



## MEDICAL QUESTIONNAIRE POLICY

TITLE	NAME OF STAFF MEMBER
Head Teacher	Claire Murdoch

### INTRODUCTION AND PRINCIPLES

All schools are required to maintain relevant health and welfare information about their pupils, in order that their individual health and welfare needs can be met. Parents who have accepted a place at the School will be invited to complete a medical questionnaire in respect of their child before they join the School. Completing the questionnaire with the historical information, and providing any subsequent relevant medical information, is necessary for the safe care of their child whilst at the School and is a mandatory requirement for parents.

This policy applies to all pupils in the School, including those in the Early Years Foundation Stage (EYFS) setting.

### SPECIFIC OBJECTIVES

The policy sets out:

1. The reasons for requesting information
2. Notes on the care we provide
3. The steps we take to keep the information secure but available to those staff who need it in an emergency
4. The information being requested (see the attachment)
5. Why it is important to keep the information up to date

### RELATED POLICIES

- **Special Educational Needs and Disabilities Policy**
- **Educational Visits Policy**

- **Educational Visits (EYFS) Policy**
- **First Aid Policy**
- **EYFS - Information for Parents Policy**
- **Health and Safety General Policy**

## REASONS FOR REQUESTING INFORMATION AND MEDICAL RECORDS RETAINED

A confidential medical record on each pupil is kept securely online. The medical record contains the information provided by parents, together with the medical questionnaire that the parents completed when their child joined the School.

Staff are provided with relevant medical information regarding the children whom they deal with. All staff are informed of food or other allergies.

All medical records are stored securely in the relevant file until the pupil's 25<sup>th</sup> birthday, when they will be securely destroyed or erased. Although our pupils normally receive their medical care from their family GP practice, the School needs medical information provided by parents on their children in order to ensure that it can provide appropriately for the pupils' medical needs, or look after them if they are injured or have an accident.

All parents of new pupils are requested to complete and return an online questionnaire and to provide any subsequent relevant information to the School office. The confidentiality and rights of pupils as patients are appropriately respected by the School in terms and the records are kept in secure conditions, with information made available only to those who may be required to provide care in need.

## THE MEDICAL CARE WE PROVIDE

### IF A CHILD IS INJURED OR BECOMES ILL

The School always has qualified First Aiders who hold a first aid certificate on site and for any regulated activity or trip outside the School. Children in EYFS will always take a qualified Paediatric First Aider on any regulated activity of outside trip.

The School will always contact parents either by telephone or by email if their child suffers anything more than a trivial injury, or if they become unwell during school day, or if the School has any worries or concerns about their health. All but very minor accidents are recorded on our Engage information system. The School may ask parents to collect their child if they become ill during the School day.

For our EYFS pupils all accidents or if any kind of first aid has been administered are recorded in the Accident (incident and illness) Book and a copy of the form is sent home in the child's bag at the end of the day. In addition parents are telephoned or emailed at the time of the first aid being administered

### EMERGENCY MEDICAL TREATMENT

In accepting a place at the School, parents authorise the Head Teacher, or an authorised deputy acting on their behalf, to consent to the advice of an appropriately qualified medical specialist to their child receiving emergency medical treatment, including general anaesthetic and surgical procedure under the NHS if the School is unable to contact the parents in time.

### MEDICATION BROUGHT TO SCHOOL BY PUPILS

Medication must be provided in the original packaging with the dose required and child's name clearly stated and handed directly to the School office staff. A member of the Office staff will administer medication at the prescribed time and record the dose given, in the presence of one other staff member. The record should be signed by both staff members. All medicine should be clearly marked with the child's name and correct dosage. Without this information being provided, staff are not allowed to administer medicine. If a child has a medical condition which necessitates regular access to medication, the Head Teacher must be informed, so that an appropriate regime can be devised. The relevant academic and pastoral staff will be informed, in strict confidence, of any condition that is likely to affect the child in any area of school life.

The School's **EYFS policy** describes the arrangements for the youngest pupils when they first join the school.

### SUBSEQUENT EVENTS AFTER ENTRY TO THE SCHOOL

Parents are required to inform the School of any conditions, which develop in the course of the pupil's time at the School, including allergies, injuries or other occurrences that might have a bearing on their medical situation whilst at the School.

Claire Murdoch  
Head Teacher  
September 2023

Review approved by Deborah Livsey CEO  
New Model School Company Limited

September 2023

Next review date: August 2024

# Medical Questionnaire and Consent Form – Maple Walk School

Dear Parents,

Please could you fill in this medical information form and submit it as soon as possible.

Please note that under the terms of the Parent Contract you have undertaken to inform the School of any health or medical condition, disability or allergy that your child has or subsequently develops, whether long or short term, including any infections. You have consented to our processing your child's medical records and disclosing details of any medical condition when it is in the child's best interests to do so. Please refer to our Privacy Notice on the School website for further details on how we process personal data.

Please also note that in accordance with the Parent Contract the School is entitled to treat an instruction from one person with parental responsibility as being given on behalf of all persons with parental responsibility.

If your child requires medication, please could you come to the office and fill in a form with precise instructions on dosage, time and duration of the treatment. We may also require a doctor's letter.

Should you be unable to come yourself, please send a detailed email and ask the person dropping off your child to bring the medication into the office. Children are not allowed to take any medication without supervision.

Any questions, please contact us on the following email address:

[office@maplewalkschool.co.uk](mailto:office@maplewalkschool.co.uk)

Kind regards,

\* Required

**Child's Surname: \***

**Child's First Name: \***

**Date of Birth: \***

**Year of entry at Maple Walk School: \***

The calendar year your child is joining the School

**Details of any allergies or sensitivities to food, medication, pets or insect stings:**

**As the result of the above does your child carry any of the following:-**

*Check all that apply.*

- epipen
- inhaler

**Details of any chronic or recurring medical conditions needing regular or occasional medication or treatment:**

We may require a doctor or consultant's letter and/or further professional information to ensure that we are able to act in your child's best interests at all times.

**History of any serious illnesses or injuries requiring admission to hospital:**

**Could you let us know if there any other conditions that might affect your child in his or her school life:**

**Does your child require glasses / hearing aid? \***

*Mark only one oval.*

- Yes
- No

**If yes, please provide details below:**

**Are childhood immunisations up to date? \***

*Mark only one oval.*

- Yes
- No

**Date of last Tetanus jab \***

**GP's Name: \***

**GP's address: \***

**GP's telephone number: \***

**I give consent for my child to have plasters and antiseptic wipes applied at school: \***

*Mark only one oval.*

- Yes
- No

**I give consent for my child to receive general treatment and first aid services at school from a qualified First Aider: \***

*Mark only one oval.*

- Yes
- No

**In case of emergency, I give permission for my child to receive emergency medical treatment by healthcare professionals if the School is unable to contact you in time: \***

*Mark only one oval.*

- Yes
- No