurse) and be put in place.

3. Roles & Responsibilities

The following roles and responsibilities are used for the Medical Conditions Policy at Olga Primary School. These roles are understood and communicated regularly during INSET once a year, they are also periodically referred to in Professional Development Meetings once a half term.

The Local Authority (LA):

- Promoting co-operation between relevant partners regarding supporting children with medical conditions.
- Providing support, advice, guidance and training to Schools and their Staff to ensure Individual Healthcare Plans (IHPs) are effectively delivered.
- Working with Schools to ensure children attend full-time, or otherwise making alternative arrangements for the education of children who need to be out of School for fifteen days or more per year due to a health need and who otherwise would not receive a suitable education.

The Governing Body:

The Governing Body is legally responsible and accountable for fulfilling their statutory duty to ensure that arrangements are in place to support children with medical conditions.

This includes:

- Ensuring that the School Policy identifies the roles and responsibilities of all those involved in the arrangements they make to support pupils with medical conditions.
- Ensuring that children with medical conditions enjoy equal access to the same opportunities as all children including trips, visits and sporting activities.
- Arrangements that show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and self-care.
- Ensuring Staff are trained and competent to provide the support that pupils need with medical conditions.
- Ensuring that the School Policy includes a process for the annual review of IHPs or earlier if evidence is presented that a pupil's needs have changed.
- Ensuring that written records are kept of all medicines administered to pupils.
- Ensuring that arrangements are in place for dealing with emergencies.
- Ensuring that this Policy sets out what practices are not acceptable.

The Headteacher:

- The correct level of insurance is in place for Staff who support children in line with this Policy.
- Staff are informed that the School has an adequate level of Public and Employers Liability Insurance.
- If necessary, facilitating the recruitment of Staff for the purpose of delivering the promises made in this Policy; and ensuring that more than one Staff member is identified, to cover holidays/absences and emergencies.
- Ensuring confidentiality and data protection.
- Assigning appropriate accommodation for medical treatment/care.

The Headteacher has final responsibility for the implementation of the following which have been delegated to Rebecca Adams, Assistant Head for Inclusion.

Lead for Inclusion and Medical Officer:

- This Policy is developed effectively with partner agencies and then making staff aware of this Policy.
- Staff understand their role.
- This Policy is managed and implemented day-to-day.
- The School has an appropriate amount of trained first aiders spread throughout the School.
- Liaising with healthcare professionals regarding the training required for Staff who support children with specific needs.
- Ensuring that the School Nurse is contacted about any child with a medical condition about which the Nurse is unaware.
- Identifying Staff who need to be aware of a child's medical condition.
- Ensuring that IHPs are produced where necessary.

- Ensuring that a sufficient number of trained members of Staff are available to implement and deliver IHPs in normal, contingency and emergency situations.
- There is a continuous two-way liaison with School Nurses and the School in the case of any child who has, or who develops, an identified medical condition.

Medical Officer & School Staff Members:

- Taking appropriate steps to support children with medical conditions and familiarising themselves with procedures which detail how to respond when they become aware that a child with a medical condition needs help.
- Knowing where any controlled drugs are stored and where the key is held. Controlled drugs are defined by the NHS here: <https://www.nhs.uk/chq/Pages/1391.aspx?CategoryID=73> and their list includes drugs such as morphine, methadone and pethidine.
- Knowing that emergency duplicate medicines such as EpiPens are kept in the Activity Room on the Ground Floor in a clearly labelled cupboard.
- Knowing that an emergency inhaler and a current list of children with permission to use it are located in the Activity Room on the ground floor and Year 6 Willow class on the Second Floor in a clearly labelled cupboard.
- Taking into account of the needs of children with medical conditions in lessons.
- Undertaking training to achieve the necessary competency for supporting children with medical conditions, with particular specialist training if they have agreed to undertake a medication responsibility.
- Ensuring that inhalers, EpiPens and blood glucose testers are held in an accessible location.
- Knowing what to do when they become aware that a pupil with a medical condition needs help.

School Nurses:

- In collaboration with other stakeholders, developing an IHP in anticipation of a child with a medical condition starting School.
- Notifying the School when a child has been identified as requiring support in School due to a medical condition at any time in their School career.
- Supporting Staff to implement an IHP; participating in regular reviews of the IHP; and giving advice on training needs.
- Provide advice and liaison relating to specific programmes.
- Liaising locally with lead clinicians; and assisting the Headteacher or designated Staff member(s) (currently Keith Broad and Victoria Wadge) in identifying training needs and providers of training.

4. Other Healthcare Professionals (incl GPs), Paediatricians & Specialist Local Health Teams Are Responsible For:

- Notifying the School Nurse when a child has been identified as having a medical condition that requires support at School.

- Providing advice on developing IHPs.
- Providing support in Schools for children with particular conditions e.g. Asthma, Diabetes or Epilepsy.

Parents/Carers:

- Keeping the School informed about any new medical condition or any changes to their child's health.
- Participating in the development and regular reviews of their child's IHP.
- Completing a Parental consent form to administer medicine or treatment before bringing medication into School.
- Providing the School with the medication their child requires and keeping it up to date (including collecting leftover medicine).
- Carrying out actions assigned to them in the IHP.
- Ensuring that they or any other nominated adult are contactable at all times.

Children:

- Providing information on how their medical condition affects them.
- Contributing to their IHP, where appropriate.
- Complying with the IHP and self-managing their medication or health needs if judged competent to do so by a healthcare professional and agreed by Parents.

5. The Pupil's Role In Managing Their Own Medication

- After having first discussed matters with the Parent/Carer and their child, a child may be encouraged to take responsibility for managing their own medicines and procedures as recorded in their IHP if it is felt they are competent.
- Wherever possible such pupils should be allowed to carry their own medicines and relevant devices or should be able to access their medicines themselves quickly and easily.
- An appropriate level of supervision should be provided.
- Where it is not appropriate for a pupil to self-manage, relevant Staff should help to administer and manage procedures.
- Where a pupil refuses to take medicines or carry out a necessary procedure, Staff should not force them to do so, but follow the procedure agreed in the IHP. The Parent should be informed and alternative options considered.

6. Staff Training

Any member of Staff providing support to a pupil with medical needs should have received suitable training. More generally Staff are provided with awareness training for supporting children with medical needs through regular PDM slots, TA meetings and MMS meetings.

Any Staff member is able to administer medicines in line with the instructions given on the prescription label, as it is acknowledged that in many cases written instruction on the medication container dispensed by the pharmacist may be considered sufficient. This includes Asthma pumps.

However, there will be medicines and procedures that require specific training to administer and, in these instances, we will be guided by medical professionals.

If in doubt about training needs the School Nurse and SENCo will make the final decision, having reviewed the training requirements recorded in the individual IHPs and taken advice from a healthcare professional.

- Suitable training is identified during the development of the IHP.
- A 'First Aid' Certificate does not constitute appropriate training in supporting pupils with medical conditions.
- The relevant healthcare professional leads on identifying and agreeing the type and level of training required, and how this can be obtained. This must include preventative and emergency procedures.
- Training should be sufficient to ensure that Staff are competent and have confidence in their ability to support pupils with medical conditions and to fulfil the requirements recorded in the IHPs.
- Healthcare professionals, including the School Nurse, will provide confirmation of the proficiency of Staff in a medical procedure or in providing medication and Staff will be sent on training at her recommendation.
- All Staff are provided with awareness training for supporting pupils with medical conditions and their role in implementing the Policy.
- Continuous Professional Development (CPD) opportunities for Staff are considered to underpin this Policy.
- Newly appointed teachers and support Staff will receive training on this Policy as part of their induction by the School Office and will receive relevant additional information from the SENCo and SLT about specific children in the class.
- Supply or agency Staff receive a Safeguarding at Olga Information Sheet which details where information about medical conditions within the class is located and are requested to familiarise themselves with that information. The Safeguarding at Olga Information Sheet also details medical emergency procedures.
- No Staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the condition and being signed off as competent, it is acknowledged though that in many cases this will be little more than a tacit agreement that the Staff member has the competency to read the prescription medicine and administer it. For more complex requirements training will be provided.
- It should be noted that in an emergency the government guidelines allow any adult to administer an EpiPen in the case of a life-threatening emergency when a trained person is not available. Instructions for their use are kept with the EpiPens.
- The School will keep a record of medical conditions supported, training undertaken and a list of Staff qualified to undertake responsibilities under this Policy.

7. Medical Conditions Register

- Schools admission forms request information on pre-existing medical conditions, which are then recorded in the School's Management Information Systems (SIMS) and on the

Medical Conditions Register. In addition, Parents must inform School at any point in the School year if a condition develops or is diagnosed.

- A medical conditions register is kept, updated and reviewed regularly by the nominated member of Staff. Staff have an overview of the list for the children in their care.

8. Individual Healthcare Plans (IHPs)

Individual Healthcare Plans (IHP's) will help to ensure that Olga Primary School effectively supports pupils with medical conditions. They will provide clarity about what needs to be done, when and by whom. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. They are likely to be helpful in the majority of other cases too, especially where medical conditions are long-term and complex. However, not all children will require one. The School, healthcare professional and Parent/Carer should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached the School Nurse will be best placed to take a final view. A flow chart for identifying and agreeing the support a child needs and developing an individual healthcare plan is provided at Appendix A

- Where necessary an IHP will be developed in collaboration with the child, their Parents/Carers, the Headteacher, the Special Educational Needs Coordinator (SENCo) and medical professionals.
- IHPs will be easily accessible to all relevant Staff, including supply and agency Staff, whilst preserving confidentiality. However, in the case of conditions with potentially life-threatening implications, the information will be made available to everyone via PDMs, posters in the Staff Room, posters around the School and a folder called Children with Medical Conditions and First Aiders, also kept in the Staff Room.
- IHPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.
- Where a child has an Education, Health and Care Plan or a Statement of Special Educational Needs, the IHP will be linked to it or become part of it.
- Where a child is returning from a period of hospital education, alternative provision or home tuition, the School will collaborate with the LA and the alternative provision to ensure that the IHP identifies the support the child needs to reintegrate.

The format for a IHP may be varied to suit the specific needs of each pupil and are kept by the School Nurse. There are care plans for:

Epilepsy (with medication)

Epilepsy (without medication)

Asthma (different age range)

Eczema Care Plan

Care Plan (for medical condition without medicine)

Care Plan (for medical condition requiring medication)

Allergies:

Mild to Moderate (with Asthma)

Mild to Moderate (without Asthma)

Severe allergies without Asthma (2 copies available. One copy instructs how to use Emerade Pen and the other an EpiPen Junior)

Severe allergies with Asthma (2 copies available. One copy instructs how to use Emerade Pen and the other an EpiPen Junior)

Olga Primary School asks all Parents and Staff to refrain from bringing any nuts or nut products into areas of the School where they are likely to come into contact with children, due to some children with severe allergies.

For those children who suffer with Asthma, information on how to deal with an Asthma attack can be found in the First Aid Policy.

9. Transport Arrangements

- Where a child with an IHP is allocated School transport the School should invite a member of the transport team who will arrange for the driver or escort to participate in the IHP meeting. A copy of the IHP will be copied to the Transport team and kept on the child record. The IHP must be passed to the current operator for use by the driver and / or escort and the Transport team will ensure that the information is supplied when a change of operator takes place.
- For some medical conditions the driver and / or escort will require training. For children who receive specialised support in School with their medical condition this must equally be planned for in travel arrangements to School and included in the specification to tender for that child's transport.
- When prescribed controlled drugs need to be sent into School, Parents will be responsible for handing them over to the adult in the bus / taxi in a suitable bag or container. They must be clearly labelled with name and dose, etc.
- Controlled drugs will be kept under the supervision of the adult in the bus / taxi throughout the journey and handed to a School Staff member on arrival.
- Any change in this arrangement will be reported to the transport team for approval or appropriate action.

10. Education Health Needs (EHN) Referrals

- All children of compulsory School age who, because of illness lasting fifteen days or more (consecutive or otherwise), would not otherwise receive a suitable full-time education are provided for under the local authority's duty to arrange educational provision for

such children. The School undertakes to initiate contact with the LA in these circumstances.

11. Medicines

- Prior to Staff members administering any medication, the Parents/Carers of the child must complete and sign a 'Permission to administer medication form'.
- No child will be given any prescription medicines without written Parental consent.
- No non-prescription medicines will be administered under any circumstances.
- No children at our School will ever be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.
- Medicines MUST be in date, labelled, and provided in the original container with dosage instructions. Medicines which do not meet these criteria will not be administered. The exception to this is insulin which must be in-date, but will generally be available to Schools inside an insulin pen or a pump, rather than its original container.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside School hours (i.e. 3 times per day).
- Asthma pumps and EpiPens are stored in labelled cupboards in relevant classrooms, or, in EYFS, the kitchen area. The School's Emergency Asthma pumps and EpiPens are kept in the Activity Room on the Ground Floor in a clearly labelled cupboard and in a clearly labelled box to the left of the main screen in the Large Hall. A third School Emergency inhaler is kept in Juniper on the Top Floor of the School. Clearly labelled medical supplies are also kept in the Activity Room.
- Each class has its own medical kit and there are additional kits in the Activity Room on the Ground Floor and in the Large School Hall in the cupboard nearest the serving hatches at the back of the hall.
- Any medications left over at the end of the course will be returned to the child's Parents
- Parents will be informed when medicine is out of date and given it back by the School Office.
- Written records will be kept of any medication administered to children.
- Children will never be prevented from accessing their medication.
- During School trips School adults will carry the First Aid bag and the children's medication/devices. In the case of EpiPens the adult must be EpiPen trained.
- In our primary School we do not envisage a scenario where a child who had been prescribed a controlled drug is competent to have it in their possession and, because of this, such drugs are highly likely to be under direct Staff supervision. We will keep any controlled drugs that have been prescribed for a pupil securely stored in a non-portable container under lock and key in the School Office and only named Staff will have access. Controlled drugs should be easily accessible in an emergency. A record should be kept of any doses used and the amount of the controlled drug held in the School.
- Staff administering medicines should do so in accordance with the prescriber's instructions. Olga Primary School will keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any possible side effects of the medication to be administered at School should be

noted, added to the medication record kept with the medicine and Parents/Carers informed.

- Written records are kept of all medicines administered to children. These records offer protection to Staff and children and provide evidence that agreed procedures have been followed.
- Medicines that are prescribed to a child must not be used by another child, even if they are taking the same medication. The medication is the property of the person whose name appears on the dispensing label, and should be returned to the Parent for disposal when no longer required.
- Medicines must be kept in their original container in which they were dispensed with the pharmacy label and information specific to that pupil; they must not be moved from one container to another, even if they are nearly empty. It would be considered to be secondary dispensing, which is illegal under the Medicines Act.

When administering medication, the following procedure should be followed:

- Check on the medication record whether a child has had a previous dose and whether they now need one.
- Check if the pupil has taken the medication before and if there were any problems. If there are any issues Parents need to be informed immediately.
- Check the expiry date on the container.
- The pupil should have the medication under the supervision of the person administering it.
- Record the details of this on the medication form.
- Make a clear, accurate and immediate record of all medicines administered or refused, recording dates and times of all medication given. All documentation must be in black ink, signed and dated by the person administering the medication.
- Olga Primary School Primary School cannot be held responsible for side effects that occur when medication is taken correctly.

12. Emergencies

- Medical emergencies will be dealt with under the School's Emergency Procedures as outlined in the School's First Aid Policy and included in Appendix B in this document.
- Children will be informed in general terms of what to do in an emergency (such as telling a teacher) via dedicated first aid and medicine assemblies once a term.
- If a child needs to be taken to hospital, a member of Staff will remain with the child until their Parents arrive.
- Where a child has an Individual Healthcare Plan, this should clearly define what constitutes an emergency and explain what to do. This should include: ensuring that all relevant Staff are aware of emergency symptoms and procedures; and that other pupils in the School should know what to do in general terms, such as informing a teacher immediately if they think help is needed.
- At Olga Primary School a "help card system" is used in an emergency. Each classroom and area of the School has a help card. In the classrooms these are kept on the wall near the phone. If an emergency happens in any area of the School, anyone (child or adult) can

take a help card to another member of Staff which informs them that help is needed immediately from a qualified first aider, the names of these are on the back of the card. Each card also has the name of the area where it came from.

- In an emergency the office can also be called on 101 or 106 from an internal phone.

13. Unacceptable Practices

These include:

- Preventing pupils from accessing their inhalers and medication and administering their medication when and where necessary.
- Assuming that every child with the same medical condition requires the same treatment.
- Ignoring the views of the Parent/Carer and/or pupil.
- Ignoring medical evidence or opinion.
- Requiring Parent/Carers or make them feel obliged, to attend School to administer medication or provide medical support.
- Sending a pupil home frequently with a medical condition.
- Sending a pupil who is unwell to the School Office or medical room unaccompanied or with someone unsuitable.
- Preventing pupils from drinking, eating or taking toilet or other breaks when they need to in order to manage their medical condition.
- Preventing or creating barriers in full participation of School life, such as trips, by requiring the Parent to accompany the child.

14. Day Trips, Residential Visits & Sporting Activities

- The School will ensure that children with medical conditions participate in School trips, residential stays, sports activities and so on, and will not prevent them from doing so unless on clinical advice from a healthcare professional.
- Risk assessments should be undertaken in order to plan for the inclusion of children with medical conditions (including consulting with Parents/Carers and health professionals as necessary, and considering how medications are to be stored and accessed during the trip, visit or activity).
- Teachers should be aware of how a pupil's medical condition will impact on their participation in an outdoor activity.

15. Indemnity & Liability

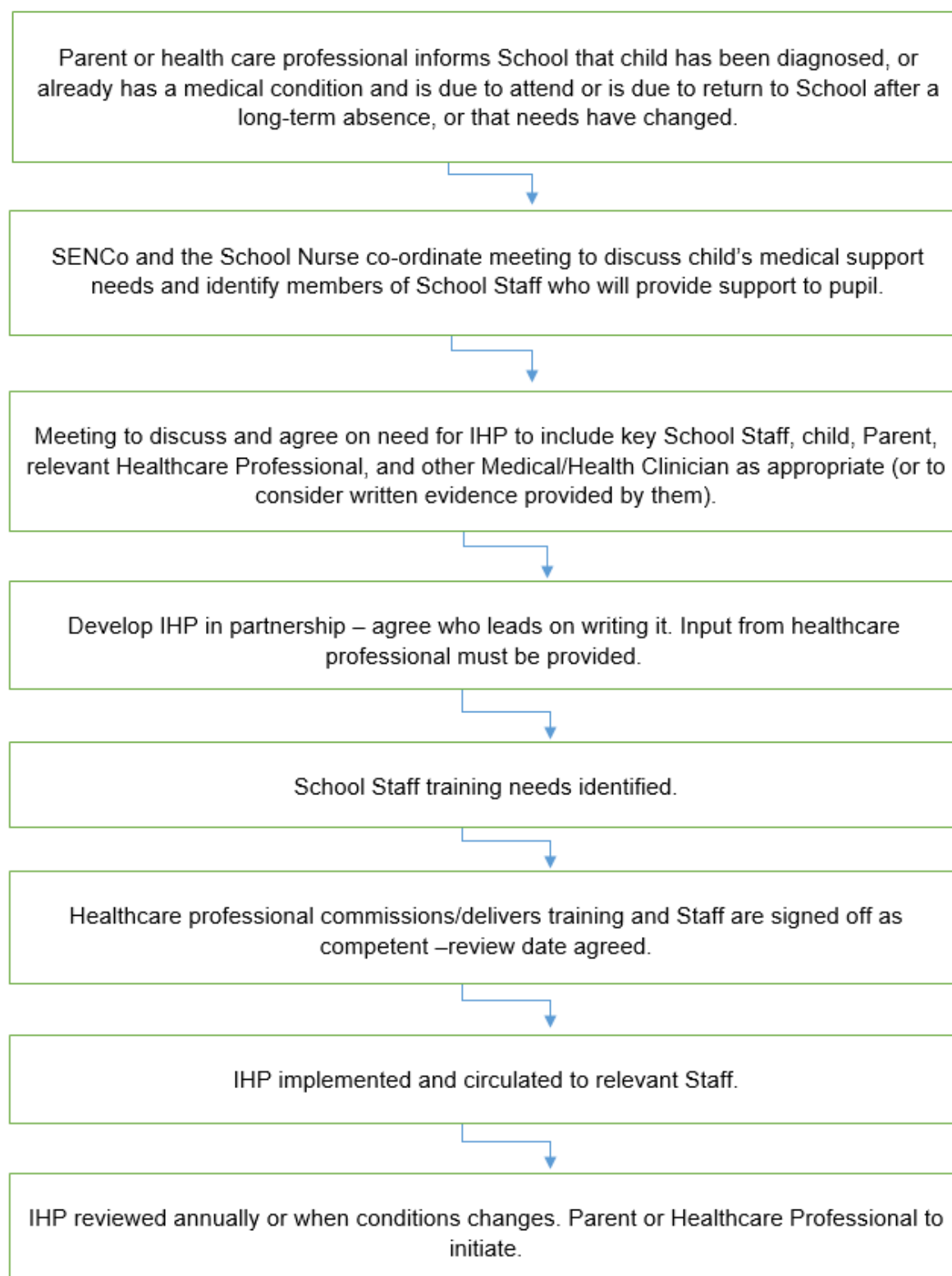
- Staff who undertake responsibilities within this Policy are covered by the LA / School's insurance.
- Full written insurance policy documents are available to be viewed by members of Staff who are providing support to children with medical conditions. Those who wish to see the documents should contact the Headteacher Lisa Bradley-Jones.

16. Complaints

- All complaints should be raised with the School in the first instance.

- A Parent or Carer wishing to make a complaint should speak to the Headteacher or put their complaint in writing. The Headteacher will do all that she can to resolve the matter. Complaints should be raised and addressed in accordance with the School's Complaints Policy.

Appendix A: Model Process For Developing Individual Healthcare Plans (IHPs)



Appendix B: Calling The Emergency Services

A help card is sent or a phone call is made to the office on 101 or 106 requesting medical assistance if a fully trained first aider isn't already present.

In the case of major accidents, it is the decision of the fully trained first aider, or the Headteacher, if the emergency services are to be called. Staff are expected to assist the trained first aider in their decision.

If a member of Staff is asked to call the emergency services, they must state: -

- What has happened.
- The child's name.
- The age of the child.
- Whether the casualty is breathing and/ or unconscious.
- The location of the School.

In the event of the emergency services being called, a member of Staff, usually a member of the admin Staff, should wait by the School gate to guide the emergency services into the School and accompany the medical Staff to the casualty.

If the casualty is a child, their Parents/Carers should be contacted immediately and given all the information required. If the casualty is an adult, their next of kin should be called immediately. All contact numbers for children and Staff are located in SIMs. The details of the child should be printed off and given to the ambulance crew when they arrive. If at all possible, a member of Staff should fill in an information form about the accident and give it to Parents or the ambulance crew to aid their treatment of the casualty.

Where a Parent/Carer needs to be contacted by telephone, they should be informed about the condition of their child and any developments without causing undue alarm. It is the responsibility of the office Staff to ensure that they keep up-to-date about the condition of the casualty and keep the Parents informed.

If driving a personal vehicle to Accident and Emergency, two adults must be present, one to drive and one to monitor the casualty.